Doc # 2004153510 Page 1 of 1 Date: 06/28/2004 04:12P
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:	148802		-
Volume number:	000242		
Page number:	00000849		4.
Grantor or Creditor: The Department of Social and Health Services.			
Grantee or Debtor: doing business as:		OB <u>08/24/58</u>	also known as or
The Division of Chill County Auditor on I		n identified above with the something somethin	Skamania
Only the portion	n of the lien identified above	that applies to the following	; property.
June 24, 2004		R. Opoka	•
Date	<del></del>	Authorized Representative DIVISION OF CHILD SUPPORT	
		(360) 696-6100	
In nambe noton to		Telephone Number	
In reply, refer to:	78830 1709182		
Case #: 47	10030 T102T07		

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

(FG REL:02/2000) (2374:040624:000834) 478830/2374