

DOC # 0227351

05/28/2014

11 44 AM

Official Record

Recording requested By
STATE OF NEVADA (DEPT OF HEALTH)

Eureka County - NV

Mike Rebaletti - Recorder

Fee Page 1 of 6
RPTT Recorded By LH
Book- 566 Page- 0001



0227351

RECORDING REQUESTED BY AND RETURN TO:

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

ORDER AND NOTICE OF ENTRY OF ORDER

*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.

1 CASE NO DR-UI-14-185

2 DEPT. NO 1

2014 MAY 19 AM 10 52

ELKO CO DISTRICT CLERK

4 **FOURTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA**

CLERK DEPUTY

5 **IN AND FOR THE COUNTY OF ELKO**

6 **FAMILY DIVISION**

9 DIVISION OF WELFARE AND
SUPPORTIVE SERVICES and
10 DEBRA NANNEY,

**ORDER AND NOTICE
OF ENTRY OF ORDER**

11 Obligee,

12 vs.

13 TOMMIE WEAR,

14 Obligor.
15 _____

16 The Court, having reviewed the Master's Recommendation prepared by the Court Master
17 on April 17th, 2014, and,

18 (x) No timely objection having been filed hereto.

19 () The Court, having received the objection(s) thereto, as well as any other papers,
20 testimony and argument related thereto, and good cause appearing

21 **IT IS HEREBY ORDERED that the Master's Findings and Recommendations are**
22 **affirmed and adopted.**

23 **IT IS THEREFORE ORDERED AS FOLLOWS:**

24 1. (x) The Obligor is the mother of the following children:

25 NAME

D.O.B

26 Trecy Stuart

November 4, 1996

27 Monique Stuart

February 18, 1998 (lives with her father)

Kohl Robert Bellm

April 12, 2001

28 2. (x) A Judgment is entered against Obligor for child support arrears in the amount of



\$600 00 from February 1, 2014 through April 30, 2014 This shall be paid at \$50 00 a month starting May 1, 2014 until paid in full A Judgment is entered against Obligor for interest on child support arrears in the amount of \$0 00 from February 1, 2014 through April 30, 2014 A Judgment is entered against Obligor for penalties on child support arrears in the amount of \$0 00 from February 1, 2014 through April 30, 2014

3 (x) The Obligor shall pay \$200 00 per month in ongoing support beginning May 1, 2014 and on the same day each month thereafter until further order of this Court.

All payments MUST be in the form of a cashier's check or money order ONLY. Effective August 1, 2000, all child support payments must be payable to State Collection and Disbursement Unit (SCaDU) and mailed to: SCaDU, P.O. Box 98950, Las Vegas, NV 89193-8950.

NOTICE: NO CREDIT WILL BE GIVEN FOR PAYMENTS PAID DIRECTLY TO THE OBLIGEE OR THE CHILDREN.

Additionally, the Obligor MUST place his/her social security number on each payment.

Effective January 1, 2004, simple interest will accrue on all unpaid child support balances for cases with a Nevada controlling order pursuant to NRS 99.040. Interest assessed by a judgment of the court prior to January 1, 2004 will be enforced.

A 10% penalty will be assessed on each unpaid installment, or portion thereof, of an obligation to pay support for a child, pursuant to NRS 125B.095.

If you pay your child support through income withholding and your full obligation is not met by the amount withheld by your employer, you are responsible to pay the difference between your court ordered obligation and the amount withheld by your employer directly to the state disbursement unit. If you fail to do so you will be subject to the assessment of penalties and interest.

YOU MAY AVOID THESE ADDITIONAL COSTS BY MAKING YOUR CURRENT CHILD SUPPORT PAYMENTS EACH MONTH.

4 (x) The Obligor or Obligee shall provide health insurance, including medical, dental, orthodontic and ophthalmological coverage for the children if available through her employment at a reasonable cost, including any group health plan(s) under ERISA, from the date of this order on and until said children are no longer eligible for said coverage, and both parties shall cooperate and provide assistance in obtaining payment for health care services You are required to notify the Child Support Enforcement Office when health insurance coverage is available or has been terminated.

Last known mailing address of Obligor: Address Confidential

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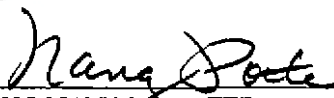


Last known mailing address of children: Address Confidential

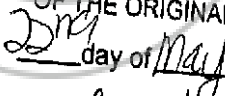
- (x) The Obligor shall pay health care expenses, including medical, dental, orthodontic, and ophthalmological services for the children as follows one half of all costs not covered by insurance, upon being provided by Obligee with adequate documentation/billing regarding said expenses and any EOB or other insurance payment documentation.
- (x) The Obligor shall notify the State Child Support Office or the District Attorney's Child Support Office of any change of address or employment within ten (10) days.
- (x) A wage/income withholding shall be issued starting immediately.

- Pursuant to NRS 125B 145 this Order may be reviewed every three (3) years and is subject to future modifications.
- Unless a stay of this Order is obtained from District Court, all enforcement procedures including, but not limited to wage withholding, garnishment, liens and the attachment of federal income tax returns will be undertaken upon entry of this Order
- If any determination of paternity in this Order is at variance with the children's birth certificate issued in this state, a new birth certificate is to be issued pursuant to NRS 440 325.
- Both parties shall notify the District Attorney's Office, Child Support Enforcement Agency in WRITING of any change of address, change of telephone number, change of employment, change of custody, access to health insurance coverage or change in health insurance policy information, or entry of any other Order relative to child support.

SO ORDERED this 14 day of May, 2014


HON. NANCY PORTER
DISTRICT JUDGE
FOURTH JUDICIAL DISTRICT COURT

CERTIFIED COPY
DOCUMENT ATTACHED IS A
TRUE AND CORRECT COPY
OF THE ORIGINAL ON FILE


day of May, 20 14


CLERK

RECEIVED

MAY 20 2014

ELKO SEP

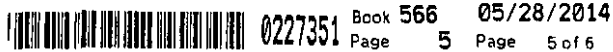


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TO: NEVADA STATE WELFARE DIVISION CHILD SUPPORT ENFORCEMENT and
DEBRA NANNEY, Oblgee

DATED May 19, 2014

COURT STAFF
FOURTH JUDICIAL DISTRICT COURT



1 CERTIFICATE OF SERVICE

2 Pursuant to NRCp 5(b), I certify that I am an employee of the Fourth Judicial District
3 Court, and that on this 19 day of May, 2014, I personally hand delivered a true and correct
4 file stamped copy of the foregoing Order to.

5 Tammy Hagan, Caseworker
6 Nevada State Welfare Division
7 Child Support Enforcement
8 1020 Ruby Vista Drive #101
9 Elko, NV 89801
[Box in Clerk's Office]

10 
11 _____

12
13
14
15 CERTIFICATE OF MAILING

16 Pursuant to NRCp 5(b), I certify that I am an employee of the Fourth Judicial District
17 Court, and that on this 19 day of May, 2014, I deposited for mailing in the U.S. Mail at
18 Elko, Nevada, postage prepaid, a true and correct file stamped copy of the foregoing Order
19 addressed as follows

20 TOMMIE WEAR
21 Address Confidential

22 DEBRA NANNEY
23 Address Confidential

24 
25 _____



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