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

RELEASE - PARTIAL RELEASE OF LIEN

filed a lien with the County Auditor o Fourth day of December, 1990	tment of Social and Health Services, State of Washington, Skamania County, Washington, on or about the hearing recording number of James O. Huffman
In witness thereof, I B. Sorensen	Simple of the Office of Support Enforced Health Services, State of Washington, have executed this
instrument for and on behalf of said	Department of Social and Health Services.
Dated at Kennewick	, Washington, this Twenty-Pourth day of June, 1992.
State of Washington County of Benton	Authorized Representative
On this day, the undersigned Notary Public in and for the state of Washington, do hereby certify that B. Sorensen appeared before me, (s)he being known as the individual who executed the above instrument, and acknowledged that (s)he signed the same bad, that (s)he is authorized to execute this instrument.	
In witness whereof I have hereunto s Twenty-Fourth day of June, 1992 Inquiry shall be made to: OFFICE OF SUPPORT ENFORCEMENT	Set my hand and affixed my official seal on the Sugar Public in and for the State of Washington
500 N Morain, Suite 2210 PO Box 5550, MS: L3-3 Rennewick Wa 99336-0550	My commission expires on April 15 , 19 94.
In reply, refer to D #: 730907	
OSMS 3-235 Fa. 5 85:	Indexed, wir D Indirect Filmed 7/9/92 (1548 925624 161104)