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KAREN ELLISON, RECORDER

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 203  
SOUTH LAKE TAHOE CA 96150-7916

SPACE ABOVE THIS LINE RESERVED FOR RECORDER'S USE

DOCUMENT TITLE

NOTICE OF LIEN

|                                                                                                                                                                                                                                                                                         |  |                                                                              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------|
| ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address):<br><input checked="" type="checkbox"/> Recording requested by and return to:<br>CARRIE J. EHLERS, ATTORNEY<br>EL DORADO COUNTY<br>3368 LAKE TAHOE BLVD STE 203<br>3368 LAKE TAHOE BLVD STE 203<br>SOUTH LAKE TAHOE CA 96150-7916 |  | FOR RECORDER'S USE ONLY<br><br><br><br><br><br><br><br><br><br>0170024160-01 |
| TELEPHONE NO.: (866) 901-3212      FAX NO. (Optional): (530) 541-1820<br><input type="checkbox"/> ATTORNEY FOR <input type="checkbox"/> JUDGMENT CREDITOR <input checked="" type="checkbox"/> ASSIGNEE OF RECORD                                                                        |  |                                                                              |
| <b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF EL DORADO</b><br>STREET ADDRESS: 1354 JOHNSON BLVD STE 2<br>MAILING ADDRESS: 1354 JOHNSON BLVD STE 2<br>CITY AND ZIP CODE: SOUTH LAKE TAHOE 96150-8216<br>BRANCH NAME: SOUTH LAKE TAHOE BRANCH                                               |  |                                                                              |
| PETITIONER/PLANTIFF: COUNTY OF EL DORADO, ET AL.,<br>RESPONDENT/DEFENDANT: RICKY DON HAWORTH<br><br>OTHER PARENT:                                                                                                                                                                       |  |                                                                              |
| <b>NOTICE OF LIEN</b>                                                                                                                                                                                                                                                                   |  | CASE NUMBER:<br>SD910519                                                     |

NOTICE OF LIEN

TO:

(Name/Address of recorder or asset holder)  
Douglas County Clerk  
1594 Esmeralda Ave # 105, Minden NV 89423

Obligor:

(Name/Address/DOB/SSN)  
RICK D HAWORTH, 01/02/1961 [REDACTED]  
1335 NORTHAMPTON CIR, GARDNERVILLE NV 89410-6020

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 203, SOUTH LAKE TAHOE CA 96150-7916  
(866) 901-3212, dcscs@edcgov.us, (530) 541-1820

Obligee:

(Name):  
JULIE A HAWORTH

IV-D Case #: 0170024160-01  
(or non-IV-D docket #)

This lien results, by operation of law, from a child support order, entered on 02/03/1992  
by SUPERIOR COURT OF CALIFORNIA in EL DORADO tribunal number SD910519.

As of 9/15/15, the obligor owes unpaid support in the amount of \$ 6,868.92. 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:  
1335 NORTHAMPTON CIR  
GARDNERVILLE, NV 89410-6020

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 issuing agency, the obligee, the entity acting on behalf of 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.**

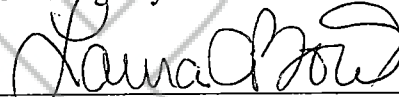
Check either "A" or "B" below. The option that does not apply may be omitted from the form. If "B" is checked, the form must be notarized.

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.

09/15/2015

Date



Authorized Agent

LAURA BOREK

dcss@edcgov.us

(530) 573-3461

(530) 541-1820

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

# JURAT

A Notary Public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California  
County of El Dorado

Subscribed and sworn to (or affirmed) before me on  
this 15<sup>th</sup> day of September, 20 15,  
by Paula Borch,  
Name of Signer

proved to me on the basis of satisfactory evidence to  
be the person(s) who appeared before me.



Place Notary Seal Above

Signature Mary J. Luckel  
Signature of Notary Public