DOC # 0215207

06/28/2010

08 36 AM

Record Official

Recording requested By ELKO PROGRAM CHILD SUPPORT ENFORCE

Eureka County - NV Mike Rebaleati - Recorder

Page 1 Fee Recorded By FES RPTT:

0393 Book- 500 Page-



## **RECORDING REQUESTED BY AND RETURN TO:**

**ELKO PROGRAM AREA OFFICE** CHILD SUPPORT ENFORCEMENT 1020 RUBY VISTA DRIVE, #101 **ELKO, NV. 89801** 

ORDER FOR DEFAULT

\*This is a cover page that only the Eureka County Recorders Office will use to record the above named document. Do not file stamp this cover sheet. Only attach this form to the front of the Order and Notice of Entry of Order form that will be given to the recorders office.

THIRD JUDICIAL DISTRICT COUP :

PAYETT TO UP TO A P. 1

ALAN G. LANCE Attorney General

Debra A. Orr Special Deputy Attorney General 800 Main Street, Suite 255 P.O. Box 156 Caldwell, ID 83606-0156 Telephone (208) 454-7932 Facsimile (208) 454-7945 Idaho State Bar No. 3728 JAN 0 6 2000

LAURA E. STIGHE, CLERK

BY MARCIAE MORGENSIN DEPUTY

DEPTHYMERK

Attorney for Plaintiff

IN THE DISTRICT COURT OF THE THIRD JUDICIAL DISTRICT OF THE STATE OF IDAHO, IN AND FOR THE COUNTY OF PAYETTE

THE STATE OF IDAHO, Department)
of Health and Welfare,

Plaintiff,

-vs
WENDY J. HAMILTON,
SSN:

Defendant.

Defendant.

/S/ W. B. DILLO?
LAWYER MAGISTRATE

William B. Dillon Lawyer Magistrate

ORDER FOR DEFAULT - 1



ALAN G. LANCE Attorney General

Debra A. Orr Special Deputy Attorney General 800 Main Street, Suite 255 P.O. Box 156 Caldwell, ID 83606-0156 Telephone (208) 454-7932 Facsimile (208) 454-7945 Idaho State Bar No. 3728 FILED
THIRD JUDICIAL DISTRICT COURT
PAYETTE COUNTY IDAHO

JAN 0 1 2000

\_\_\_\_\_\_P.M. LAURA L. STIGILE, CLERK

BY MARCIAE MORGENSEN DEPUTY
DEPUTY CLERK

Attorney for Plaintiff

IN THE DISTRICT COURT OF THE THIRD JUDICIAL DISTRICT OF THE STATE OF IDAHO, IN AND FOR THE COUNTY OF PAYETTE

THE STATE OF IDAHO, Department) of Health and Welfare,

No.

CASE NO. CV-SP-99-00161\*D

Plaintiff,

-vs-

JUDGMENT AND ORDER FOR SUPPORT AND REIMBURSEMENT

WENDY J. HAMILTON, SSN:

Defendant.

Pursuant to default being entered in this matter, IT IS HEREBY ORDERED, ADJUDGED AND DECREED, as follows:

- 1. That the Defendant, WENDY J. HAMILTON, Social Security Number \_\_\_\_\_\_, is the natural mother of the minor child, to-wit: CLINE A. YORK, born August 9, 1995.
- 2. That the above-named Defendant, WENDY J. HAMILTON, owes a duty of support to the said minor child, CLINE A. YORK.
- 3. The Defendant, WENDY J. HAMILTON, Social Security Number, shall pay the sum of \$142.00 per month, for the support and maintenance of the said minor child, commencing JUDGMENT AND ORDER FOR SUPPORT AND REIMBURSEMENT 1

0215207 Book 500 06/28/2010
Page 395 Page 3 of 6



December, 1999, and continuing each month thereafter until said child reaches eighteen (18) years, if said child continues his high school education, then until the child discontinues his high school education or reaches age nineteen (19) years, whichever is sooner, or until further order of this Court.

All such payments shall be made to the Idaho Child Support Receipting, P.O. Box 70008, Boise, Idaho 83707-0108.

#### NOTICE OF AUTOMATIC AND IMMEDIATE INCOME WITHHOLDING

This order is enforceable by immediate income withholding as of the date of this Order under Chapter 12, Title 32, <u>Idaho Code</u>. This immediate income withholding order will be issued to your employer or other person who pays your income without additional notice to you.

### NOTICE OF LIEN

Pursuant to Idaho Code Section 7-1206, this support order shall be enforced by the filing of a statewide lien upon all real and personal property of the obligor if the delinquency in the support obligation is equal to \$2,000.00 or 90 days of support, whichever is less.

4. That the above-named Defendant shall maintain medical insurance for said minor child, CLINE A. YORK, if it is available to the Defendant, WENDY J. HAMILTON, at a reasonable cost, until said child reaches the age of majority. Health insurance is considered to be reasonable in cost if it is employment related or the Defendant belongs to a group where group health insurance is available to members of the group and their dependents. The Defendant is also ordered to pay fifty percent (50%) of all health care expenses, including orthodontic, optical, and dental expenses for said minor child not covered by insurance. Any claimed health care expense for the child or children, whether or not covered by

JUDGMENT AND ORDER FOR SUPPORT AND REIMBURSEMENT - 2

insurance, which would result in an out-of-pocket expense of \$500 or more to the parent who did not incur or consent to the expense, must be approved in advance, in writing, by both parties or by prior Court order. Relief may be granted by the Court for failure to comply under extraordinary circumstance, and the Court may be in its discretion apportion the incurred expense in some percentage other than that in the existing support order, and in so doing, may consider whether consent was unreasonably requested or withheld.

# NOTICE OF MEDICAL ENFORCEMENT

This order for medical insurance obtained is enforceable by allowing Plaintiff to enforce medical coverage. That whenever an obligor parent who has been ordered to provide health insurance coverage for a dependent child(ren) fails to provide such coverage or lets it laps, the Department of Health and Welfare or other obligee may seek enforcement of the coverage as of the effective date of the order under Chapter 12, Title 32, Idaho Code.

- 5. The Plaintiff is granted judgment against the Defendant, WENDY J. HAMILTON, in the amount of \$4,402.00, plus interest as allowed by law, as and for reimbursement to Plaintiff for monies paid for the care, support and maintenance expenses provided to the minor child, from May 1, 1997, through and including November 30, 1999.
- 6. The State and Federal income tax refunds of the Defendant shall be offset to help pay any arrearages.
- 7. The Plaintiff is granted judgment against the Defendant WENDY J. HAMILTON, as and for attorney fees in the amount of \$330.00, pursuant to the Plaintiff's Affidavit Of Attorney Fees.
- 8. The obligor and the obligee shall provide to the Department of Health and Welfare written notification within thirty JUDGMENT AND ORDER FOR SUPPORT AND REIMBURSEMENT 3

- (30) days of any changes in his/her residential address or mailing address if different from the residential address and telephone number.
- 9. All monies paid under this judgment shall be paid to Idaho Child Support Receipting, P.O. Box 70008, Boise, Idaho 83707-0108.

DATED this \_\_\_\_\_ day of January, 2000.

/S/ W. B. DILLON LAWYER MAGISTRATE

William B. Dillon Lawyer Magistrate

### CERTIFICATE OF SERVICE

THIS HEREBY CERTIFIES that a true and correct copy of the foregoing Judgment And Order For Support And Reimbursement, was sent by First Class, U.S. Mail to:

Wendy Hamilton 141 SW Blvd. New Plymouth, ID 83655

with proper postage affixed, on this  $\frac{\sqrt{g^{+h}}}{h}$  day of January, 2000.

CERTIFY THAT THE FOREGOING IS A TRUE AND CORRECT COPY OF THE ORIGINAL ON FILE IN THIS OFFICE IN WITNESS THEREOF, I HAVE HEREUNTO SET MY HAND.

Deputery Cakerk

DATED THIS

21

JUDGMENT AND ORDER FOR SUPPORT AND REIMBURSEMENT - 4