



20080624000257110 1/2 \$14.00  
Shelby Cnty Judge of Probate, AL  
06/24/2008 11:53:56AM FILED/CERT

## NOTICE OF LIEN

To: KLAYTON W. KIMBELL  
1313 YELLOWLEAF CIR  
MAYLENE, AL 35114-6021

Obligor: KLAYTON W. KIMBELL  
1313 YELLOWLEAF CIR  
MAYLENE, AL 35114-6021

DOB: 12/10/1963  
SSN:

From: SHELBY COUNTY DEPT OF HUMAN RESOURCES  
CHILD SUPPORT UNIT  
PO BOX 1438  
COLUMBIANA, AL 35051-1438

Email:  
Phone: (205) 669-3000 Fax:

Obligee: RACHEL B. KIMBELL

IV-D Case #: 000000000615454

This lien results from a child support order, entered on 11/01/2006 by CIRCUIT court in SHELBY county AL, tribunal number 59DR04000174. As of 06/18/2008, the obligor owes unpaid support in the amount of \$7,962.74. This judgment may be subject to interest.

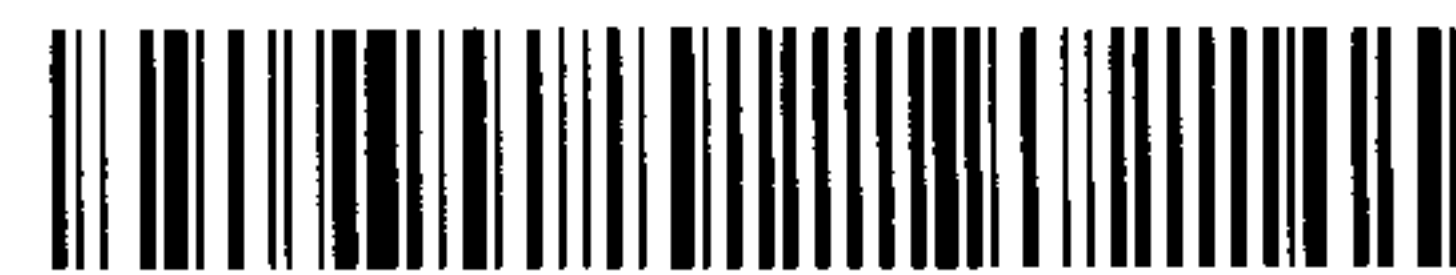
Prospective amounts of child support, not paid when due, are judgments that are added to the lien amount. This lien attaches to all non-exempt real and/or personal property of the above-named obligor which is located or existing within the State/county of filing, including any property specifically described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

Specific description of property:

Physical Address 102 Hummingbird Circle, Alabaster, AL 35007:

Legal Address:

Lot 14, Block 2, according to the Survey of Meadowview, FIRST SECTOR ADDITION, as recorded in Map Book 6, Page 109, in the Probate Office of Shelby Coutny, Alabama.



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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 This lien remains in effect until released or withdrawn by the obligee or in accordance with the laws of the State where the property is located.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.**

☒ 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.

June 18, 2008

Date

Authorized Agent

Name: ROGER HUMPHREYS

Email: Roger.Humphreys@dhr.alabama.gov

Phone: (205) 669-3000

Fax: 205 669-3095

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.