



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Aging and Long-Term Support Administration
PO Box 45600, Olympia, WA 98504-5600

June 3, 2024

ELECTRONIC-FACSIMILE

Licensee, Lisa Anderson
Joshuas House
1809 Township St
Sedro Woolley, WA 98284

Adult Family Home License # **750071**

LIFT CONDITIONS ON A LICENSE

Dear Licensee:

This letter is the formal notice that conditions placed on your license **verbally** on **February 1, 2024**, in a notice letter dated February 1, 2024, are lifted effective **March 11, 2024**.

If you have any questions, please call Nicholette Flynn, Field Manager, at (206) 348-9350.

Sincerely,

For Rathana Duong
Compliance Specialist
Residential Care Services

cc: Field Manager, Region 2, Unit B
RCS Regional Administrator, Region 2
HCS Regional Administrator, Region 2
DDA Regional Administrator, Region 2
HQ Central Files
DRW
HP