AFN #2010176144 Recorded 08/10/10 at 11:08 AM DocType: CHILD Filed by: DEPT OF SOCIAL & HEALTH SERVICES Page: 1 of 1 Auditor Timothy O. Todd Skamania County,

> DIVISION OF CHILD SUPPORT PO Box 11520 Tacoma WA 98411-5520

| 飜 | Washington State Department of Social & Health Services |
|----|---------------------------------------------------------|
| 剂川 | Department of Social & Health Services |

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

| IDCS Division of Child Support | RELEASE - PARTIAL RELEASE OF LIEN |
|----------------------------------------------|-------------------------------------------------------------------------------|
| Recording number: | |
| Volume number: | 000000 |
| Page number: | 00000000 |
| Grantor or Creditor: | The Department of Social and Health Services. |
| Grantee or Debtor: doing business as: | JONATHAN ALLEN SPEARS , also known as or JON ALLEN SPEARS , |
| 4 4 | SSN <u>XXX-XX-7022</u> , DOB <u>03/24/1968</u> . |
| The Division of Child County Auditor on _ | Support (DCS) filed the lien identified above with the SKAMANIA DCS releases: |
| X The lien identifie | d above in full. |
| Only the portion | of the lien identified above that applies to the following property. |
| August 06, 2010 | |
| Date | Authorized Representative DIVISION OF CHILD SUPPORT |
| (800) 345-9984 | · |
| Telephone Number | |

In reply, refer to: Case #: 1009442

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



FG VER: (1.4) 3939:08062010/ 1009442 / 3939