AFN #2016000521 Recorded Mar 21, 2016 02:00 PM DocType: CHILD Filed by: DEPT OF SOCIAL & HEALTH SERVICES Page: 1 of 1 File Fee: \$0.00 Auditor Robert J. Waymire Skamania County, WA

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

|                        | Neicas             | se - Faitiai ixelease C           | /I LIGII                       |
|------------------------|--------------------|-----------------------------------|--------------------------------|
| Recording number:      | 2013002600         | (X/)                              |                                |
| Volume number:         | 000000             |                                   | 4                              |
| Page number:           | 0000000            | - A - N - Y                       |                                |
| Grantor or Creditor:   | The Departmen      | nt of Social and Health Service   | s.                             |
| Grantee or Debtor:     | AMBROSIA M         | RODRIGUEZ                         | , also known as or             |
| doing business as:     |                    |                                   |                                |
|                        |                    |                                   | - 1                            |
| - 4                    | SSN: xxx-xx-       | -7903 , DOB: <u>10/12/1985</u>    | , FEIN:                        |
| The Division of Child  | Support (DCS)      | ) filed the lien identified above | with the SKAMANIA              |
| County Auditor on I    | ecember 03,        | DCS releases:                     |                                |
| The lien identifie     | d above in full.   |                                   | , ,                            |
| Only the portion       | of the lien identi | ified above that applies to the t | ollowing property.             |
|                        |                    | <b>N</b>                          |                                |
|                        |                    |                                   |                                |
|                        |                    |                                   | •                              |
| March 16, 2016         |                    | D RAUB                            |                                |
| DATE                   |                    | AUTHORIZED REPRESENTAT            | TIVE                           |
| 57.11.2                |                    | DIVISION OF CHILD SUPPORT         | Γ                              |
| (800) 345-9982         |                    | <b>#111111</b>                    |                                |
| TELEPHONE NUMBER       |                    |                                   |                                |
| In reply, refer to cas | e numbers:         |                                   | 240329600221112400000000472506 |
| 2403296                |                    |                                   |                                |

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

FG VER: (1.6) 1383:03162016/ 2403296 / 1383