



IN THE \_\_\_\_\_ JUDICIAL CIRCUIT COURT, \_\_\_\_\_, MISSOURI

Judge or Division:	Case Number:
Petitioner:	MACSS Case ID:
SSN (last four digits): DOB:	
vs.	
Respondent:	
SSN (last four digits): DOB:	

(Date File Stamp)

### Lien Request

I, \_\_\_\_\_ am legally entitled to the arrearages which have accrued under an order entered by:

The Circuit Court of \_\_\_\_\_ (County/City of St. Louis), Missouri.

The Director of the Division of Child Support Enforcement, State of Missouri and filed in the Circuit Clerk's Office of \_\_\_\_\_ (County/City of St. Louis), Missouri.

Pursuant to Section 454.515 RSMo., please effect a lien on the real estate of \_\_\_\_\_, obligated to pay the support under the order.

Check if applicable.

Attached is a sworn affidavit of arrearages.

Attached is a certified copy of the order of support (transcript of judgment).

\_\_\_\_\_ Date \_\_\_\_\_ Applicant Signature