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

RELEASE - PARTIAL RELEASE OF LIEN

| filed a lien with the County Auditor of Twanty-First day of September, | |
|--|--|
| Notice is hereby given that this lien this release is effective only as to the | is released 🗷 in full, 📋 partially. If partially released, e following described property: |
| | FILL PRECORD SE DEHE |
| | SEP 10 11 56 M1 "91 Emparal |
| | |
| Dated at Vancouver | , Wasinington, this Fifth day of September, 1991. May Authorized Marrasentativa |
| State of Washington | |
| County of Clark | |
| that S.M. PARR | Public in and for the state of Washington, do hereby certify appeared before me, (s)he being known as the istrument, and acknowledged that (s)he signed the same and is instrument. |
| in witness whereof I have hereunto : Fifth day of September, 1991. | set my hand and affixed my official seal on the |
| Inquiry shall be made to: OFFICE OF SUPPORT ENFORCEMENT 111 W 39th ST | Notary Physic, in and for the State of Washington. 41 19714/1 My commission expires on |
| P O Box 4269 Vancouver, WA 98662-0269 | ENO 719 77-5 |
| In reply, refer to D #: 510882 | Registered 6 Indexed, b.r 2 Indirect Filmed Mailed |
| DSHS 9-298 (Rev.5/85) | (1580 910905.075204) |
| | Organisation of the property of the second s |