Skamania County, WA Total:\$0.00 CHILD Pgs=1

2024-001329 09/16/2024 11:10 AM

The Am

Request of: WASHINGTON STATE DEPARTMENT OF H



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

觤	Washington State Department of Social & Health Services

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

IDCS Division of Child Support	Releas	se - Partial Re	lease of I	ien	
Recording number:	142960	282		,	
Volume number:	000217		/ _		
Page number:	00000105	X, Z	7	46	•
Grantor or Creditor:	The Departmen	t of Social and Hea	Ith Services.	1	
Grantee or Debtor: doing business as:	SAMUEL S SE	AMAN		, also known as	or
/	SSN: xxx-xx-	3085 , DOB: <u>1/1</u>	.5/1969 ,	FEIN:	)
The Division of Child County Auditor on N				the SKAMANIA	_
X The lien identifie	d above in full.		( · )		
Only the portion	of the lien identi	fied above that app	lies to the follo	wing property.	
September 05, 2	024	J BURKHEAD			
DATE		AUTHORIZED RE DIVISION OF CHI			
(800) 345-9984	· · · · · ·				
TELEPHONE NUMBER					
In reply, refer to case numbers:			00015070	970015647640000000027	2506

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

FG VER: (1.6) 1747:09052024/ 1507097 / 1747