

NOTICE OF LIEN

TO: CHANCERY CLERK'S OFFICE

2535 HWY 51 S.
HERNANDO, MS 38632

Obligor: DAVID G. GRILLS
8195 CAPROCK CV
(Name/dob/ssn)SOUTHAVEN, MS 38671

DOB: 08/22/62 SSN: 555 37 9901

FROM DISTRICT ATTORNEY RIVERSIDE COUNTY
(Claimant): FAMILY SUPPORT DIVISION
2041 IOWA AVENUE
RIVERSIDE, CA 92507

Obligee: COUNTY OF RIVERSIDE
(Name)

Claimant's Case #: C 000177272

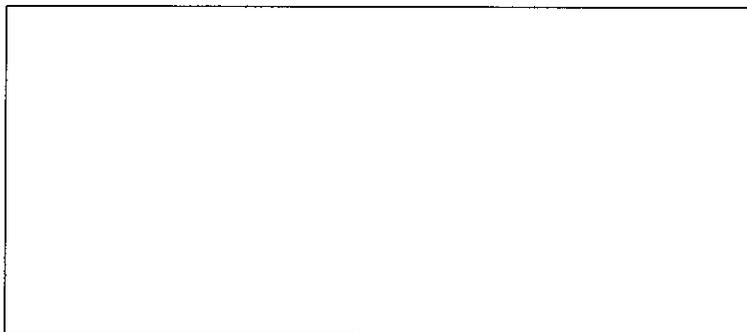
This lien results from a child support order, entered on 10/21/85 by SUPERIOR COURT
in STATE OF CALIFORNIA, COUNTY OF RIVERSIDE docket number
168857. This order requires the above-named obligor to pay child support in
the amount of \$ _____ per month.

As of 10/1/84 to 09/30/00, the obligor owes unpaid support in the amount of
\$ 2041.92, and this lien amount is subject to an interest rate of 10%.

Prospective amounts of child support, not paid when due, are judgments and accrue to the lien amount. This lien attaches to all non-exempt real and personal property of the above-named obligor, which is located or recorded within the state/county/other subdivision of the state of filing, including any property specifically described below.

Specific description of property:

The priority and enforcement aspects of the lien 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 to contest or challenge this lien. This lien remains in effect until released by the claimant or in accordance with the laws of the state of filing.



STATE OF CALIFORNIA CO.
Nov 14 10 20 AM '02
BK 1 PG 546
W. E. HALL, CLERK.

For use by Lien Recorder

Note to Lien Recorder: Please provide the claimant with a copy of the filed lien, containing the recording information, at the address provided above.

Check either "A" or "B"

A [X] Issued by a IV-D agency/office

As an authorized agent of a state, or subdivision of a state, 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 (claimant) at the address provided above. Please reference the case number, also provided above.

_____ Date Sheree Kay, Authorized Agent

B [] Issued by a private (non-IV-D) attorney

I am an attorney representing the above-named obligee. I certify that this lien is issued in accordance with the laws of the State of _____.

For additional information regarding this lien, including the pay-off amount, please contact the undersigned (claimant) at the address provided above.

_____ Date _____ Attorney for Obligee

State of California)
) ss.
County of Riverside)

I certify that Sheree Kay appeared before me and is known to me as the individual who signed the above.

Date: _____
_____ Notary Public

My appointment expires _____

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.