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RETURN TO: Department of Social and Health Services Office of Financial Recovery P O Box 9501 Olympia, Washington 98507-9501



**RELEASE OF LIEN** 

RECORDING NUMBER: 121989

VOLUME: 1/19, PAGE: 87

DATED: APRIL 3, 1995

GRANTOR/CREDITOR: DSHS, Office of Financial Recovery

GRANTEE/DEBTOR: BRADFORD, PENNY L SOCIAL SECURITY NUMBER: 532-82-9452

BIRTHDATE: 10-10-1963

Notice is Hereby Giver That the State of Woshington, Department of Social and Health Services, does hereby release the lien filed with the County Auditor of SKAMANIA County, Washington or or about APRIL 3, 1995 bearing recording number 1/21989.

/ / /	DEF. IRTMENT OF SOCIAL AND HEALTH SERVICES
State of Washington ss.	The Loony
County of Thurston	Authorized Representative Phone: (360) 664-5700 1-800-562-6114 (Washington Toll Free)
certify that Lue The	Anning the state of the state o
I certify that	appeared before me, and signed this instrument as a DSHS act for the aurpease mentioned in this document.
1(	Do Vaulinm
Dated: September 13, 1999	Notary Public in and for the State of Washington
RELEASE OF LIEN DSHS 09-040A (09/1696)	Manual My appointment explices: 09-28-02