



201104140003

Skagit County Auditor

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**RETURN 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: 200903050037
Volume number: _____
Book and Page No: _____
Grantee or Creditor: DSHS, Financial Services Administration, Office of Financial Recovery
Grantor or Debtor: HEATHER J AYRE, also known as or
doing business as: _____

The State of Washington filed the lien identified above with the SKAGIT County Auditor on 03/05/2009. 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 Ext. 45514

Telephone Number

In reply, refer to:

Case# 051004461 ER

Melinda Rice

Authorized Representative
Department of Social and Health Services

04/08/2011

Date

000051004461ER2354

