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KAREN ELLISON, RECORDER

1
2 APN # _____
3
4

5
6 **Recording Requested by and returned to:**
7

(for Recorder's use only)

8 **Name:** **Division of Welfare and Supportive Services**

9 **Child Support Enforcement**

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

11 **City/State/Zip:** **Reno, NV 89501-1580**
12

13 **Release of Lien (RELN)**

14 **Judgment and Order**

15 **Stipulation and Order**

16 **Other:**
17
18

19 **OBLIGOR'S NAME: FRANK VANCE ADKINS JR**
20

21 **UPI #: 324-84-6100A**
22

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

25 (Additional recording fee applies.)
26

27 This cover page must be typed or printed.
28

1 CASE NO. 16-UR-0038

2 DEPT. NO. I

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 ALISHA FAY GORDON
8 Obligees,

AFFIDAVIT OF RECORDATION

9 Vs.

10 FRANK VANCE ADKINS JR
11 Obligor

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

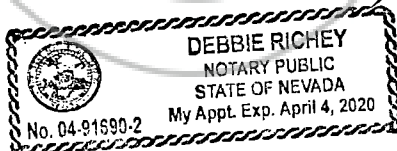
- 13 1. That affiant is, and at all times mentioned herein was, a citizen of the State of Nevada, over the
- 14 age of twenty-one years of age, and an employee of the Division of Welfare and Supportive
- 15 Services Child Support Enforcement Office managing the legal process under Case Number
- 16 324-84-6100A.
- 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 a lien upon all the real property of the Obligor.
- 19 3. That the Obligor's name is FRANK VANCE ADKINS JR. whose address, Social Security
- 20 number and date of birth is confidential on file with the Division of Welfare and Supportive
- 21 Services Child Support Enforcement Office.
- 22 4. That attached hereto is a certified copy of the Judgment and Order filed on September 13, 2016.

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 15th day of September 2016

Debbie Richey
NOTARY PUBLIC



INSTRUCTIONS TO RECORDER

Obligor: FRANK VANCE ADKINS JR

Obligee: ALISHA FAY GORDON

Date: September 15, 2016

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
RECEIVED

FILED

1 Case No. 16-UR-0038

SEP 12 2016

2 Dept No. I

Douglas County
District Court Clerk

2016 SEP 13 PM 2:11

BODDIE R. WILLIAMS
CLERK

BY ~~D. HECHMOVICH~~

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
AND ALISHA FAY GORDON

10 Obligee,

11 Vs.

12 FRANK VANCE ADKINS JR

13 Obligor

14
15 **JUDGMENT AND ORDER**

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

18 This matter was heard on AUGUST 19, 2016. The Court Master with the following persons
19 was present:

20 Obligee: Present

21 Obligor: Not Present, via telephone

22
23 Presented by: REBECCA BOYLE

Division of Welfare and Support Services
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 APRIL 21, 2016, with a Notice and Finding of Financial
27 and Parental Responsibility.
28

1 Obligee has named Obligor, FRANK VANCE ADKINS JR, as the father of ANTHONY
2 ADKINS, born FEBRUARY 19, 1997 (Emancipated), JAKOB ADKINS, born JULY 8, 1999
3 (Resides with Obligor), WADE ADKINS, born JULY 13, 2010, and CAMERON ADKINS,
4 born MAY 8, 2012.

- 5 Obligor was properly served and noticed of today's hearing at his/her last known
6 address and failed to appear.
- 7 Obligor's gross monthly earnings are \$0.00. Pursuant to the formula prescribed within
8 NRS 125B.070, 25% of those earnings, the state calculates a support obligation in the
9 sum of \$0.00. Gross monthly income based on no documented income.
- 10 The child support amount recommended by the Court Master (set out in paragraph 2
11 below) deviates from the statutory percentage because under NRS 125B.080, the
12 following factors were considered: state statutory minimum applies.

13 RECOMMENDED ORDER IS:

- 14 1. The Obligor is the parent of the following children:
- | <u>NAME</u> | <u>D.O.B.</u> |
|-----------------------|--|
| <u>JAKOB ADKINS</u> | <u>JULY 8, 1999</u> (Resides with Obligor) |
| <u>CAMERON ADKINS</u> | <u>MAY 8, 2012</u> |
- 18 The Obligor has acknowledged he is the parent of the following children:
- | | |
|-----------------------|--|
| <u>ANTHONY ADKINS</u> | <u>FEBRUARY 19, 1997</u> (Emancipated) |
| <u>WADE ADKINS</u> | <u>JULY 13, 2010</u> |
- 21 2. That said children Anthony Adkins and Wade Adkins birth certificates be amended
22 by entering the name of FRANK VANCE ADKINS JR as the father of said children
23 and that the Court order the state registrar of vital statistics to prepare an amended
24 certificates of birth consistent with this order.
- 25 3. The Obligor shall pay \$200.00 per month in ongoing support beginning
26 SEPTEMBER 1, 2016. The obligation for Child Support continues until the child turns
27 18 years of age, or until the child turns 19 years of age if the child is enrolled in High
28 School. However, this obligation to support a child is affected by a child's ability to

1 live on their own (NRS129.080 to 129.140 – legal emancipation) or when applicable,
2 continued financial support beyond the age of majority per NRS 125B.110.

3 4. An arrears Judgment is entered in the amount of **\$13,484.00** for JULY 1, 2013
4 through AUGUST 31, 2016.

5 To be paid by payments of **\$75.00** per month beginning SEPTEMBER 1, 2016.

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

9 **STATE COLLECTION AND DISBURSEMENT UNIT (SCaDU)**
10 **P.O. BOX 98950**
11 **LAS VEGAS, NV 89193-89501**

12 The following information must be included with each payment:

13 A. Name (first, middle, last) of person responsible for paying child support.

14 B. Social Security Number of person responsible for paying child support.

15 C. Child support case number 324-84-6100A listed on each payment.

16 D. Name of custodian (first and last name of person receiving child support).

17 **PAYMENT OF SUPPORT IS TO BE AS PROVIDED HEREIN, AND THE GIVING OF**
18 **GIFTS, OF MAKING PURCHASES OF FOOD, CLOTHING AND THE LIKE WILL**
19 **NOT FULFILL THE OBLIGATION. NOTICE: NO CREDIT WILL BE GIVEN FOR**
20 **PAYMENTS PAID DIRECTLY TO THE OBLIGEE.**

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

28 6. The Obligee shall provide health insurance coverage for the children 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 **\$28.00** per month for health insurance

1 premium (medical cash) effective SEPTEMBER 1, 2016. Medical costs incurred for
2 the 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 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 keep the Division of Welfare and Supportive Services informed of
8 any change regarding current residential and/or mailing address, employment and of
9 access to health insurance coverage in **WRITING** (including health insurance policy
10 information) within 10 days of such change.

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

16 10. 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 11. Pursuant to NRS 125B.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 12. 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 It is further ordered that: See page 2, lines 10-12. Paternity established for both Anthony
28 Adkins and Wade Adkins pursuant to default as Obligor failed to appear or respond to the
Notice and Finding of Financial and Parental Responsibility.

1 **NOTICE OF RIGHT TO WAIVE OBJECTION**

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

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

7 FRANK VANCE ADKINS JR, Obligor

8 ALISHA FAY GORDON, Obligee

9 **NOTICE OF RIGHT TO OBJECTION**

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

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

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

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

21 **ORDER**

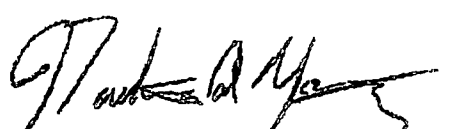
22 The Court, having reviewed the above and foregoing Master's Report prepared by the Court
23 Master and,

24 The Obligor having waived the right to object thereto.

25 No timely objection having been filed hereto.

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

28 Dated: September 13, 2016.


DISTRICT JUDGE

1 Case No. 16-UR-0038

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 ALISHA FAY GORDON
9 Obligee,

10 Vs.

11 FRANK VANCE ADKINS JR
12 Obligor
_____ /

13 **CERTIFICATE OF MAILING**

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

16
17 FRANK VANCE ADKINS JR
18 CONFIDENTIAL
19 IN FILE

20 ALISHA FAY GORDON
21 CONFIDENTIAL
22 IN FILE

23 DATED: August 23, 2016

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

27 DOCUMENTS: JUDGMENT AND ORDER
28 CASE NO. 16-UR-0038

COPY

RECEIVED

SEP 14 2016

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 September 13, 2016

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

By [Signature] Deputy