RECORDING REQUESTED BY AND WHEN RECORDED MAIL TO:

LISA M. ORTIZ
MANAGING CHILD SUPPORT ATTORNEY
DEFARTMENT OF CHILD SUPPORT SERVICES
P.O. 80X 2059
SALINAS, CA 93902-2089

DOC # 0687951 11/03/2006 12:20 PM Deputy: GB OFFICIAL RECORD Requested By: MONTEREY COUNTY

Douglas County - NV
Werner Christen - Recorder
1: 1 Of 4 Fee: 17.00

Page: 1 Of 4 Fee: BK-1106 PG-1482 RPTT:

1811 BENE HIN 1811 HER 1818 HER HER

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: 27AXS	FOR RECORDER'S USE ONLY
LISA M. ORTIZ MANAGING CHILD SUPPORT ATTORNEY DEPARTMENT OF CHILD SUPPORT SERVICES	
P.O. BOX 2059 SALINAS, CA 93902-2059	
TELEPHONE NO.: (831) 755-3200 ATTORNEY FOR JUDGMENT CREDITOR X ASSIGNEE OF RECORD	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF MONTEREY STREET ADDRESS: 1200 AGUAJITO ROAD	
MAILING ADDRESS: 1200 AGUAJITO ROAD CITY AND ZIP CODE: MONTEREY, CA 93940 BRANCH NAME: SUPERIOR COURT OF CA, COUNTY OF MONTEREY	
PETITIONER/PLAINTIFF: LISA MARIE OUELLETTE HAGAR RESPONDENT/DEFENDANT: AARON S HAGAR	!
OTHER PARENT:	
NOTICE OF LIEN	CASE NUMBER: DR41488

7624/OCT 05 27AXS ENF002

Notice of Lien

TO:

(Name/Address of recorder or asset holder)

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

Obligor:

(Name/Address/DOB/SSN)

AARON S. HAGAR PO BOX 1563

ZEPHYR COVE, NV 89448-1563

UNITED STATES

DOB: 02-24-1970

SSN: 9119

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 P.O. BOX 2059 SALINAS, CA 93902-2059

TELEPHONE: (831) 755-3200

FAX: (831) 755-3273

E-MAIL ADDRESS:

Obligee: (Name)

LISA M. OUELLETTE HAGAR

IV-D Case#: 0036747

This lien results from a child support order, entered on 09-01-2005 by the SUPERIOR COURT OF CALIFORNIA IN THE COUNTY OF MONTEREY in CA tribunal number DR41488

As of **09-20-2006**, the obligor owes unpaid support in the amount of \$4,939.35. 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 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:

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BK- 110 PG- 148 0687951 Page: 2 Of 4 11/03/200 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. An obligor may also contact the entity sending the lien. This lien remains in effect until released or withdrawn by the obligee or in accordance with the laws of the State where the property is located.

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. The option that does not apply may be omitted from the form. If "B" is checked, the form must be notarized.

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

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.

SEPTEMBER 20, 2006	Onlow &
Date	Authorized Agent
	_ `
	ANTONIO SANCHEZ
	Print name, e-mail address, phone and fax number
/ /	TELEPHONE: (831) 755-3200
/ /	FAX: (831) 755-3273
((E-MAIL ADDRESS:
\ \	\ \
B. [] Submitted by an obligee or a r	private (non-IV-D) attorney or entity on behalf of an
b. () Submitted by an obligee of a p	or vale (non-ry-b) attorney or entity on behalf of all
I am [] the obligee of the above referer	nced order [or]
[] an attorney or entity representing	ng the above named obligee
I certify under penalty of perjury that the in and that this lien is submitted in accordance	formation contained in this notice is true and accurate e with the laws of the State of California.
	n, including the pay-off amount, please contact the
obligee listed above.	
Date	Signature
	Print name, e-mail address, phone and fax

Notary State: CALIFORNIA

County:

MONTEREY

I certify that

ANTONIO SANCHEZ

appeared before me and is known to me as

the individual who signed the above.

Date

09-21-06

Notary Public

My appointment expires <u>C</u>

03-11-07



RICHELLE D. GALES
Commission # 1405077
Notary Public - California
Monterey County
My Comm. Expires Mar 11, 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: 01/31/2008

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