DOUGLAS COUNTY, NV 2018-915599 This is a no fee document 06/15/2018 03:47 PM NO FEE **NEVADA/STATE OF WELFARE** 1 2 APN# KAREN ELLISON, RECORDER 3 4 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 Address: 300 E. Second St., Ste. 1200 11 City/State/Zip: Reno, NV 89501-1580 12 Release of Lien (RELN) 13 \boxtimes **Judgment and Order** 14 15 Stipulation and Order 16 17 Other: 18 19 **OBLIGOR'S NAME: MICHAEL SCHOFIELD** 20. UPI#: 815-05-4000B 21 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

IN THE NINTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA IN AND FOR THE COUNTY OF DOUGLAS

JENNIFER ROBYN SCHOFIELD, Obligees,

AFFIDAVIT OF RECORDATION

Vs.

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MICHAEL LEO SCHOFIELD, Obligor

I, Desirae Hardy, 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 815-05-4000B.
- 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.
- That the Obligor's name is Michael Schofield, whose address, Social Security number and date 3. of birth is confidential on file with the Division of Welfare and Supportive Services Child Support Enforcement Office.
- 4. That attached hereto is a certified copy of the Judgment and Order filed on June 8, 2018.

Desirae Hardy

Administrative Assistant II

WASHOE State of Nevada, County of

Subscribed and sworn before me this

June day of

2018

NOTARY PUBLIC



INSTRUCTIONS TO RECORDER

Obligor:

MICHAEL LEO SCHOFIELD

Obligee:

JENNIFER ROBYN SCHOFIELD

Date:

June 13, 2018

From:

Desirae Hardy, Administrative Assistant II, Division of Welfare and Supportive

Services Child Support Enforcement Office

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.

Enclosed:

Please note: If the judgment is a Stipulation and Order, they should be recorded as one document.

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Thank you for your assistance. If you have any questions or concerns, please call me at

(775) 448-5178.

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Case No. 18-UR-0010

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

JENNIFER ROBYN SCHOFIELD, Obligee,

Vs.

MICHAEL LEO SCHOFIELD, Obligor,

JUDGMENT AND ORDER

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

This matter was heard on May 11. 2018. The Court Master with the following persons was present:

Obligee: Present

and Responsibility.

Obligor: Represented by: Adam Wynott. Esq.

Presented by: <u>Bobbie Babb</u>

Division of Welfare and Support 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 April 9, 2018, with a Notice and Finding of Financial

Obligor is the father of <u>Victoria Ann Schofield</u>, born <u>March 30, 2003</u> and <u>Caroline Jane</u> Schofield born June 25, 2006.

Obligor's gross monthly earnings are \$1,430.00. Pursuant to the formula prescribed within NRS 125B.070, 25% of those earnings, the state calculates a support obligation in the sum of \$358.00. Gross monthly income based on wages imputed based on ability to earn Nevada minimum wage.

THE RECOMMENDED ORDER:

- 2. An arrears Judgment is entered in the amount of \$2.864.00 for October 1. 2017 through May 31, 2018.
 - To be paid by payments of \$35.00 per month beginning June 1, 2018.

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

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

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 <u>815-05-4000B</u> 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.

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- All payments shall be made by immediate income withholding. If your full obligation 3. 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.
- 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 \$20.00 per month for health insurance premium (medical cash) effective June 1, 2018. Medical costs incurred for the abovereferenced period have not yet been determined. The State's rights to recover said costs are not waived by way of this order.
- 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.
- The Obligor shall keep the Division of Welfare and Supportive Services informed of any change regarding current residential and/or mailing address, employment and of access to health insurance coverage in WRITING (including health insurance policy information) within 10 days of such change.
- 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).
- 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).
- 9. Pursuant to NRS 125B.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.
- 10. 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: Review hearing set for July 13, 2018 at 9:30am to address adjustment of debt for Docket number 15-UR-0049

SUPPORT OBLIGATION BREAKDOWN AS FOLLOWS:

Child Support\$3	58.00	Effective June 1, 2018
Child Support Arrearages \$35	5.00	Effective June 1, 2018
Medical Cash\$20	0.00	Effective June 1, 2018

TOTAL PAYMENT.....\$413.00

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.

COURT MASTER

1	NOTICE OF RIGHT TO WAIVE OBJECTION
2	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.
4	The Obligee waives the ten (10) days for objection to the Master's Report, and this report may be submitted to the District Court immediately.
5	Receipt of the Master's Recommendation is acknowledged by my signature below.
6	
7	MICHAEL LEO SCHOFIELD, Obligor
9	JENNIFER ROBYN SCHOFIELD, Obligee 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 result in final Judgment being ordered by District Court.
12	Objections to this Order must be filed with the Ninth Judicial District Court of the State of
13	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.
14	
15	You must submit your objection to the Court Clerk for filing by submitting your original objection and two copies. Legal advice regarding your objection will not be provided.
16	For information on obtaining a objection packet or the objection process please call the
17	Division of Welfare and Supportive Services at (775) 684-7200 located at 300 East Second Street Suite 1200, Reno, NV 89501.
18	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.
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27	Dated: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
28	Dated:

1	Case No. 18-UR-0010
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	JENNIFER ROBYN SCHOFIELD,
8	Obligee,
9	Vs.
10	MICHAEL LEO SCHOFIELD,
11	Obligor /
12	CEDTIEICATE OF MAILING
13	CERTIFICATE OF MAILING Description of the control of the control of the mailing magnetic and the control of th
14	Pursuant to NRCP 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	KENDIETH MADD EGO
17	KENNETH WARD, ESQ. C/O MICHAEL SCHOFIELD
18	15 W. MAIN ST. DAYTON, NV 89403
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20	JENNIFER ROBYN SCHOFIELD CONFIDENTIAL
21	IN FILE
22	DATED: May 21 ,2018
23	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
24	SIGNED:
25	Desirae Hardy Y
26	ADMINISTRATIVE ASSISTANT II
27	DOCUMENTS: JUDGMENT AND ORDER CASE NO. 18-UR-0010

ARREARAGE WORKSHEET

NON-CUSTODIAL P	ARENT:	IV-D CASE NUMBE	R:	PAO OFFICE:	COMPLETION DATE:
MICHAEL LEO SCHOFIELD		815054000B		RENO	03/29/2018
CUSTODIAL PARENT:		IV-D CASE WORKE	R:	COUNTY:	DOCKET NUMBER:
JENNIFER ROBYN SCHOFIELD		V. MCKENNA		DOUGLAS	
DATE	ASST PAID	RQSTD OBL	PAYMENTS	COURT ORDERED OBLIGATION	NOTES/COMMENTS
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Jun-14		0.00			\ \
Jul-14		0.00			\-\-\-\-
Aug-14		0.00			
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Oct-14		0.00			
Nov-14		0.00			
Dec-14		0.00			
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Mar-17		0.00			
Apr-17		0.00			
May-17		0.00			
Jun-17		0.00			
Jul-17		0.00			
Aug-17		0.00			
Sep-17		0.00			
Oct-17		358 200.00			NO EMP REC; NV ST MIN=200.00
Nov-17		355 200.00			CHD BACK IN HH 10/07/2018
Dec-17		356 200.00			
TOTALS:	,	600.00	0.00	0.00	
LESS PMTS:		600.00			

ARREARAGE WORKSHEET

NON-CUSTODIAL F	PARENT:	IV-D CASE NUMBE	R:	PAO OFFICE:	COMPLETION DATE:
MICHAEL LEO SO		815054000B		RENO	03/29/2018
CUSTODIAL PARENT: JENNIFER ROBYN SCHOFIELD		IV-D CASE WORKER: V. MCKENNA		COUNTY: DOUGLAS	DOCKET NUMBER:
DATE	ASST PAID	RQSTD OBL	PAYMENTS	COURT ORDERED OBLIGATION	NOTES/COMMENTS
PREV BAL:		600.00	0.00		\ \
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Feb-18		200.00			\ \
Mar-18		200.00			1 1
Apr-18		, 200.00			
May-18		200.00			
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