BOOK 120 PAGE 886

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

RELEASE - PARTIAL RELEASE OF LIEN

Notice is hereby giver that the Departmen filed a lien with the County Auditor of Ska Twenty-Fifth day of May, 1989 107081 BK114 PG219 . bearing name of Ja	t of Social and Health Services, State of Washington, mania County, Washington, on or about the bearing recording number times S. Marston 544-54-5469
Notice is hereby given that this lien it rele this release is effective only as to the follo	ased X in full, partially. If partially released, pwing described property:
	STANDS BY WS HS BY WARY SARY CS
In witness thereof, I A.Yong ment of the Department of Social and Heal instrument for and on behalf of said Department.	of the Office of Support Butorde— th Services, State of Washington, have executed this tment of Social and Health Services.
Dated at Vancouver , Wa	shington, this Second day of October, 1900.
	Authorized Rapreseriative
State of Washington	
County of Clark	
MINU ACCING THE RESERVE OF THE PERSON OF THE	in and for the state of Washington, do hereby certify appeared before me, (s)he being known as the ent, and acknowledged that (s)he signed the same and ument.
In witness whereof I have hereunto set my Second day of October, 1990.	hand and affixed my official seal on the
Inquiry shall be made to:	Las Markocard
OFFICE OF SUPPORT ENFORCEMENT 111 W 39th ST	Notary Public, in and for the State of Washington. My commission expires on
P O Box 4269 Vaneouvar, WA 98662-0269	
Terenty Peror to 0. #: 566331	fully 4 , 19 91.
A control of	Registered E Indoxed, Dir a 2
	ledired p
DSHS 9-298 (Rev 5/85)	(1871 901003:135214)