

TO (Name and Address): State of California Department of Motor Vehicles P.O. Box 942869 Sacramento, CA 94269-0001	LEVYING OFFICER (Name and Address)					
NAME AND ADDRESS OF COURT: Superior Court of California, County of						
PLAINTIFF: DEFENDANT:						
NOTICE OF ATTACHMENT / RELEASE OF LIEN ON MOTOR VEHICLE OR VESSEL CCP §488.385 (use a separate form for each vehicle or vessel)	LEVYING OFFICER FILE	COURT CASE NO.				
License or CF Number Make VIN / Identification Number	For DMV Use Only					
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; padding: 5px;">Name and Address of Plaintiff</td> <td style="width:50%; padding: 5px;">Name and Address of Defendant</td> </tr> <tr> <td style="height: 40px;"></td> <td style="height: 40px;"></td> </tr> </table>	Name and Address of Plaintiff	Name and Address of Defendant				
Name and Address of Plaintiff	Name and Address of Defendant					

This notice is presented to the Department of Motor Vehicles for filing pursuant to California Code of Civil Procedures section 488.385.

The plaintiff has acquired an attachment lien on the defendant's motor vehicle or vessel described above. A writ of attachment was issued by the court on _____.

By order of the court, dated _____, the notice of attachment lien originally filed with the Department of Motor Vehicles on _____, file number _____, is amended as set forth on the attached page.

Release the attachment lien on the defendant's motor vehicle or vessel

pursuant to court order dated _____

pursuant to instructions from the plaintiff or plaintiff's attorney

pursuant to CCP 488.510, the attachment lien expired on _____.

other: _____.

I certify that I have received the writ of attachment, or release, described above.

Date: _____

Signature of Levying Officer: _____

Name and Title of Levying Officer: _____

A \$15 fee shall accompany this form. One vehicle or vessel per form

Distribution: Original to DMV, Copy to Defendant, Copy to Plaintiff, Copy to Sheriff's file