

DSHS 09-963 (06/2003) MX32 1 of 2

RETURN RECORDING INFORMATION TO:

Department of Social and Health Services
Financial Services Administration
Office of Financial Recovery
PO Box 9501
Olympia WA 98507-9501

200310090004
Street County Auditor

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1 9:26AM

Recording number:	LIEN RELEASE - 200104160129	- PARTIAL REL	EASE	
Volume number:	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			
Book and Page No:				
Grantee or Creditor:	DSHS, Financial Services Administration, Office of Financial Recovery			
Grantor or Debtor:	YARBROUGH, JOYCE W		,also known as or	
doing business as:				
			<u> </u>	
	hington filed the lien identi state of Washington relea:		e SKAGIT County Auditor or	
☐ The following	property:			
Partial release	e as described below:			
Estate Recovery	Program	ERIK KJESBU		
Contact 1-800-562-6114		AUTHORIZED REPRESENTATIVE DEPARTMENT OF SOCIAL AND HEALTH SERVICES		
Telephone Numb	er	10/2/2003		
		Date		
In reply, refer to:				
Case# 29P61540	20 FR			