

Doc Number: **0831556**

10/02/2013 02:41 PM

OFFICIAL RECORDS

Requested By:
NEVADA/DIV OF WELFARE &
SUPPORT SERV

DOUGLAS COUNTY RECORDERS
Karen Ellison - Recorder

Page: 1 of 12 Fee: \$ 0.00

Bk: 1013 Pg: 470



Deputy ar

1
2 APN # _____

3
4
5
6 Recording Requested by and returned to:

(for Recorder's use only)

7
8 Name: Division of Welfare and Supportive Services
9 Child Support Enforcement

10
11 Address: 300 E. Second St., Ste. 1200
12 City/State/Zip: Reno, NV 89501-1580

13
14 Release of Lien (RELN)

15 Judgment and Order

16
17 Stipulation and Order

18
19 Other:

20 NCP'S NAME: ANTHONY ROBERT THACKER

21 UPI #: 230-64-2200A

22
23
24
25 This page added to provide additional information required by NRS 111.312 Sections 1-2.

26 (Additional recording fee applies.)

27
28 This cover page must be typed or printed.

1 CASE NO. 13-UR-0039

2 DEPT. NO. II

3 **IN THE NINTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA**

4 **IN AND FOR THE COUNTY OF DOUGLAS**

5
6 DIVISION OF WELFARE AND SUPPORTIVE SERVICES
7 AND HAYLEY AUTUMN TOBIN
8 Obligees,

AFFIDAVIT OF RECORDATION

9 Vs.
10 ANTHONY ROBERT THACKER
11 Obligor

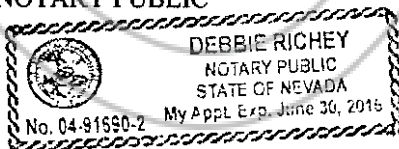
12 I, Alyssa Matovina, hereby swear and affirm under penalty of perjury that the following assertions are true:

- 13 1. That affiant is, and at all times mentioned herein was, a citizen of the State of Nevada, over the
- 14 age of twenty-one years of age, and an employee of the Division of Welfare and Supportive
- 15 Services Child Support Enforcement Office managing the legal process under Case Number
- 16 230-64-2200A.
- 17 2. That this affidavit and Judgment and Order is being filed pursuant to NRS125B.142 and
- 18 NRS17.150, and when so recorded shall become a lien upon all the real property of the Obligor.
- 19 3. That the Obligor's name is Anthony Robert Thacker, whose address, Social Security number
- 20 and date of birth is confidential on file with the Division of Welfare and Supportive Services,
- 21 Child Support Enforcement Office.
- 22 4. That attached hereto is a certified copy of the Judgment and Order filed on September 13, 2013.

23 Alyssa Matovina
24 Alyssa Matovina
25 Administrative Assistant II

26 State of Nevada, County of Washoe
27 Subscribed and sworn before me this
28 1st day of October, 2013

Debbie Richey
NOTARY PUBLIC



INSTRUCTIONS TO RECORDER

Obligor: Anthony Robert Thacker

Obligee: Hayley Autumn Tobin

Date: September 30, 2013

From: Alyssa Matovina, Administrative Assistant II, Division of Welfare and Supportive Services Child Support Enforcement Office

Enclosed: Certified copy of Child Support Judgment and Order

In accordance with NRS125B.142 and NRS17.150, on the behalf of the Division please record the attached Affidavit and Judgment and Order at the request of the Division of Welfare and Supportive Services Child Support Enforcement Office.

Please note: If the judgment is a Stipulation and Order, they should be recorded as one document.

Thank you for your assistance. If you have any questions or concerns, please call me at (775) 448-5152.

COPY

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Case No. 13 UR0039

2013 SEP 13 AM 11:13

SEP 12 2013

Dept No. II

P. GREGORY

DOUGLAS COUNTY DISTRICT COURT CLERK

IN THE NINTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA

IN AND FOR THE COUNTY OF DOUGLAS

DIVISION OF WELFARE AND SUPPORTIVE SERVICES AND HAYLEY AUTUMN TOBIN

Obligee,

Vs.

ANTHONY ROBERT THACKER

Obligor

The undersigned does hereby affirm this document does not contain the social security number of any person, pursuant to NRS 239B.030.

JUDGMENT AND ORDER

This matter was heard on JULY 12, 2013, before the Court Master with the following persons present:

Obligee: (X) Present () Not Present Represented by: _____

Obligor: () Present () Not Present Represented by: _____

(X) Present, via telephone

Presented by: JOANNE KAPAHEE Department of Health and Human Services Child Support Enforcement

After considering all of the evidence, the Master hereby makes the following Findings and Recommendations:

The Obligor was properly served on DECEMBER 4, 2012, with a Notice and Finding of Financial and Parental Responsibility.

Obligee has named Obligor, ANTHONY ROBERT THACKER, as the father of TATUM OLIVER TOBIN-VAUGHN, born SEPTEMBER 24, 2011

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1 () Obligor was properly served and noticed of today's hearing at his/her last known
2 address and failed to appear.

3 () Obligee was properly noticed of today's hearing on or about _____.

4 Obligor's gross monthly earnings are \$1,267.53. Pursuant to the formula
5 prescribed within NRS 125B.070, 18% of those earnings, the state calculates a support
6 obligation in the sum of \$ 228.00.

7 Gross monthly income based on actual income.

8 The Child support amount recommended by the Court Master (set out in paragraph 4
9 below) deviates from the statutory percentage because under NRS 125B.080, the
10 following factors were considered: \$26.00 deviation downward for
11 one-half the cost of health insurance, upward
12 deviation for one-half child care, downward deviation
13 for the support of another child.

RECOMMENDED ORDERS:

14 1. The Obligor is the parent of the following child:

<u>NAME</u>	<u>D.O.B.</u>
<u>TATUM OLIVER TOBIN-VAUGHN</u>	<u>SEPTEMBER 24, 2011</u>

15
16
17 2. That said child's birth certificate be amended by entering the name of ANTHONY
18 ROBERT THACKER as the father of said child and that the Court order the state
19 registrar of vital statistics to prepare an amended certificate of birth consistent with this
20 order.

21 3. The Obligor shall pay \$ 220.00 per month in ongoing support beginning
22 August 1, 2013. The obligation for Child Support continues until the
23 child turns 18 years of age, or until the child turns 19 years of age if the child is
24 enrolled in High School. However, this obligation to support a child is affected by a
25 child's ability to live on their own (NRS129.080 to 129.140 – legal emancipation) or
26 when applicable, continued financial support beyond the age of majority per
27 NRS125B.110.
28

1 4. An arrears Judgment is entered in the amount of \$ 3,193.00 for/through
2 June 1, 2012 through July 31, 2013

3 To be paid by payments of \$ 30.00 per month beginning August 1, 2013

4 All payments MUST be made in the form of a money order, cashier's check or business
5 check and payable to **STATE COLLECTION AND DISBURSEMENT UNIT (SCaDU)**
6 and sent to:

7 **STATE COLLECTION AND DISBURSEMENT UNIT (SCaDU)**
8 **P.O. BOX 98950**
9 **LAS VEGAS, NV 89193-8950**

10 The following information must be included with each payment:

- 11 A. Name (first, middle, last) of person responsible for paying child support.
- 12 B. Social Security Number of person responsible for paying child support.
- 13 C. Child support case number 230-64-2200A listed on each payment.
- 14 D. Name of custodian (first and last name of person receiving child support).

15 **PAYMENT OF SUPPORT IS TO BE AS PROVIDED HEREIN, AND THE GIVING**
16 **OF GIFTS, OF MAKING PURCHASES OF FOOD, CLOTHING AND THE LIKE**
17 **WILL NOT FULFILL THE OBLIGATION.**

18 **NOTICE: NO CREDIT WILL BE GIVEN FOR PAYMENTS PAID DIRECTLY TO**
19 **THE OBLIGEE.**

20 5. All payments shall be made by immediate income withholding. If you pay your child
21 support through income withholding and your full obligation is not met by the amount
22 withheld by your employer, you are responsible to pay the difference between your
23 court ordered obligation and the amount withheld by your employer directly to the
24 STATE COLLECTION AND DISBURSEMENT UNIT (SCaDU). If you fail to do so
25 you will be subject to the assessment of penalties and interest. You may avoid these
26 additional costs by making your current child support payments each month.

27 ///

28

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1 6. () The Obligee shall provide health insurance coverage for the child when available
2 through employment or group policy under a plan that is reasonable in cost as defined
3 in NRS 125B.085 and Obligor shall pay \$ _____ per month for health insurance
4 premium (medical cash) effective _____.

5 Medical costs incurred for the above-referenced period have not yet been determined.
6 The State's rights to recover said costs are not waived by way of this order.

7 7. Pursuant to NRS 125B.080(7), expenses for health care which are not reimbursed
8 through insurance, including expenses for medical, surgical, dental, orthodontic and
9 optical expenses, must be shared equally by both parents.

10 8. The Obligor shall pay and judgment is entered in favor of the Division of Welfare
11 Supportive Services for the reimbursement of genetic test fees totaling \$ 114.00, to
12 be paid by payments of \$ 10.00 per month beginning August 1, 2013.

13 9. The Obligor shall keep Division of Welfare and Supportive Services informed of any
14 change regarding current employment and of access to health insurance coverage in
15 **WRITING** (including health insurance policy information) within 10 days of such
16 change.

17 10. Obligor shall be responsible for ALL child support and judgment payments due.
18 Payment is to be made directly to the STATE COLLECTION AND DISBURSEMENT
19 UNIT (SCaDU). At any time withholding does not occur, Obligor must make
20 voluntary payments to the STATE COLLECTION AND DISBURSEMENT UNIT
21 (SCaDU).

22 11. Effective July 1, 2004 simple interest will accrue on all adjudicated arrears balances
23 (including payment in lieu of medical insurance) and spousal support balances, for
24 cases with a Nevada controlling order pursuant to NRS 99.040. Interest assessed by a
25 judgment of the court prior to July 1, 2004 will be enforced. Interest on the judgment
26 shall accrue at the rate established by NRS 125B.140(2)(c)(1).
27
28

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12. Pursuant to NRS125B.095, a late fee/penalty of 10% (ten percent) of the unpaid monthly child support amount will be added to the arrears balance of the Obligor if the Obligor becomes delinquent in the amount owed for one month's support.

13. The State of Nevada has continuing exclusive jurisdiction for enforcement and modification purposes pursuant to the Full Faith and Credit for Child Support Orders Act.

It is further ordered that: See page 2, lines 8-12.
Paternity established pursuant to genetic test results. Obligor to provide health insurance when available at a reasonable cost.

SUPPORT OBLIGATION BREAKDOWN AS FOLLOWS:

Child Support.....	\$ <u>220.00</u>	Effective <u>8/1/2013</u>
Child Support Arrearages.....	\$ <u>30.00</u>	Effective <u>8/1/2013</u>
Medical Cash.....	\$ _____	Effective _____
Genetic Test Fee.....	\$ <u>10.00</u>	Effective <u>8/1/2013</u>
TOTAL PAYMENT.....	\$ <u>260.00</u>	

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.

IT IS SO RECOMMENDED.

This 12 day of July, 2013.



COURT MASTER

1 **NOTICE OF RIGHT TO WAIVE APPEAL**

2 () The Obligor waives the ten (10) days for objection to the Master’s Report, and
3 this report may be submitted to the District Court immediately.
4 Receipt of the Master’s Recommendation is acknowledged by my signature below.

5 _____
6 ANTHONY ROBERT THACKER, Obligor

7
8 **NOTICE OF RIGHT TO APPEAL**

9 Appeals are governed by NRS 425.3844. You have 10 (ten) days from receipt of this
10 recommendation to file your appeal. A failure to file and serve a written appeal will result
11 in final Judgment being ordered by District Court.

12 Appeals to this Order **must be filed** with the Ninth Judicial District Court of the State of
13 Nevada and **served upon** the other party and the Division of Welfare and Supportive
14 Services at 300 East Second Street Suite 1200, Reno, NV 89501.

15 You must submit your appeal to the Court Clerk for filing by submitting your original
16 appeal and two copies. Legal advice regarding your appeal will not be provided.

17 For information on obtaining a appeal packet or the appeal process please call the **Division**
18 **of Welfare and Supportive Services** at 1-800-992-0900 located at **300 East Second**
19 **Street Suite 1200, Reno, NV 89501.**

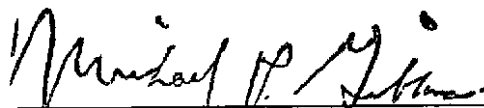
20 **ORDER**

21 The Court, having reviewed the above and foregoing Master’s Report prepared by the Court
22 Master and,

- 23 () The Obligor having waived the right to object thereto.
24 () No timely objection having been filed hereto.

25 **IT IS HEREBY ORDERED that the Master’s Findings and Recommendations are**
26 **affirmed and adopted.**

27 Dated: September 13, 2013.

28 

 DISTRICT JUDGE

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1 Case No. 13 UR0039

2 Dept No. II

3
4 IN THE NINTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA

5 IN AND FOR THE COUNTY OF DOUGLAS

6
7 DIVISION OF WELFARE AND SUPPORTIVE SERVICES
8 AND HAYLEY AUTUMN TOBIN

9 Obligee,

10 Vs.

11 ANTHONY ROBERT THACKER
12 Obligor

13 CERTIFICATE OF MAILING

14
15 Pursuant to NRCP 5(b), I certify that on this date I deposited for mailing at Reno,
16 Nevada, a true copy of the attached document addressed to:

17 ANTHONY ROBERT THACKER
18 CONFIDENTIAL
19 IN FILE

20 HAYLEY AUTUMN TOBIN
21 CONFIDENTIAL
22 IN FILE

23 DATED: July 16, 2013

24 SIGNED: Linda Holcomb
25 LINDA HOLCOMB
26 ADMINISTRATIVE ASSISTANT II

27 DOCUMENTS: JUDGMENT AND ORDER
28 CASE NO. 13 UR0039

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ARREARAGE WORKSHEET

NON-CUSTODIAL PARENT: ANTHONY THACKER		IV-D CASE NUMBER: 230642200A		PAO OFFICE: RENO	COMPLETION DATE: 6/20/13
CUSTODIAL PARENT: HAYLEY TOBIN		IV-D CASE WORKER: J.LOPEZ		COUNTY: DOUGLAS	DOCKET NUMBER:
DATE	ASST PAID	RQSTD OBL	PAYMENTS	COURT ORDERED OBLIGATION	NOTES/COMMENTS
Jun-12		312.00			GMI \$1731.89 x 18% = \$312
Jul-12		209.00			GMI \$1163.45 X 18% = 209
Aug-12		211.00			GMI \$1169.82 x 18% = \$211
Sep-12		239.00			GMI \$1330.41 x 18% = \$239
Oct-12		198.00			GMI \$1097.58 x 18% = \$198
Nov-12		250.00			GMI \$1387.77 x 18% = \$250
Dec-12		221.00			GMI \$1227.12 x 18% = \$221
Jan-13		160.00			GMI \$891.46 x 18% = \$160
Feb-13		197.00			GMI \$1094.38 x 18% = \$197
Mar-13		214.00			GMI \$1190.48 x 18% = \$214
Apr-13		152.00			GMI \$847.22 x 18% = \$152
May-13		374.00			GMI \$2078.87 x 18% = \$374
Jun-13		228.00			6/12-5/13 \$15,210.45 / 12 =
Jul-13		228.00			\$1267.53 x 18% = \$228
TOTALS:	0.00	3193.00	0.00	0.00	
LESS PMTS:		3193.00			

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Exhibit A
6/20/2013

COPY

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SEP 17 2013

STATE OF NEVADA
CHILD SUPPORT PROGRAM

CERTIFIED COPY

The document to which this certificate is attached is a full, true and correct copy of the original in file and of record in my office.

DATE 9/18/13

TED THРАН, Clerk of the 9th Judicial District Court of the State of Nevada, in and for the County of Douglas.

By [Signature] Deputy