

2 RECORDING REQUESTED BY:
COUNTY OF SAN DIEGO
DEPARTMENT OF CHILD SUPPORT
SERVICES

7 WHEN RECORDED MAIL TO:
COUNTY OF SAN DIEGO
DEPARTMENT OF CHILD SUPPORT
SERVICES
MAIL STOP - C77

2007 047896

2007 APR 11 11:21 AM
SAN DIEGO, CA

P. O. BOX 122031
SAN DIEGO, CA 92112-2031

(SPACE ABOVE THIS LINE FOR RECORDER'S USE)

ABSTRACT OF SUPPORT JUDGMENT/ DCSS # 694.834.006
DOCUMENT TITLE



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SEPARATE PAGE PURSUANT TO GOVERNMENT CODE 27361.6

<p>ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and address):</p> <p><input checked="" type="checkbox"/> Recording requested by and return to:</p> <p>ROBERT L. LAFER, CHIEF LEGAL COUNSEL, STATE BAR # 144971 COUNTY OF SAN DIEGO, DEPARTMENT OF CHILD SUPPORT SERVICES 220 WEST BROADWAY, SUITE 5003, P.O. BOX 122031 SAN DIEGO, CA 92112-2031</p> <p><input type="checkbox"/> ATTORNEY FOR <input checked="" type="checkbox"/> JUDGMENT CREDITOR <input type="checkbox"/> ASSIGNEE OF RECORD</p>	<p>FOR RECORDER'S USE ONLY</p> <p>CASE NUMBER SUP CT #: DF160870 DCSS #: 694.834.006</p>
<p>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO</p> <p>STREET ADDRESS: 220 W. BROADWAY, ROOM 4005 MAILING ADDRESS: P.O. BOX 120128 CITY AND ZIP CODE: SAN DIEGO, CA 92112-4104 BRANCH NAME: CENTRAL COURT</p>	
<p>PETITIONER/PLAINTIFF: COUNTY OF SAN DIEGO</p> <p>RESPONDENT/DEFENDANT: RADFORD, RAYMOND</p>	
<p>ABSTRACT OF SUPPORT JUDGMENT</p>	

1. The judgment creditor assignee of record applies for an abstract of a support judgment and represents the following:

a. Judgment debtor's Name and last known address

RADFORD, RAYMOND
1815 W. 15TH AVE
GARY, IN 46404

b. Driver's license No. and state: B6115952 CA unknown

c. Social Security number: unknown

d. Birth date: 08-31-1970 unknown

Date: APRIL 06, 2007

RIZ TORRES
 (TYPE OR PRINT NAME)

COURT USE ONLY

(SIGNATURE OF APPLICANT OR ATTORNEY)

2. I CERTIFY that the judgment entered in this action contains an order for payment of spousal, family, or child support.

3. Judgment creditor (name):
SAN DIEGO COUNTY
DEPARTMENT OF CHILD SUPPORT SERVICES
 whose address appears on this form above the court's name.

4. The support is ordered to be paid to the following county officer (name and address):
SAN DIEGO COUNTY
DEPARTMENT OF CHILD SUPPORT SERVICES
PO BOX 122808
SAN DIEGO, CA 92112-2808
(619) 236-7600

5. Judgment debtor (full name as it appears in judgment):
RADFORD, RAYMOND

6. a. A judgment was entered on (date): **8-26-2002**
 b. Renewal was entered on (date):
 c. Renewal was entered on (date):

7. An execution lien is endorsed on the judgment as follows:
 a. Amount: \$
 b. In favor of (name and address):

8. A stay of enforcement has
 a. not been ordered by the court.
 b. been ordered by the court effective until (date):

9. This is an installment judgment.



This abstract issued on (date): **APRIL 06, 2007**

Clerk, by Walter Poon, Deputy