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RECORDING REQUESTED BY AND WHEN RECORDED MAIL TO:

DEPARTMENT OF CHILD SUPPORT SERVICES 924-A EMERALD BAY ROAD SOUTH LAKE TAHOE, CA 96150 REQUESTED BY

E/ Dorado County

IN OFFICIAL RECORDS OF

DOUGLAS CO., HEVADA

2004 SEP 15 AM 10: 08

WERNER CHRISTEN RECORDER

1 PAIDK 1 DEPUTY

SPACE ABOVE THIS LINE RESERVED FOR RECORDER'S USE

TITLE(S)

NOTICE OF LIEN

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address): X Recording requested by and return to:	0036658 09SLM	FOR RECORDER'S USE ONLY
DEPARTMENT OF CHILD SUPPORT SERVICES 924-A EMERALD BAY ROAD SOUTH LAKE TAHOE, CA 96150		
TELEPHONE NO.: (530) 573-3280 ATTORNEY FOR JUDGMENT CREDITOR X ASSIGNEE OF RECORD		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF EL DORADO STREET ADDRESS: 1354 JOHNSON BLVD SUITE 2 MAILING ADDRESS: 1354 JOHNSON BLVD SUITE 2 CITY AND ZIP CODE: SOUTH LAKE TAHOE, CA 96150 BRANCH NAME: SUPERIOR COURT OF CALIFORNIA, EL DORADO		
PETITIONER/PLAINTIFF: COUNTY OF EL DORADO RESPONDENT/DEFENDANT: LUIS ALBERTO MANZANO OTHER PARENT: GRISELDA ANA GONZALEZ		
NOTICE OF LIEN		CASE NUMBER: SF2529

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Notice of Lien

TO:

(Name/Address of recorder)

DOUGLAS COUNTY RECORDER P.O. BOX 218 MINDEN, NV 89423

Obligor:

(Name/Address/DOB/SSN)

LUIS A. MANZANO P O BOX 4487 STATELINE, NV 89448

DOB: 05-27-1971

SSN: I

253

FROM:

(IV-D Agency or name of obligee and/or his or her private attorney, or entity acting on behalf of the obligee, address, phone, e-mail address, fax number)

DEPARTMENT OF CHILD SUPPORT SERVICES 924-A EMERALD BAY ROAD SOUTH LAKE TAHOE, CA 96150

TELEPHONE: (530) 573-3280

FAX: (530) 541-1820

E-MAIL ADDRESS:

Obligee: (Name)

GRISELDA A. GONZALEZ

IV-D Case#: 0036658

This lien results from a child support order, entered on 01-10-2000 by the SUPERIOR COURT OF CALIFORNIA IN THE COUNTY OF EL DORADO in CA tribunal number: SF2529

As of 08-19-2004, the obligor owes unpaid support in the amount of \$4,333.52 This judgment 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:

134 KAHLE BLDG 4 #11 STATELINE, NV 89448

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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 effect until released by the obligee or in accordance with the laws of the State of filing.

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

Check either "A" or "B" below:

AUGUST 19, 2004

A. [X] Submitted by a IV-D agency/office on behalf of the named

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

Date	Authorized Agent		
	SHERIE L. MARINO		
	Print name, e-mail address, phone and fax number		
/ /	TELEPHONE: (530) 573-3280		
	FAX: (530) 541-1820		
\ \	E-MAIL ADDRESS:		
B. [] Submitted by an obligee or a private (r	non-IV-D) attorney or entity on behalf of an obligee		
I am [] the obligee of the above referenced ord [] an attorney or entity representing the a			
1 an attorney or entity representing the 2	nbove flamed obligee		
I certify under penalty of perjury that the information	on contained in this notice is true and accurate and that this		
lien is submitted in accordance with the laws of the regarding this lien, including the pay-off amount, p	e State of . For additional information		
regarding this nett, including the pay-off amount, pr	lease contact the obligee listed above.		
\ \ \			
Date	Signature		
	Print name, e-mail address, phone and fax number		
	, , , , , , , , , , , , , , , , , , , ,		

STATE OF: CALIFORNIA

COUNTY OF: EL DORADO

I certify that

SHERIE L. MARINO

individual who signed the above.

appeared before me and is known to me as the

Date

VICKY L. LIND

Notary Public

My appointment expires

VICKY L. LIND
COMM. #1400460
Notary Public-California
EL DORADO COUNTY
My Comm. Exp. Feb 13, 2007

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