

72806

DISTRICT ATTORNEY EXEMPT FROM
PAYMENT OF FEES PURSUANT TO
GOVERNMENT CODE SECTION 6103.2

RECORDING REQUESTED BY AND
WHEN RECORDED RETURN TO:

1 BARRY T. LA BARBERA, #48145
DISTRICT ATTORNEY
2 COUNTY OF SAN LUIS OBISPO
FAMILY SUPPORT DIVISON
3 1201 PALM ST., P.O. BOX 841
SAN LUIS OBISPO, CA 93406-0841
4 FAX: (805) 781-5156
TELEPHONE (805) 781-5734

6 ATTORNEY PURSUANT TO HELF & INST CODE 11475.1

8 IN THE SUPERIOR COURT OF THE STATE OF CALIFORNIA

9 IN AND FOR THE COUNTY OF SAN LUIS OBISPO

11 COUNTY OF SAN LUIS OBISPO)
PLAINTIFF:)

NO: FS11162

12

DAFSC NO: 52796-88

13 VS.

**DEFAULT JUDGMENT
AND ORDER**

14 MICHAEL FRANCIS O'TOOLE)
DEFENDANT.)

15 [REDACTED]

16 THE DEFENDANT, MICHAEL FRANCIS O'TOOLE.

17 SOCIAL SECURITY NUMBER, , HAVING BEEN SERVED

18 WITH A SUMMONS AND COMPLAINT AND HAVING FAILED TO APPEAR AND

19 ANSWER, AND THE DEFAULT OF SAID DEFENDANT HAVING BEEN DULY

20 ENTERED, UPON APPLICATION TO THE COURT, AND DOCUMENTARY EVIDENCE

21 HAVING BEEN PRESENTED TO THE COURT AND GOOD CAUSE APPEARING

22 THEREFOR:

23 IT IS HEREBY ORDERED, ADJUDGED AND DECREED THAT:

24 I
25 DEFENDANT IS THE FATHER OF:

(ENDORSED)
FILED

NOV 8 1993

FRANCIS M. COONEY, COUNTY CLERK
By **TOMASITA SARABIA**
DEPUTY CLERK

32262

1

NAME OF CHILD(REN)

BIRTHDATE

2

KATRINA O'TOOLE

10-01-93

3

4

5

II

6

7

8

EXPENDITURES TO DATE OF COMPLAINT:

\$299.00

9

SUPPORT DURING PENDENCY OF COMPLAINT:

0

10

DEMAND OF COMPLAINT:

0

11

ATTORNEY FEES:

0

12

COSTS:

0

13

TOTAL JUDGMENT:

\$299.00

14

III

15

16

DEFENDANT SHALL PAY AS AND FOR ONGOING CHILD SUPPORT FOR
HIS/HER HERETOFORE-NAMED CHILD(REN) AS FOLLOWS:

17

ONGOING MONTHLY SUPPORT PER MONTH:

18

KATRINA O'TOOLE

\$299.00

19

20

21

22

DUE DATE: FIRST OF EACH MONTH AFTER THIS JUDGMENT IS SIGNED.

23

IV

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DEFENDANT SHALL PAY ONGOING SUPPORT EACH AND EVERY MONTH
HEREAFTER UNTIL SAID CHILD(REN) REACHES THE AGE OF MAJORITY,

JC-R117

10388

1 DIES, OR OTHERWISE BECOMES EMANCIPATED OR UNTIL FURTHER ORDER
2 OF THE COURT.

3

V

4 DEFENDANT SHALL MAKE ARREARAGE AND ONGOING PAYMENTS AS
5 FOLLOWS:

6 MEDIUM OF PAYMENT: CASH, CASHIERS CHECK, MONEY ORDER.
7 ~~NO PERSONAL CHECKS~~

8 PAYABLE TO: DISTRICT ATTORNEY
9 COUNTY OF SAN LUIS OBISPO

10 MAIL TO: DISTRICT ATTORNEY
11 FAMILY SUPPORT DIVISION
12 1201 PALM ST., P.O. BOX 841
13 SAN LUIS OBISPO, CA 93406-0841

14

VI

15 DEFENDANT SHALL PROVIDE HEALTH INSURANCE IF IT IS OR
16 BECOMES AVAILABLE AT NO OR REASONABLE COST.

17

VII

18 THE COURT ORDERS THE OBLIGOR'S EARNINGS AND WAGES
19 ASSIGNED FOR THE PAYMENT OF THE ABOVE ORDERED SUPPORT PURSUANT
20 TO 4390.3 OF THE CIVIL CODE.

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25

NOV 08 1997
DATED: 11/11/97

WOOLPERT

JUDGE OF THE SUPERIOR COURT

JC-R117