AFN #2014001162 Recorded 07/17/2014 at 04:04 PM DocType: CHILD Filed by: DEPT OF SOCIAL & HEALTH SERVICES Page: 1 of 1 Auditor Timothy O. Todd Skamania County, WA

DIVISION OF CHILD SUPPORT PO BOX 11520 TACOMA WA 98411-5520

쀘	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)

TIPES Division of Child Support	Release - F	Partial Release of L	ien
Recording number:	2010176647		
Volume number:	000000	·	· / / / .
Page number:	0000000		
Grantor or Creditor:	The Department of So	cial and Health Services.	1
Grantee or Debtor: doing business as:	LISA L COOK	*	, also known as or
aomig paometo ao.	-		
	SSN: <u>XXX-XX-4</u> 752	, DOB: <u>08/09/1963</u> , I	FEIN:
	d Support (DCS) filed the	ne lien identified above with t DCS releases:	the SKAMANIA
The lien identifie	d above in full.		
☐ Only the portion	of the lien identified ab	ove that applies to the follow	ving property.
•			((
July 09, 2014		HUGGINS	
DATE		JTHORIZED REPRESENTATIVE VISION OF CHILD SUPPORT	
(800) 345-9976 TELEPHONE NUMBER In reply, refer to case	e numbers:	0001008648	30033377340000000592506
1008648 108153	36 1177745		

RELEASE - PARTIAL RELEASE OF LIEN DSHS 09-296 (REV. 02/2013)

FG VER: (1.6) 44:07092014/ 1008648 / 44