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 filed a lien with the County Auditor of Skamar Thirtieth day of January, 1987 UNKNOWN , bearing name of Phil	hearing reporting
Notice is hereby given that this lien is release this release is effective only as to the following	H. A.
	Registered Indexed, Dir Indexed, Dir Indirect In
In witness thereof, I K. Nygaard ment of the Department of Social and Health instrument for and on behalf of said Department	of the Office of Support Enforce-
Dated at Vancouver , Washi	ngtor, this Bighth day of April, 1991.  Authorized Representative
State of Washington	1
County of Clark	
	and for the state of Washington, do hereby certify appeared before me, (s)he being known as the and acknowledged that (s)he signed the same and ent.
in witness whereof I have hereunto set my han Righth day of April, 1991.	id and affixed my official seal on the
Inquiry shall be made OFFICE OF SUPPORT ENFL 'EMENT 111 W 39th ST P O Box 4269	Notary Public, in and for the State of Washington, My commission expires on 2 1011 S.
Vancouver, WA 98662-0269	5-1 36,033
In reply, refer to D #: 518835	/ 10 1

DSHS 9-295 (Rev 5/85)