## 137217

RETURN: Department of Social and Health Services idedical Assistance Administration COB Casualty Unit P.O. Box 45561 Olympia, WA 98504-5561 POOR 196 PAGE 90
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## RELEASE OF LIEN

Recording Number: 135747

Volume: 191 Page: 453

Dated: July 16, 1999

Grantee/Creditor; Diana L. Chappelle

Grantor/Debtor: DSHS and Jody M. McKenzle

Date of Injury: 1-5-99

Notice is hereby given that the State of Washington, Department of Social and Health Services, does hereby release the lien filled with the County Auditor of Skamania County, Washington on or about July 16, 1939, bearing recording number 135747.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

Sandra Elder, Medical Assistance Specialist

STATE OF WASHINGTON)
JSS.
COUNTY OF THURSTON )

I, Cyn!hia Brown, Notary Publ s in and for the State of Washington, do hereby certify that on this 17th day of Lecember, 1999, persons happeared before me Sandra Ekfer, to me known to be the individual who executed the above in trument and acknowledged that she signed the same and that she is authorized to execute this Release of Lien on behalf of the Department of Social and Health Services.

er ital and and official seal this 17th day of December, 1999.

NOTARY PUBLIC IV and for the State of

Washington.

My appointment expires July 8, 2001.

1-800-562-6136 Ext; 5-1209 Fax: (360) 753-3077 DSHS 9-40 (Rev. 7/90)