800FZ56 PAGE 725

FILED FOR FECORD SKAMANG BY DSH SWASH JAN 15 3 05 PH 104 J. MICHALL LOR

## A)

RETURN RECORDING INFORMATION TO:
Department of \$\mathbb{E}\$ xial and Health Services
Financial Services Administration
Office of Financial Recovery
PO Box 9501
Olympia WA 98507-9501

| Recording number:   | 127427                  | PARTIAL RELEAS                                    | <b>5</b>   |
|---|-------------------------|---|--|
| Volume number:<br>Book and Page No:<br>Grantee or Creditor: | 162                     |   |  |
|   | 895                     |   | •  |
|   | DSHS, Financial Service | es Administration, Office of F                    |  |
| Grantor or Debtor:  | LAFAZIO, FAWNET         | TE L  |  |
| doing business as:  | *                       |   | , also known as or   |
| The State of Wast   |                         |   |  |
| on 2/25/1997 . Ti   | he state of Washington  | Intified above with the SKA                       | MANIA County Auditor   |
| 🛭 In full:  |                         |   |  |
| ☐ The following p   | property:               |   |  |
|   |                         |   | Copression /   |
| C Partial misses as at 11                                   |                         |   | Market Un ZZ   |
| Partial release as described below:                         |                         |   | "Isried  |
|   |                         |   | To the state of th |
| Client Recovery P   | rogram                  | ROBERT SHILLEY                                    |  |
| Contact   |                         |   |  |
| 1-800-562-6114<br>Telephone Number                          |                         | AUTHORIZED REPRESENTAT<br>DEPARTMENT OF SOCIAL AN | D HEALTH SERVICES  |
|   |                         | 1/6/2004  | EIII SERVICES  |
| In reply, refer to:   |                         | Date  |  |
| Case# 544801883   | :BII                    |   |  |

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