OFFICIAL RECORD Requested By: COUNTY OF EL DORADO

> Douglas County - NV Werner Christen - Recorder 4

Of Page: BK-0308 PG- 0421 RPTT: 42.00 0.00

Fee:

**RECORDING REQUESTED BY** EL DORADO COUNTY DEPARTMENT OF CHILD SUPPORT SERVICES

COUNTY CODE: 0601701

WHEN RECORDED MAIL TO EL DORADO COUNTY DEPARTMENT OF CHILD SUPPORT SERVICES 3368 LAKE TAHOE BLVD STE 100 SOUTH LAKE TAHOE CA 96150-7915

## DOCUMENT TITLE

# NOTICE OF LIEN

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address):  Recording requested by and return to: DAVID L. BURNS, ATTORNEY  EL DORADO COUNTY  3368 LAKE TAHOE BLVD STE 100 3368 LAKE TAHOE BLVD STE 100 SOUTH LAKE TAHOE CA 96150-7915  TELEPHONE NO.: (866) 901-3212  FAX NO. (Optional): (530) 641-1820  ATTORNEY FOR JUDGMENT CREDITOR ASSIGNEE OF RECORD	FOR RECORDER'S USE ONLY
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 98150-8216  BRANCH NAME: SOUTH LAKE TAHOE BRANCH	
PETITIONER/PLANTIFF: COUNTY OF EL DORADO RESPONDENT/DEFENDANT: MARCOS MORA OTHER PARENT: YVONNE R OSUNA	
NOTICE OF LIEN	CASE NUMBER: SF\$20070097

### 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)
MARCOS MORA, 06/03/1978, 9873
132 KHALE DRIVE APT BT, STATELINE NV 89449

#### 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
3368 LAKE TAHOE BLVD STE 100, SOUTH LAKE TAHOE CA 96150-7915
(866) 901-3212, famsupslt@co.el-dorado.ca.us, (530) 541-1820

Obligee:

(Name) YVONNE R OSUNA

IV-D Case #: 20000000110156

This lien results from a child support order, entered on 10/17/2007 by SUPERIOR COURT OF CALIFORNIA in EL DORADO tribunal number SFS20070097.

As of 12/20/2007, the obligor owes unpaid support in the amount of \$1,892.17 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: 132 KHALE DRIVE BT STATELINE, NV 89449

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BK- 0308 PG- 422 719011 Page: 2 Of 4 03/03/2008 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. [ ] Submitted by a IV-D agency/office on behalf of the named obligee A. 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. 12/20/2007 Date Authorized Agent DARLENE G RUGER-HALL 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 [ ] the obligee of the above referenced order [or] I am [ ] 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

BK- 0308 PG- 423 Notary State: CALIFORNIA

County: SL DORADO

I certify that DARLENZ 6. RUCER-HAU appeared before me and is known to me as the individual who signed the above.

Date: 12/20/07



Notary public CHERYL D MANN

My appointment expires 9/26/10

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