Doc # 2004152283
Page 1 of 1
Date: 03/15/2004 04:32P
Filed by: DEPT OF SOCIAL & HEALTH SVCS
Filed & Recorded in Official Records
of SKAMANIA COUNTY
J. MICHAEL GARVISON
AUDITOR
Fee: \$0.00

**DIVISION OF CHILD SUPPORT** 

PO BOX 11520 TACOMA WA 98411-5520



## STATE OF WASHINGTON DEPARTMENT OF SOCIAL AND HEALTH SERVICES DIVISION OF CHILD SUPPORT (DCS)

## **RELEASE - PARTIAL RELEASE OF LIEN**

Recording number:	148196		
Volume number:	000239		
Page number:	00000944	<b>7</b> 7	4.
Grantor or Creditor:	The Department of Social ar	nd Health Services.	. 1
Grantee or Debtor: doing business as:		OOB 05/31/76	, also known as or * ,
County Auditor on A	ed above in full.	S releases:	
Only the portion	n of the lien identified above	that applies to the following	3 property.
March 10, 2004		J. Morgan	
Date		Authorized Representative DIVISION OF CHILD SUPPORT	
		(360) 696-6100	<u>.                               </u>
In reply, refer to:		Telephone Number	•

RELEASE - PARTIAL RELEASE OF LIEN DSHS 09-296 (REV. 03/1997)

Case #: 1638802

(FG REL:02/2000) (2920:040310:224151) 1638802/2920