

11/30/2015 10:27 AM

Recording requested By
COUNTY OF TULARE (DEPT OF CHILD SUP

Sara Simmons - Recorder

Fee: \$17.00

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RPTT :

Recorded By: LH

Book- 587 Page- 0024

COUNTY CODE: 0610701

[illegible]

0230543

SPACE ABOVE THIS LINE RESERVED FOR RECORDER'S USE

NOTICE OF LIEN

COUNTY RECORDER TRANSMITTAL
DCSS 0635 (08/20/08)

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY
DEPARTMENT OF CHILD SUPPORT SERVICES

Z TEAM 2

NOTICE OF LIEN

TO:

(Name/Address of recorder or asset holder)
Eureka County Clerk Recorder
PO Box 556, Eureka NV 89316

Obligor:

(Name/Address/DOB/SSN)
KEVIN R BORBA, 06/04/1965, [REDACTED]
101 KITCHEN MEADOWNS, EUREKA NV 89316

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)
D.C.S.S. TULARE COUNTY - PORTERVILLE OFFICE
259 N MAIN ST, PORTERVILLE CA 93257-3736
(866) 901-3212, (559) 782-4209

Obligee:

(Name):
DENISE R BORBA

IV-D Case #: 1070009461-01
(or non-IV-D docket #)

This lien results, by operation of law, from a child support order, entered on 05/25/1989
by SUPERIOR COURT OF CALIFORNIA in TULARE tribunal number 136684.

As of 09/29/2015, the obligor owes unpaid support in the amount of \$ 7685.75. 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:

101 Kitchen Meadows Eureka Nevada 89316 single family home



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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 This lien remains in effect until released or withdrawn by the issuing agency, the obligee, the entity acting on behalf of the obligee, or in accordance with the laws of the State where the property is located.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.

09/29/2015

Date

Cheryl Taylor

Authorized Agent

Cheryl Taylor

(559) 782-5040

(559) 782-4209

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



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NOTARY CERTIFICATE OF ACKNOWLEDGEMENT

DCSS 0318 (12/01/14)

CSE Case Number: _____

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

TULARE

County of _____

Maricela Coronado

On 09/29/2015 before me, _____, Notary,
personally appeared Cheryl Lynn Taylor, 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(ies), 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 M. Coronado (Seal)

Notary Public



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