108511

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Skamania

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

RELEASE - PARTIAL RELEASE OF LIEN

filed a lien with the County Au Fourteenth day of December	Department of Social and Health Services, State of Washington, ditor of Skamania County, Washington, on or about the 1989 bearing recording number name of Matthew C. Townsend	
Notice is hereby given that thi this release is effective only as	lien is released X in full, partially. If partially released, to the following described property:	
	BA DELLE MENTERS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
In witness thereof, I P. Steven ment of the Department of Soci instrument for and on behalf o	s of the Office of Support force of support force of support force of the Office of the Offic	
Dated at Vancouver	, Washington, this Second day of January, 1990. Authorized Representative	
State of Washington		
County of Clark		
that P. Stevens individual who executed the ab that (s)he is authorized to exec	into set my hand and affixed my official seal on the	
Inquiry shall be made to: OFFICE OF SUPPORT ENFORCEME 111 W 39th ST P O Box 4269	Delmar Llophie 7:1113	
Vancouver, WA 98662-0269	July 4, 19 91.	
In reply, refer to D #: 586069		
OSHS 9-296 (Rev 5/85)	Registered	
그리는 이번 이렇게 함께 하는 것이 되는 것이 되었다. 12 1일 : 10 1일	PERMICAL STREET, STREE	