

Doc Number: **0841118**

04/18/2014 09:32 AM

OFFICIAL RECORDS

Requested By
NEVADA DEPT OF WELFARE

DOUGLAS COUNTY RECORDERS
Karen Ellison - Recorder

Page: 1 Of 12 Fee: \$ 0.00

Bk: 0414 Pg: 3173



Deputy: sd

1
2 APN # _____
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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: ASHLEY ERIKA TRUMPOWER

21 UPI #: 046-85-6100A
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. 14-UR-0011

2 DEPT. NO. 1

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

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

6 DEPARTMENT OF WELFARE AND SUPPORTIVE SERVICES
7 AND KENNETH GEORGE
8 TRUMPOWER, CUSTODIAN

Obligees,

AFFIDAVIT OF RECORDATION

9 Vs.

10 ASHLEY ERIKA TRUMPOWER
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
- 16 046-85-6100A.
- 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 upon all the real property of the Obligor.
- 19 3. That the Obligor's name is Ashley Erika Trumpower, 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 April 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 11th day of April, 2014

Dorinda Richey
NOTARY PUBLIC



INSTRUCTIONS TO RECORDER

Obligor: ASHLEY ERIKA TRUMPOWER

Obligee: KENNETH GEORGE TRUMPOWER

Date: APRIL 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.

FILE COPY

RECEIVED

APR - 8 2014

DOUGLAS COUNTY DISTRICT COURT CLERK

Case No. 14-UR-0011

Dept No. I

2014 APR -9 PM 4:39

TED THUAN CLERK

D. GOELZ DEPUTY

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 KENNETH GEORGE TRUMPOWER, CUSTODIAN Obligee,

Vs.

ASHLEY ERIKA TRUMPOWER 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 MARCH 14, 2014, before the Court Master with the following persons present:

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

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

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 JANUARY 4, 2014, with a Notice and Finding of Financial and Responsibility.

BK 0414 PG 3176 4/18/2014

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Obligor is the mother of MICHAEL ANTHONY EATON, born APRIL 5, 2008 and
DANIELLE LESLIE TRUMPOWER, born DECEMBER 31, 2010.

- () 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 \$ _____. Pursuant to the formula prescribed within NRS 125B.070, 25% of those earnings, the state calculates a support obligation in the sum of \$ _____.
- Gross monthly income based on _____.
- () 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 shall pay \$ _____ per month in ongoing support beginning _____ . 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.
2. (X) An arrears Judgment is entered in the amount of \$ 6,082.⁰⁰ for/through June 01, 2012 - March 31, 2014.
- (X) To be paid by payments of \$ 75.⁰⁰ per month beginning April 01, 2014

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

4 **STATE COLLECTION AND DISBURSEMENT UNIT (SCaDU)**
5 **P.O. BOX 98950**
6 **LAS VEGAS, NV 89193-89501**

7 The following information must be included with each payment:

- 8 A. Name (first, middle, last) of person responsible for paying child support.
- 9 B. Social Security Number of person responsible for paying child support.
- 10 C. Child support case number 046-85-6100A listed on each payment.
- 11 D. Name of custodian (first and last name of person receiving child support).

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

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

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

24 4. () The Obligor shall provide health insurance coverage for the children when
25 available at a reasonable cost through employment or other group policy. The Obligor
26 shall also provide assistance in obtaining payment for insured services.

27 5. () The Obligee shall provide health insurance coverage for the children 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 \$ _____ per month for health insurance

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

4 6. 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 biological parents.

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

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

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

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

24 11. The State of Nevada has continuing exclusive jurisdiction for enforcement and
25 modification purposes pursuant to the Full Faith and Credit for Child Support Orders
26 Act.
27
28

1 It is further ordered that: Case is arrears only as the
2 children are now residing with obligor.
3 Obligor waives all arrears owed to him
4 from June 01, 2012, through March 31, 2014 in
5 the amount of \$ 200.00

6
7
8
9 **SUPPORT OBLIGATION BREAKDOWN AS FOLLOWS:**

10	Child Support.....	\$	<u>—</u>	Effective	<u>—</u>
11	Child Support Arrearages.....	\$	<u>75.00</u>	Effective	<u>4/01/2014</u>
12	Medical Cash.....	\$	<u>—</u>	Effective	<u>—</u>
13	TOTAL PAYMENT.....	\$	<u>75.00</u>		

14 Pursuant to NRS 125B.145 this Order may be reviewed every three (3) years and is subject
15 to future modifications.

16 Unless a stay of this Order is obtained from District Court, all enforcement procedures
17 including, but not limited to wage withholding, garnishment, liens and the attachment of
18 federal income tax returns will be undertaken upon entry of this Order.

19 **IT IS SO RECOMMENDED.**

20
21 This 17 day of March, 2014.

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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.

ASHLEY ERIKA TRUMPOWER, 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

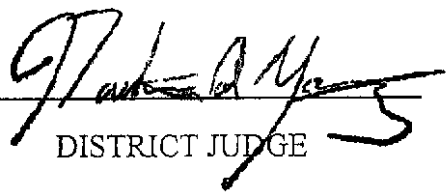
The Court, having reviewed the above and foregoing Master's Report prepared by the Court Master and,

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: April 9, 2014.


DISTRICT JUDGE

1 Case No. 14-UR-0011

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 KENNETH GEORGE
9 TRUMPOWER, CUSTODIAN
10 Obligee,

11 Vs.

12 ASHLEY ERIKA TRUMPOWER
13 Obligor

14 CERTIFICATE OF MAILING

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 ASHLEY ERIKA TRUMPOWER
18 CONFIDENTIAL
19 IN FILE

20 KENNETH GEROGGE TRUMPOWER
21 CONFIDENTIAL
22 IN FILE

23 DATED: March 19, 2014

24
25 SIGNED: Linda Holcomb
26 LINDA HOLOCMB
27 ADMINISTRATIVE ASSISTANT II

28 DOCUMENTS: JUDGMENT AND ORDER
CASE NO. 14-UR-0011

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 April 9 2014

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

By [Signature] Deputy

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APR 10 2014

STATE OF NEVADA
CHILD SUPPORT PROGRAM