12/04/2013 02:21 PM OFFICIAL RECORDS Requested By
NEVADA/DIV OF WELFARE &
SUPPORT SERV 1 APN# 2 DOUGLAS COUNTY RECORDERS Karen Ellison - Recorder 3 1 Of 12 Fee: \$ 0.00 Bk: 1213 Pg: 575 4 5 Recording Requested by and returned to: 6 (for Recorder's use only) 7 Name: Division of Welfare and Supportive **Services Child Support Enforcement** 8 9 Address: 300 E. Second St., Ste. 1200 10 City/State/Zip: Reno, NV 89501-1580 11 Release of Lien (RELN) 12 13 Judgment and Order 14 Stipulation and Order 15 16 Other: 17 18 NCP'S NAME: DEREK DANIEL THOMPSON 19 UPI#: 375-52-4100B 20 21 22 23 This page added to provide additional information required by NRS 111.312 Sections 1-2. 24 (Additional recording fee applies.) 25 26 This cover page must be typed or printed. 27 28

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NOTARY PUBLIC

## 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 KATHRINE ROSE REMPT Obligees.

#### AFFIDAVIT OF RECORDATION

Vs. **DEREK DANIEL THOMPSON** Obligor

CASE NO. 13PA0007

DEPT. NO. II

I, Linda Holcomb, hereby swear and affirm under penalty of perjury that the following assertions are true:

- That affiant is, and at all times mentioned herein was, a citizen of the State of Nevada, over the 1. age of twenty-one years of age, and an employee of the Division of Welfare and Supportive Services Child Support Enforcement Office managing the legal process under Case Number 375-52-4100B.
- 2. That this affidavit and Judgment and Order is being filed pursuant to NRS125B.142 and NRS17.150, and when so recorded shall become a lien upon all the real property of the Obligor.
- 3. That the Obligor's name is **DEREK DANIEL THOMPSON**, whose address, Social Security number and date of birth is confidential on file with the Division of Welfare and Supportive Services Child Support Enforcement Office.
- That attached hereto is a certified copy of the Judgment and Order filed on NOVEMBER 12. 4. 2013.

Administrative Assistant II

State of Nevada, County of Washne Subscribed and sworn before me this nd day of December, 2013

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Obligee:

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### INSTRUCTIONS TO RECORDER

DEREK DANIEL THOMPSON

DIVISION OF WELFARE AND SUPPORTIVE SERVICES

AND KATHRINE ROSE REMPT

DECEMBER 2, 2013

Linda Holcomb, 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) 448-5154.

COPY

## RECEIVED

NOV 1 2 2013

Case No. 13-PA-0007

DOUGLAS COUNTY
DISTRICT COURT CLER

Dept No. II

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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 KATHRINE ROSE REMPT Obligee,

Vs.

DEREK DANIEL THOMPSON 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 <u>OCTOBER 18. 2013</u>, before the Court Master with the following persons present:

Obligee:

(X) Present ( ) Not Present

Represented by:

Obligor:

( ) Present (X) Not Present

Represented by:

( ) Present, via telephone

Presented by: KIMBERLY SMALLEY

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 or about JUNE 12, 2013, with a Notice and Finding of

Financial and Parental Responsibility.

Obligee has named Obligor, <u>DEREK DANIEL THOMPSON</u>, as the father of <u>JONATHAN</u>

MORRIS REMPT, born JUNE 5, 2012.

2834947 Page 4

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(X) An arrears Judgment is entered in the amount of \$\frac{1410.00}{1400.00}\$ for/through

\[
\text{Labruary 1 2019 the nich October 31 2013}.\]

# STATE COLLECTION AND DISBURSEMENT UNIT (SCaDU) P.O. BOX 98950

## LAS VEGAS, NV 89193-8950

The following information must be included with each payment:

- A. Name (first, middle, last) of person responsible for paying child support.
- B. Social Security Number of person responsible for paying child support.
- C. Child support case number 375-52-4100B listed on each payment.
- D. Name of custodian (first and last name of person receiving child support).

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

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

All payments shall be made by immediate income withholding. 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 COLLECTION AND DISBURSEMENT UNIT (SCaDU). 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.

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(x) The Obligee shall provide health insurance coverage for the child when available
through employment or group policy under a plan that is reasonable in cost as defined
in NRS 125B.085 and Obligor shall pay \$ 35.00 per month for health insurance
premium (medical cash) effective <u>Timember 1 2013</u> .
Medical costs incurred for the above-referenced period have not yet been determined.
The State's rights to recover said costs are not waived by way of this order.

- 7. (x) Pursuant to NRS 125B.080(7), expenses for health care which are not reimbursed through insurance, including expenses for medical, surgical, dental, orthodontic and optical expenses, must be shared equally by both parents.
- 8. The Obligor shall keep Division of Welfare and Supportive Services informed of any change regarding current employment and of access to health insurance coverage in WRITING (including health insurance policy information) within 10 days of such change.
- 9. Obligor shall be responsible for ALL child support and judgment payments due.

  Payment is to be made directly to the STATE COLLECTION AND DISBURSEMENT UNIT (SCaDU). At any time withholding does not occur, Obligor must make voluntary payments to the STATE COLLECTION AND DISBURSEMENT UNIT (SCaDU).
- 10. Effective July 1, 2004 simple interest will accrue on all adjudicated arrears balances (including payment in lieu of medical insurance) and spousal support balances, for cases with a Nevada controlling order pursuant to NRS 99.040. Interest assessed by a judgment of the court prior to July 1, 2004 will be enforced. Interest on the judgment shall accrue at the rate established by NRS 125B.140(2)(c)(1).
- 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.

	12. The State of Nevada has continuing exclusive jurisdiction for enforcement and									
	modification purposes pursuant to the Full Faith and Credit for Child Support Orders									
I	Act.									
	It is further ordered that: Anternate entroplished for Child									
Denathan Rangt Derryant to Ohlings										
Jenathan Rannt Bersuant to Obligans.  Jailing to appear in court and failure to  respond to the Motive and Finding of Financia  and Arrental Responsibility.										
	Bespond to the Potice and Finding & Financial									
	and Sprante ! Harrowill I't									
	ina rampailer ignomination.									
	SUPPORT OBLIGATION BREAKDOWN AS FOLLOWS:									
	Child Support\$312.00 Effective Transfer 1203									
	Child Support Arrearages \$ 35.00 Effective Movember 1 2013									
	Medical Cash									
	TOTAL PAYMENT \$ 362.00									
	Pursuant to NRS 125B.145 this Order may be reviewed every three (3) years and is subject									
ř	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 6 day of November 2013.									

COURT MASTER

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#### NOTICE OF RIGHT TO WAIVE APPEAL

() The Obligor waives the ten (10) days for objection to the Master's Report, and this report may be submitted to the District Court immediately.

Receipt of the Master's Recommendation is acknowledged by my signature below.

DEREK DANIEL THOMPSON, Obligor

#### NOTICE OF RIGHT TO APPEAL

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

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

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

For information on obtaining a appeal packet or the appeal process please call the Division of Welfare and Supportive Services at (775) 684-7200 located at 300 East Second Street Suite 1200, Reno, NV 89501.

#### ORDER

The Court, having reviewed the above and foregoing Master's Report prepared by the Court Master and,

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

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

Dated: / prembis 8 , 2013.

DISTRICT JUDGE

BK : 12 13 PG : 584 12/4/20 13

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DOCUMENTS:

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JUDGMENT AND ORDER CASE NO. 13-PA-0007

1	Case No. 13-PA-0007
2	Dept No. II
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 KATHRINE ROSE REMPT Obligee,
9	
10	Vs.
11	DEREK DANIEL THOMPSON Obligor
12	
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	DEREK DANIEL THOMPSON  CONFIDENTIAL
18	IN FILE
19	KATHRINE ROSE REMPT
20	CONFIDENTIAL IN FILE
21	
22	DATED: 904 m lux 7, 2013
23	
24	SIGNED: The Comb
25	ADMINISTRATIVE ASSISTANT II
26	



## ARREARAGE WORKSHEET

Page 1

NON-CUSTODIAL P		IV-D CASE NUMBER:		PAO OFFICE:	COMPLETION DATE:
DEREK DANIEL T		375524100B IV-D CASE WORKER: L TAYLOR		Reno COUNTY: DOUGLAS	JUNE 5, 2013 DOCKET NUMBER:
CUSTODIAL PAREN KATHRINE ROSE					
DATE	ASST PAID	RQSTD OBL	PAYMENTS		NOTES/COMMENTS
Feb-12		100.00	-		No record of wages
Mar-12	-	219.00		-	GMI: \$1216.00 x 18% = \$218.88
Apr-12		241.00			GMI: \$1336.25 x 18% = \$240.53
May-12		0.00			CST not residing in NV
Jun-12	<del> </del>	0.00			м п
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Apr-13		100.00	7		NCP incarcertated
May-13		100.00			No record of wages
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### **CERTIFIED COPY**

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

TED THRAN Clark of the 9th Judicial District Court of the State of Nevada, in and for the County of Douglas,

STATE OF NEVADA RECEIVED NOV 1 3 2013

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STATE OF NEVADA CHILD SUPPORT PROGRAM

Appeal Period Fill 11/22/13