Notice of Lien

TO:

Attn: Douglas County of Recorder's Office

PO Box 218

Minden, NV 89423

Obligor: Louis F. Tiraterra, JR

3015

02-24-61

FROM/RETURN TO:

Shasta County DA Family Support PO Box 994130 Redding, CA 96099

Obligee: State of California

Claimant's Case #: 180271

This lien results from a child support order, entered on March 14, 1994 by Shasta County in California, docket number 119184.

This order requires the above-named obligor to pay child support in the amount of \$301.00, per month.

As of 03/14/2000, the obligor owes unpaid support in the amount of \$9,167.56, and this lien amount is subject to an interest rate of 10%.

Prospective amounts of child support, not paid when due, are judgments and accrue to the lien amount. This lien attaches to all non-exempt real and personal property of the above-named obligor, which is located or recorded within the state/county/other subdivision of the state of filing, including any property specifically described below.

Specific description of property: UNKNOWN

The priority and enforcement aspects of this lien are governed by the law of the state where the property is located. An obligor must follow the laws and procedures of the state where the property is located or recorded to contest or challenge this lien. This lien remains in effect until released by the claimant or in accordance with the laws of the state of filing.

Foundam Decorder

For use by Lien Recorder

Note to Lien Recorder:

Please provide the claimant with a copy of the filed lien, containing the recording information, at the address provided above.

0488189

(49B) Notice of Lien, 1 of 2

A [X] Issued by a IV-D agency/office

As an authorized agent of a state, or subdivision of a state, responsible for implementing the child support enforcement program set forth in Title IV, Part D, of the Federal Social Security Act (42 U.S.C. 651 et seq.), I have authority to file this child support lien in any state, or U.S. Territory. For additional information regarding this lien, including the pay-off amount, please contact the authorized agency (claimant) at the address provided above. Please reference the case number, also provided above.

3/15/00 Date

Joseph W. Fairfield, Authorized Agent

B [] Issued by a private (non-IV-D) attorney

I am an attorney representing the above-named obligee. I certify that this lien is issued in accordance with the laws of the state of California.

For additional information regarding this lien, including the pay-off amount, please contact the undersigned (claimant) at the address provided above.

Date

Attorney for Obligee

State of California

SS.

County of Shasta

I certify that <u>Joseph W. Fairfield</u> appeared before me and is known to me as the individual who signed the above.

Date:

3/15/00

Notary Public

My appointment expires

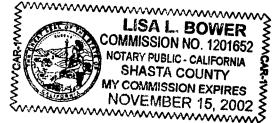
Nov 15, 2002

IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

2000 MAR 20 AM 11: 24

LINDA SLATER RECORDER

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