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NOTICE OF LIEN

TO: DOUGLAS COUNTY NEVADA RECORDER'S OFFICE
PO BOX 218
MINDEN, NV 89423

Obligor: JOSEPH CORRIE ~~ARTHUR~~

07-09-69
561-31-3456

FROM: San Mateo County
Family Support Division
555 County Center - 2nd Floor
Box 8084
Redwood City, Ca 94063

Telephone: (650) 366-8221
Fax No.: (650) 365-3982

Obligee/Claimant: c/o San Mateo County
Family Support Division

IV-D Case #: 066697*1

This lien results from a child support order, entered on 8/26/93
by SAN MATEO COUNTY, CA
in CALIFORNIA tribunal number F 11878.

As of 9/19/01, the obligor owes unpaid support in the amount of
\$ 31,298.83. This judgement may be subject to interest.

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

Specific description of property:

703-B BONNIE DR
STATELINE, NV 89449

0525909

BK1001PG7178

All aspects of this lien, including its priority and enforcement, 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 the effect until released by the claimant or in accordance with the laws of the State of filing.

Note to Lien Recorder: Please provide the claimant with a copy of the filed lien, containing the recording information, at the address provided above.

Check either "A" or "B" below:

A Issued by a IV-D agency/office

As an authorized agent of a State, or subdivision of a State, agency 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) and reference its case number, both listed above.

9/20/01
Date

Erica Fonseca
ERICA FONSECA
Authorized Agent

San Mateo County
Family Support Division
555 County Center - 2nd Floor Telephone: (650) 366-8221
Box 8084
Redwood City, Ca 94063 Fax No.: (650) 365-3982
Print name, e-mail address, phone and fax number

B Submitted by an obligee/claimant or a private (non-IV-D) attorney or entity on behalf of an obligee/claimant

I am the obligee/caimant of the above referenced order [or]
 an attorney or entity representing the above named obligee/claimant

I certify that this lien is submitted in accordance with the laws of the State of _____ . For additional information regarding this lien, including the pay-off amount, please contact the obligee/claimant listed above.

Date

Signature

Print name, e-mail address, phone and fax number

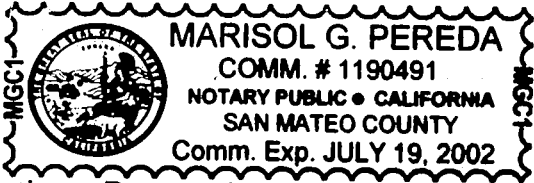
State of: California

County of: San Mateo

I certify that Erica Fonseca appeared before me and is known to me as the individual who signed the above.

Date: 9/20/01

Marisol G. Pereda
Notary Public



My appointment expires July 19, 2002

Notice: Respondents are not required to respond to this information collection unless it displays a valid OMB control number. The average burden for responding to this information collection is estimated at 30 minutes. If you believe this estimate is inaccurate, or if you have ideas to reduce this burden, please provide comment to the issuing agency.

OMB Control #: 0970-0153 Expiration Date: 03/31/2004

REQUESTED BY
San Mateo County
IN OFFICIAL RECORDS OF
DOUGLAS CO. NEVADA

2001 OCT 22 PM 12: 50

LINDA SLATER
RECORDER

\$16⁰⁰ PAID K2 DEPUTY

0525909

BK 1001 PG 7180