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03/30/2023 10:13 AM Pages: 1 of 1 Fees: \$0.00 Skagit County Auditor

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



1390164 1591157

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

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

d Health Services	DIVISION OF CHILD SUPPORT (DCS)		
DCS Division of Child Support	Release	- Partial Release o	f Lien
Recording number:	200206120050		
Volume number:	000000		•
Page number:	0000000		•
Grantor or Creditor:	The Department of	of Social and Health Services	i.
Grantee or Debtor: doing business as:	RYAN ALLEN BA	LSER	, also known-as or ,
	SSN: XXX-XX-05	582 , DOB: <u>12/14/1978</u>	, FEIN:
		ed the lien identified above v	vith the SKAGIT
X The lien identifie	d above in full.		
☐ Only the portion	of the lien identifier	d above that applies to the fo	ollowing property.
March 24, 2023		K SAUNDERS	
DATE		AUTHORIZED REPRESENTATI DIVISION OF CHILD SUPPORT	VE
(800) 729-7580	<u>. </u>		
TELEPHONE NUMBER			
In reply refer to case	a numbers:	HIIII 0001:	901640000038390000000692506

FG VER: (1.6) 354:03242023/ 1390164 / 354