

Douglas County - NV
 Werner Christen - Recorder
 Page: 1 Of 4 Fee: 17.00
 BK-0108 PG- 1595 RPTT: 0.00



RECORDING REQUESTED BY
 EL DORADO COUNTY DEPARTMENT OF
 CHILD SUPPORT SERVICES

COUNTY CODE: 0601700

WHEN RECORDED MAIL TO
 EL DORADO COUNTY DEPARTMENT OF
 CHILD SUPPORT SERVICES
 ✓ 3057 BRIW RD STE B
 PLACERVILLE CA 95667-5321

SPACE ABOVE THIS LINE RESERVED FOR RECORDER'S USE

DOCUMENT TITLE

NOTICE OF LIEN

<p>ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address): <input checked="" type="checkbox"/> Recording requested by and return to: DAVID L. BURNS, ATTORNEY EL DORADO COUNTY 3057 BRIW RD STE B PO BOX 391 PLACERVILLE CA 95667-5321 TELEPHONE NO.: (866) 901-3212 FAX NO. (Optional): (530) 621-2022 <input type="checkbox"/> ATTORNEY FOR <input checked="" type="checkbox"/> JUDGMENT CREDITOR <input type="checkbox"/> ASSIGNEE OF RECORD</p>	<p>FOR RECORDER'S USE ONLY 0170054148-01</p>
<p>SUPERIOR COURT OF CALIFORNIA, COUNTY OF EL DORADO STREET ADDRESS: 1354 JOHNSON BLVD STE 2 MAILING ADDRESS: 1354 JOHNSON BLVD STE 2 CITY AND ZIP CODE: SOUTH LAKE TAHOE 96150-8216 BRANCH NAME: SOUTH LAKE TAHOE BRANCH</p>	
<p>PETITIONER/PLANTIFF: COUNTY OF EL DORADO OBO CHANTEL R. GREENER, MINOR CHILD RESPONDENT/DEFENDANT: DONALD EUGENE PAYNE OTHER PARENT:</p>	
<p>NOTICE OF LIEN</p>	<p>CASE NUMBER: SFS20050001</p>

NOTICE OF LIEN

TO:

✓(Name/Address of recorder or asset holder)
DOUGLAS COUNTY RECORDER
PO BOX 218, MINDEN NV 89423

Obligor:

(Name/Address/DOB/SSN)
PAYNE, DONALD E, 10/01/1962, [REDACTED] 3415
1501 OLD US HIGHWAY 395 S SPC 24, GARDNERVILLE NV 89410-7023

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)
EL DORADO COUNTY DEPT. OF CHILD SUPPORT SERVICES
PO BOX 391, PLACERVILLE CA 95667-0391
(866) 901-3212, dcss@co.el-dorado.ca.us, (530) 621-2022

Obligee:

(Name)
SHAWNEE RAMEY

IV-D Case #: 0170054148-01

This lien results from a child support order, entered on 01/05/2005 by SUPERIOR COURT OF CALIFORNIA in EL DORADO tribunal number SFS20050001.

As of 11/28/2007, the obligor owes unpaid support in the amount of \$3,398.67
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:

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. 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.

11/28/2007

Date

Stacey Bixby
Authorized Agent

STACEY M BIXBY

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

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

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

I certify under penalty of perjury that the information contained in this notice is true and accurate and 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 listed above.

Date

Signature

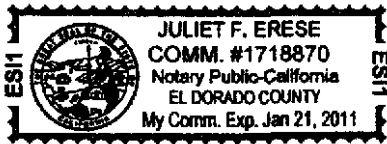
Print name, e-mail address, phone and fax number

Notary State: CALIFORNIA

County: EL DORADO

I certify that STACEY M. BIXBY appeared before me and is known to me as the individual who signed the above.

Date: 11/28/2007



Juliet F. Erese
Notary public, JULIET F. ERESE

My appointment expires 01/21/2011

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