



**RETURN RECORDING INFORMATION TO:**

Department of Social and Health Services  
Financial Services Administration  
Office of Financial Recovery  
PO Box 9501  
Olympia WA 98507-9501

**LIEN RELEASE - PARTIAL RELEASE**

Recording number: 2004155247  
Volume number: \_\_\_\_\_  
Book and Page No: \_\_\_\_\_  
Grantee or Creditor: DSHS, Financial Services Administration, Office of Financial Recovery  
Grantor or Debtor: EMERSON, ELMO H, also known as or  
doing business as: \_\_\_\_\_

The State of Washington filed the lien identified above with the SKAMANIA County Auditor on 11/18/2004. The state of Washington releases the lien:

- ☒ In full:  
☐ The following property:  
☐ Partial release as described below:

**Estate Recovery Program**

Contact  
**1-800-562-6114**  
Telephone Number

**SHANNON KENELTY**

AUTHORIZED REPRESENTATIVE  
DEPARTMENT OF SOCIAL AND HEALTH SERVICES

2/22/2006

Date

In reply, refer to:  
**Case# 003451978 ER**