

Doc Number: **0836692**

01/14/2014 12:05 PM

OFFICIAL RECORDS

Requested By:  
DEPT OF CHILD SUPPORT SERVICES

DOUGLAS COUNTY RECORDERS  
Karen Ellison - Recorder

Page: 1 of 12 Fee: \$ 0.00  
Bk: 0114 Pg: 1962



Deputy: gb

1  
2 APN # \_\_\_\_\_

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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  **Other:**

19  
20 **NCP'S NAME: DUSTIN BLEU NORTH**

21  
22 **UPI #: 350-43-1100D**

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-0068

2 DEPT. NO. I

3  
4 **IN THE NINTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA**  
5 **IN AND FOR THE COUNTY OF DOUGLAS**

6 DIVISION OF WELFARE AND SUPPORTIVE SERVICES  
7 AND AMBER LYNN DIMMITT  
8 Obligees,

**AFFIDAVIT OF RECORDATION**

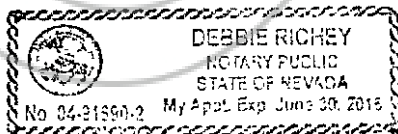
9 Vs.  
10 DUSTIN BLEU NORTH  
11 Obligor

12 I, Linda Holcomb, 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
- 16 350-43-1100D.
- 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 DUSTIN BLEU NORTH, 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 JANUARY 9, 2014.

23 *Linda Holcomb*  
24 Linda Holcomb  
25 Administrative Assistant II

26 State of Nevada, County of Washoe  
27 Subscribed and sworn before me this  
28 10<sup>th</sup> day of January, 2014  
*Debbie Richey*  
NOTARY PUBLIC



**INSTRUCTIONS TO RECORDER**

Obligor: DUSTIN BLEU NORTH

Obligee: AMBER LYNN DIMMITT

Date: JANUARY 10, 2014

From: 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

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JAN 08 2014

Case No. 13-UR-0068

2014 JAN -9 PM 2:21

DOUGLAS COUNTY DISTRICT COURT

Dept No. Z

TED THUAN CLERK

IN THE NINTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA

P. GREGORYS DEPUTY

IN AND FOR THE COUNTY OF DOUGLAS

DIVISION OF WELFARE AND SUPPORTIVE SERVICES AND AMBER LYNN DIMMITT

Obligee,

Vs.

DUSTIN BLEU NORTH

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 DECEMBER 13, 2013, before the Court Master with the following persons present:

Obligee: [X] Present ( ) Not Present Represented by:
Obligor: ( ) Present [X] Not Present Represented by:
Presented by: Kim 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 JULY 26, 2013, with a Notice and Finding of Financial and Parental Responsibility.
Obligee has named Obligor, DUSTIN BLEU NORTH, as the father of MASON DIMMITT, born DECEMBER 22, 2010.

BK: 0114 PG: 1965 1/14/2014

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- Obligor was properly served and noticed of today's hearing at his/her last known address and failed to appear.
- Obligee was properly noticed of today's hearing on or about \_\_\_\_\_.
- Obligor's gross monthly earnings are \$ 1512.33. Pursuant to the formula prescribed within NRS 125B.070, 18% of those earnings, the state calculates a support obligation in the sum of \$ 272.00.  
Gross monthly income based on Unemployment Benefits.
- The Child support amount recommended by the Court Master (set out in paragraph 4 below) deviates from the statutory percentage because under NRS 125B.080, the following factors were considered: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

THE RECOMMENDED ORDER:

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

<u>NAME</u>	<u>D.O.B.</u>
<u>MASON DIMMITT</u>	<u>DECEMBER 22, 2010</u>
2.  That said child's birth certificate be amended by entering the name of DUSTIN BLEU NORTH as the father of said child and that the Court order the state registrar of vital statistics to prepare an amended certificate of birth consistent with this order.
3.  The Obligor shall pay \$ 272.00 per month in ongoing support beginning January 1, 2014. The obligation for Child Support continues until the child turns 18 years of age, or until the child turns 19 years of age if the child is enrolled in High School. However, this obligation to support a child is affected by a child's ability to live on their own (NRS129.080 to 129.140 – legal emancipation) or when applicable, continued financial support beyond the age of majority per NRS125B.110.

- 1 4.  An arrears Judgment is entered in the amount of \$ 8,022.00 for/through  
 2 June 1, 2012 through December 31, 2013.  
 3  To be paid by payments of \$ 35.00 per month beginning January 1, 2014.

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 89193-89501**

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 350-43-1100D 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 6.  The Obligee shall provide health insurance coverage for the child when available  
 28 through employment or group policy under a plan that is reasonable in cost as defined  
 in NRS 125B.085 and Obligor shall pay \$ 25.00 per month for health insurance

1 premium (medical cash) effective January 1, 2014. Medical costs incurred for  
2 the above-referenced period have not yet been determined. The State's rights to  
3 recover said costs are not waived by way of this order.

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

7 8.  The Obligor shall pay and judgment is entered in favor of the Division of Welfare  
8 Supportive Services for the reimbursement of genetic test fees totaling \$ 114.00, to  
9 be paid by payments of \$ 10.00 per month beginning January 1, 2014.

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

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

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

24 12. Pursuant to NRS125B.095, a late fee/penalty of 10% (ten percent) of the unpaid  
25 monthly child support amount will be added to the arrears balance of the Obligor if the  
26 Obligor becomes delinquent in the amount owed for one month's support.  
27  
28

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: Paternity established for Child Mason pursuant to positive genetic testing. Deviation for the support of other children not given by court due to Obligor's failure to appear, and resulting lack of evidence in support of such a deviation.  
CW

**SUPPORT OBLIGATION BREAKDOWN AS FOLLOWS:**

Child Support.....	\$ <u>272.00</u>	Effective <u>January 1, 2014</u>
Child Support Arrearages.....	\$ <u>35.00</u>	Effective <u>January 1, 2014</u>
Medical Cash.....	\$ <u>25.00</u>	Effective <u>January 1, 2014</u>
Genetic Test Fee.....	\$ <u>10.00</u>	Effective <u>January 1, 2014</u>
<b>TOTAL PAYMENT.....</b>	<b>\$ <u>342.00</u></b>	

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 17 day of December, 2013.

  
COURT MASTER



**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.

\_\_\_\_\_  
DUSTIN BLEU NORTH, 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.

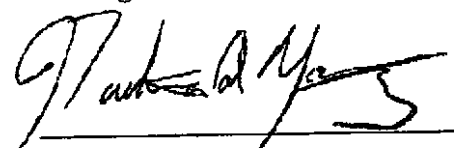
**ORDER**

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: January 9, 2013.

  
\_\_\_\_\_  
DISTRICT JUDGE

1 Case No. *13-UR-0068*

2 Dept No. *I*

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 AMBER LYNN DIMMITT  
9 Obligee,

10 Vs.

11 DUSTIN BLEU NORTH  
12 Obligor  
\_\_\_\_\_ /

13 **CERTIFICATE OF MAILING**

14  
15 Pursuant to NRCPC 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 DUSTIN BLEU NORTH  
18 CONFIDENTIAL  
19 IN FILE

20 AMBER LYNN DIMMITT  
21 CONFIDENTIAL  
22 IN FILE

23 DATED: *December 20*, 2013

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

27 DOCUMENTS: JUDGMENT AND ORDER  
28 CASE NO. *13-UR-0068*



COPY

**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: 1/9/14  
TED THUAN Clerk of the 9th Judicial District Court  
of the State of Nevada, in and for the County of Douglas.

By: [Signature] Deputy

**RECEIVED**  
JAN 10 2014  
STATE OF NEVADA  
CHILD SUPPORT PROGRAM