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Department of Social and Health Services Medical Assistance Administration **COB Casualty Unit** P.O. Box 45561 Olympia, WA 98504-5561 FOOK 196 PAGR 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. McKenzie

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 filed with the County Auditor of Skarnania County, Washington on or about July 16, 1999, bearing recording number 135747.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

Sandra Elder, Medical Assistance Specialist

STATE OF WASHINGTON)

)ss. COUNTY OF THURSTON)

I, Cynthia Brown, Notary Public in and for the State of Washington, do hereby certify that on this 17th day of December, 1999, personally appeared before me Sandra Elder, to me known to be the individual who executed the above instrument 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.

and official seal this 17th day of December, 1999

NOTARY PUBLIC IN and for the St Washington.

My appointment expires July 8, 2001.

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