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

RELEASE - PARTIAL RELEASE OF LIEN

filed a lien with the Cour	ity Auditor of Skamania	tieari	State of Washington, n, on or about the ng recording number
Notice is hereby given the this release is effective of	eat this lien is released only as to the following		DS#S WASH O JU 59 AM '89 ARY LOSSON
In witness thereof ! R. ment of the Department instrument for and on be	of Social and Health Se	of the Offic prvices, State of Washingto t of Social and Health Serv	e of Support Enforce— on, have executed this ices.
Dated at Vancouver	, Washin	gton, this Sixth day of N	Sell
State of Washington	\sim		
County of Clark			
(Lat on m. 71	the above instrument,	nd for the state of Washin ppeared before me, (s)he t and acknowledged that (s) ent.	ighte known as the
In witness whereof I have Sixth day of November	ve hereunto set my han :, 1989.	d and affixed my officialse	
Inquiry shall be made to OFFICE OF SUPPORT END 111 W 39TH ST P O BOX 4269 VANCOUVER, WA 98662-	FORCEMENT	Notary Public in and for the State My commission expl	of Wastungton
In reply, refer to D #: 5	Registered Arrow Indexed, Life Arrow		S TON S
OSHS 9 296 (Rev 5:85)	Filmed //- 77-89 Mailed		(1871 891106 142412)