DOC # 0791830
11/01/2011 09:55 AM Deputy: KE
OFFICIAL RECORD
Requested By:
EL DORADO COUNTY

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 Douglas County - NV Karen Ellison - Recorder

Page: 1 Of 4 Fee: BK-1111 PG-0055 RPTT:

17.00



SPACE ABOVE THIS LINE RESERVED FOR RECORDER'S USE

DOCUMENT TITLE

NOTICE OF LIEN

| ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address): Recording requested by and return to: CARRIE J EHLERS, ATTORNEY | FOR RECORDER'S USE ONLY |
|--|-------------------------|
| EL DORADO COUNTY 3057 BRIW RD STE 8 PO BOX 391 PLACERWILLE CA 95887-5321 | |
| TELEPHONE NO (866) 901-3212 FAX NO. (Optional): (530) 621-2022 ATTORNEY FOR JUDGMENT CREDITOR ASSIGNEE OF RECORD | \rightarrow |
| 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 | |
| PETITIONER/PLANTIFF: SHARON G. BECKER (DRYER) RESPONDENT/DEFENDANT: TIMOTHY P. BECKER OTHER PARENT: | |
| NOTICE OF LIEN | CASE NUMBER 52972 |

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NOTICE OF LIEN

TO:

Douglas County Recorder's Office PO Box 218, Minden NV 89423

Obligor:

SHARON G DRYER, 11/18/1954, 3995
77 S VAN TASSELL RD, VAN TASSELL WY 82242-8609

FROM:

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:

TIMOTHY P BECKER

IV-D Case #: 0170036194-01

This lien results from a child support order, entered on 05/08/1995 by SUPERIOR COURT OF CALIFORNIA in EL DORADO tribunal number 52972.

As of 9/19/2011 , the obligor owes unpaid support in the amount of \$2,930.90 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:

11/01/2011

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.

| If "B" is checked, the form must be notarized | red. |
|---|---|
| A. \(\sqrt{j}\)Submitted by a IV-D agency/of | fice on behalf of the named obligee |
| responsible for implementing the child sup of the Federal Social Security Act (42 U.S. support lien in any State, or U.S. Territory including the pay-off amount, please containumber, both listed above. 09/19/2011 | or subdivision of a State or Tribal, agency port enforcement program set forth in Title IV, Part D, C. 651 et seq.), I have authority to file this child. For additional information regarding this lien, ct the authorized agency and reference its case |
| Date | uthorized Agent () |
| $\overline{\mathbf{P}}$ | ALLENE K CRUZ rint name, e-mail address, phone and fax number |
| B. [] Submitted by an obligee or a probligee | ivate (non-IV-D) attorney or entity on behalf of an |
| I am [] the obligee of the above referen | 7 - 1 |
| and that this lien is submitted in accordance | nformation contained in this notice is true and accurate e with the laws of the State of ien, including the pay-off amount, please contact the |
| Date Si | gnature |
| | rint name, e-mail address, phone and fax number |

CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of El Dorado

On September 22, 2011 before me, Latonia Dionne Weary, Notary

Name and Title of the Officer

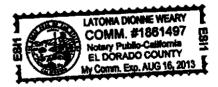
<u>Public</u>, personally appeared_Allene K. Cruz

Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(les), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature House Digital Place Notary Seal Above