

109971

Skamania

BOOK 120 PAGE 446

State of Washington
Before the Secretary, Department of Social and Health Services

RELEASE - PARTIAL RELEASE OF LIEN

Notice is hereby given that the Department of Social and Health Services, State of Washington, filed a lien with the County Auditor of Skamania County, Washington, on or about the Twenty-Third day of August, 1990 bearing recording number UNKNOWN, bearing name of Robert E. Morris

Notice is hereby given that this lien is released ☒ in full, ☐ partially. If partially released, this release is effective only as to the following described property:

FILED FOR RECORD
SKAMIA CO WASH
BY DSHS

AUG 31 11 25 AM '90

GARY H. OLSON

In witness thereof, I W. Goodpaster of the Office of Support Enforcement of the Department of Social and Health Services, State of Washington, have executed this instrument for and on behalf of said Department of Social and Health Services.

Dated at Vancouver, Washington, this Twenty-Ninth day of August, 1990.

W. Goodpaster
Authorized Representative

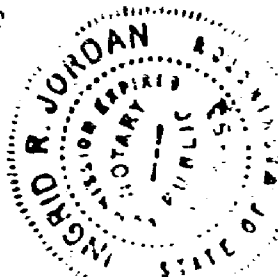
State of Washington)
County of Clark)

On this day, the undersigned Notary Public in and for the state of Washington, do hereby certify that W. Goodpaster appeared before me, (s)he being known as the individual who executed the above instrument, and acknowledged that (s)he signed the same and that (s)he is authorized to execute this instrument.

In witness whereof I have hereunto set my hand and affixed my official seal on the Twenty-Ninth day of August, 1990.

Inquiry shall be made to:
OFFICE OF SUPPORT ENFORCEMENT
111 W 39th ST
P O Box 4269
Vancouver, WA 98662-0269

In reply, refer to D #: 640014



Ingrid R. Jordan
Notary Public in and for the State of Washington
My commission expires on 8-10-93

Registered
Indexed, Sir
Indirect
Filed 9-7-90
Mailed