



200507190039

Skagit County Auditor

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RETURN RECORDING INFORMATION TO:

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

LIEN RELEASE – PARTIAL RELEASE

Recording number: 200501100103

Volume number: _____

Book and Page No: _____

Grantee or Creditor: DSHS, Financial Services Administration, Office of Financial Recovery

Grantor or Debtor: ALLEN, CLARA E, also known as or
doing business as: _____

The State of Washington filed the lien identified above with the SKAGIT County Auditor on 1/10/2005. The state of Washington releases the lien:

- In full:
- The following property:
- Partial release as described below:

Estate Recovery Program

Contact
1-800-562-6114
Telephone Number

In reply, refer to:
Case# 004812090 ER

KENNETH WASHINGTON

AUTHORIZED REPRESENTATIVE
DEPARTMENT OF SOCIAL AND HEALTH SERVICES

7/18/05

Date