AFN #2010176857 Recorded 11/04/10 at 03:23 PM 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

删	Washington State Department of Social & Health Services
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STATE OF WASHINGTON DEPARTMENT OF SOCIAL AND HEALTH SERVICES DIVISION OF CHILD SUPPORT (DCS)

DC\$ Division of Child Support

	RELEASE - PARTIAL RELEASE OF LIEN
Recording number:	
Volume number:	000000
Page number:	0000000
Grantor or Creditor:	The Department of Social and Health Services.
Grantee or Debtor: doing business as:	DANIEL A JAMISON , also known as or ,
- 4	SSN <u>XXX-XX-9482</u> , DOB <u>07/08/1958</u> .
The Division of Child County Auditor on	Support (DCS) filed the lien identified above with the SKAMANIA . DCS releases:
The lien identifie	d above in full.
	of the lien identified above that applies to the following property.
November 02, 20	10 M JACKSON
Date	Authorized Representative DIVISION OF CHILD SUPPORT
(800) 345-9984	· · · · · · · · · · · · · · · · · · ·
Telephone Number	
In reply, refer to:	00013182640041746970000000362506
Case #: 1318264	•

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

FG VER: (1.4) 4560:11022010/ 1318264 / 4560