



KAREN ELLISON, RECORDER

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

APN # _____

Recording Requested by and returned to:

(for Recorder's use only)

**Name: Division of Welfare and Supportive Services
Child Support Enforcement**

Address: 300 E. Second St., Ste. 1200

City/State/Zip: Reno, NV 89501-1580

Release of Lien (RELN)

Judgment and Order

Stipulation and Order

Other:

NCP'S NAME: RENDALL SCOTT STILES

UPI #: 567-79-9000D

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

(Additional recording fee applies.)

This cover page must be typed or printed.

1 CASE NO. 14-UR-0084

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 DIVISION OF WELFARE AND SUPPORTIVE SERVICES
7 AND DANA MARIE STILES

Obligees,

AFFIDAVIT OF RECORDATION

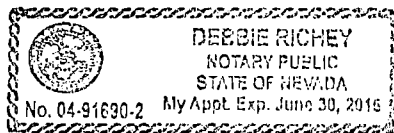
8 Vs.
9 RENDALL SCOTT STILES
10 Obligor

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

- 12 1. That affiant is, and at all times mentioned herein was, a citizen of the State of Nevada, over the
- 13 age of twenty-one years of age, and an employee of the Division of Welfare and Supportive
- 14 Services Child Support Enforcement Office managing the legal process under Case Number
- 15 567-79-9000D.
- 16 2. That this affidavit and Judgment and Order is being filed pursuant to NRS125B.142 and
- 17 NRS17.150, and when so recorded shall become a lien upon all the real property of the Obligor.
- 18 3. That the Obligor's name is RENDALL SCOTT STILES, whose address, Social Security
- 19 number and date of birth is confidential on file with the Division of Welfare and Supportive
- 20 Services Child Support Enforcement Office.
- 21 4. That attached hereto is a certified copy of the Judgment and Order filed on May 13, 2015.

22
23 *Linda Holcomb*
24 Linda Holcomb
Administrative Assistant II

25 State of Nevada, County of Washoe
26 Subscribed and sworn before me this
27 27th day of May, 2015
28 *Debbie Richey*
NOTARY PUBLIC



COPY
RECEIVED

FILED

MAY 13 2015

1 Case No. 14-UR-0084

2 Dept No. II

Douglas County
District Court Clerk

2015 MAY 13 PM 3: 52

BOBBIE R. WILLIAMS
CLERK

D. HECIMOVICH

6 IN THE NINTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA

7 IN AND FOR THE COUNTY OF DOUGLAS

9 DIVISION OF WELFARE AND SUPPORTIVE SERVICES
10 AND DANA MARIE STILES
11 Obligee,

11 Vs.

12 RENDALL SCOTT STILES
13 Obligor

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

17 JUDGMENT AND ORDER

18 This matter was heard on APRIL 17, 2015, before the Court Master with the following
19 persons present:

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

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

22 Presented by: IOLA CARPENTER Department of Health and Human Services
23 Child Support Enforcement

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

26 The Obligor was properly served on SEPTEMBER 15, 2014, with a Notice and Finding of
27 Financial and Responsibility.
28

1 Obligor is the father/parent of JUSTIN RUSSELL STILES, born SEPTEMBER 6, 2006,
2 SAVANNAH LYNN STILES, born DECEMBER 29, 2008, and IVY A. STILES, born
3 JULY 3, 2000 (Out of the Household).

- 4 () Obligor was properly served and noticed of today's hearing at his/her last known
5 address and failed to appear.
- 6 () Obligee was properly noticed of today's hearing on or about _____.
- 7 () Obligor's gross monthly earnings are \$ _____. Pursuant to the formula
8 prescribed within NRS 125B.070, 25% of those earnings, the state calculates a support
9 obligation in the sum of \$ _____.
- 10 Gross monthly income based on _____.
- 11 () The Child support amount recommended by the Court Master (set out in paragraph 4
12 below) deviates from the statutory percentage because under NRS 125B.080, the
13 following factors were considered: _____
14 _____
15 _____
16 _____

17 THE RECOMMENDED ORDER:

- 18 1. () The Obligor shall pay \$ _____ per month in ongoing support beginning
19 _____ . The obligation for Child Support continues until the
20 child turns 18 years of age, or until the child turns 19 years of age if the child is
21 enrolled in High School. However, this obligation to support a child is affected by a
22 child's ability to live on their own (NRS129.080 to 129.140 – legal emancipation) or
23 when applicable, continued financial support beyond the age of majority per
24 NRS125B.110.
- 25 2. (X) An arrears Judgment is entered in the amount of \$ 756.⁰⁰ for/through
26 October 1, 2013 through March 31 2015.
- 27 (X) To be paid by payments of \$ 50.⁰⁰ per month beginning April 1, 2015.
- 28

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 567-79-9000D 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 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: Obligee has requested closure
 2 of her portion of the case. Obligee has
 3 also requested that all arrears owed
 4 to her from October 2013 through
 5 March 2015 be waived. The Obligee
 6 disputes the amount of Tanf Cash she
 7 received from October 2013 through December
 8 2013. The Obligee has until May 15, 2015 to provide
 9 DWSS with proof.

SUPPORT OBLIGATION BREAKDOWN AS FOLLOWS:

10	Child Support.....	\$ _____	Effective _____
11	Child Support Arrearages.....	\$ <u>50.00</u>	Effective <u>April 1, 2015</u>
12	Medical Cash.....	\$ _____	Effective _____
13	TOTAL PAYMENT.....	\$ <u>50.00</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 April, 2015.

22 
 23 _____
 24 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 RENDALL SCOTT STILES, Obligor

7 **NOTICE OF RIGHT TO APPEAL**

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

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

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

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

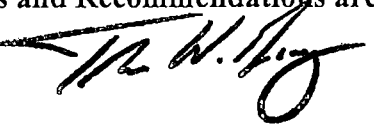
19 **ORDER**

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

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

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

26 Dated: May 13, 2015.



27 _____
28 DISTRICT JUDGE

1 Case No. 14-UR-0084

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 DANA MARIE STILES

9 Obligee,

10 Vs.

11 RENDALL SCOTT STILES
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 RENDALL SCOTT STILES
18 CONFIDENTIAL
19 IN FILE

20 DANA MARIE STILES
21 CONFIDENTIAL
22 IN FILE

23 DATED: April 21, 2015

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

27 DOCUMENTS: JUDGMENT AND ORDER
28 CASE NO. 14-UR-0084

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 May 13, 2016

BOBBIE R. WILLIAMS, Clerk of Court
of the State of Nevada, in and for the County of Douglas,

By [Signature] Deputy

RECEIVED

MAY 15 2015

STATE OF NEVADA
CHILD SUPPORT PROGRAM