



00090490201909286820130132

KAREN ELLISON, RECORDER

(for Recorder's use only)

1
2 APN # _____
3
4

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

13 **Release of Lien (RELN)**

14 **Judgment and Order**

15 **Stipulation and Order**

16 **Other:**
17
18

19 **OBLIGOR'S NAME: CHRISTOPHER BARKER**

20 **UPI #: 586-19-1200A**
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

1 CASE NO. 18-UR-0024

2 DEPT. NO. II

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

4 IN AND FOR THE COUNTY OF DOUGLAS

5 MEGAN BARKER

6 Obligees,

7 AFFIDAVIT OF RECORDATION

8 Vs.

9 CHRISTOPHER BARKER

Obligor

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

- 11 1. That affiant is, and at all times mentioned herein was, a citizen of the State of Nevada, over the
- 12 age of twenty-one years of age, and an employee of the Division of Welfare and Supportive
- 13 Services Child Support Enforcement Office managing the legal process under Case Number
- 14 586-19-1200A.
- 15 2. That this affidavit and Judgment and Order is being filed pursuant to NRS125B.142 and
- 16 NRS17.150, and when so recorded shall become a lien upon all the real property of the Obligor.
- 17 3. That the Obligor's name is Christopher Barker whose address, Social Security number and date
- 18 of birth is confidential on file with the Division of Welfare and Supportive Services Child
- 19 Support Enforcement Office.
- 20 4. That attached hereto is a certified copy of the Judgment and Order filed on April 25, 2019.
- 21
- 22

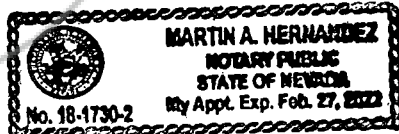
23 *Linda Holcomb*

Linda Holcomb
Administrative Assistant II

24 State of Nevada, County of WASHOE

25 Subscribed and sworn before me this
2nd day of May, 2019

26 *Mt. A. Hernandez*
27 NOTARY PUBLIC



28

INSTRUCTIONS TO RECORDER

Obligor: Christopher Barker

Obligee: Megan Barker

Date: May 2, 2019

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.

RECEIVED

APR 23 2019

Douglas County
District Court Clerk

FILED

Case No. 18-UR-0024

Dept No. II

2019 APR 25 PM 3:51

BOBIE R. WILLIAMS
CLERK

BY D. GOEZ DEPUTY

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

MEGAN BARKER
Obligee,

Vs.

CHRISTOPHER BARKER
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 March 1, 2019. The Court Master with the following persons was present:

Obligee: Present
Obligor: Present, via telephone

Presented by: Alyssa Matovina Division of Welfare and Support Services
Child Support Enforcement

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

The Obligor is the parent of the following children:

<u>NAME</u>	<u>DOB</u>
<u>CONNER LEON BARKER</u>	<u>SEPTEMBER 21, 2003</u>
<u>LOGAN WALTER BARKER</u>	<u>FEBRUARY 24, 2007</u>

1 Obligor's gross monthly earnings are \$3,692.00. Pursuant to the formula prescribed
2 within NRS 125B.070, 25% of those earnings, the state calculates a support obligation
3 in the sum of \$923.00. Gross monthly income based on actual earnings.

4 The child support amount recommended by the Court Master (set out in paragraph 1
5 below) deviates from the statutory percentage under NRS 125B.080, based on the
6 following factors: Obligor given credit for on-half the cost for the health insurance.

7 RECOMMENDED ORDER IS:

8 1. Ongoing support is ordered in the amount of \$898.00 per month beginning
9 February 1, 2019. The obligation for Child Support continues until the child turns 18
10 years of age, or until the child turns 19 years of age if the child is enrolled in High
11 School. However, this obligation to support a child is affected by a child's ability to
12 live on their own (NRS129.080 to 129.140 – legal emancipation) or when applicable,
13 continued financial support beyond the age of majority per NRS125B.110.

14 2. The Obligor is responsible for **child support** arrears for the period of
15 December 1, 2018 through January 31, 2019.

16 A judgment is entered against the Obligor for **child support** arrears as follows:

17 Principal in the amount of \$544.00

18 Interest in the amount of \$0.00

19 Penalty in the amount of \$0.00

20 For a total judgment of \$544.00 to be repaid at \$30.00 per month beginning February 1, 2019.

21 3. The Obligor is responsible for **medical cash** arrears for the period of
22 December 1, 2018 through January 31, 2019.

23 A judgment is entered against the Obligor for **cash** arrears as follows:

24 Principal in the amount of \$130.88

25 Interest in the amount of \$0.00

26 Penalty in the amount of \$0.00

27 For a total judgment of \$130.88 to be repaid at \$20.00 per month beginning February 1, 2019.

1 All payments MUST be made in the form of a money order, cashier's check or business check
2 and payable to **STATE COLLECTION AND DISBURSEMENT UNIT (SCaDU)** and sent
3 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 586-19-1200A 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 OF**
13 **GIFTS, OF MAKING PURCHASES OF FOOD, CLOTHING AND THE LIKE WILL**
14 **NOT FULFILL THE OBLIGATION. NOTICE: NO CREDIT WILL BE GIVEN FOR**
15 **PAYMENTS PAID DIRECTLY TO THE OBLIGEE.**

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

23 5. The Obligor shall provide health insurance coverage for the children when available
24 through employment or other group policy under a plan that is reasonable in cost as
25 defined in NRS 125B.085. The Obligor shall also provide assistance in obtaining
26 payment for insured services.

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

1 7. The Obligor shall keep the Division of Welfare and Supportive Services informed of
2 any change regarding current residential and/or mailing address, employment and of
3 access to health insurance coverage in WRITING (including health insurance policy
4 information) within 10 days of such change.

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

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

15 10 Pursuant to NRS 125B.095, a late fee/penalty of 10% (ten percent) of the unpaid
16 monthly child support amount will be added to the arrears balance of the Obligor if the
17 Obligor becomes delinquent in the amount owed for one month's support.

18 11. The State of Nevada has continuing exclusive jurisdiction for enforcement and
19 modification purposes pursuant to the Full Faith and Credit for Child Support Orders
20 Act.

21 11. The Master finds that these Recommendations are in the best interest of the children.

22 It is further ordered that: See page 2, lines 5-8. Court found that ^{there} ~~was~~ is no change in
23 circumstances for the ongoing child support based on Exhibit B. CW

24 ///
25 ///
26 ///
27

SUPPORT OBLIGATION BREAKDOWN AS FOLLOWS:

Child Support.....**\$898.00** Effective February 1, 2019
Child Support Arrearages.....**\$30.00** Effective February 1, 2019
Medical Cash Arrearages.....**\$20.00** Effective February 1, 2019
TOTAL PAYMENT..... \$948.00

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.

This 29 day of March, 2019.



COURT MASTER

1 Case No. 18-UR-0024

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 MEGAN BARKER
8 Obligee,

9 Vs.

10 CHRISTOPHER BARKER
11 Obligor,

12 **CERTIFICATE OF MAILING**

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

15 CHRISTOPHER BARKER
16 CONFIDENTIAL
17 IN FILE

18 MEGAN BARKER
19 CONFIDENTIAL
20 IN FILE

21 DATED: April 4, 2019

22
23 SIGNED: Linda Holcomb
24 LINDA HOLCOMB
25 ADMINISTRATIVE ASSISTANT II

26
27 DOCUMENTS: JUDGMENT AND ORDER
28 CASE NO. 18-UR-0024

Custodian Financial Audit (part 1 of 2)

Run Date: 02/14/2019
Run Time: 08:07 AM

4

NCP Name: Barker , Christopher
CST Name: Barker, Megan

Case ID: 586191200A
Docket#: 18-UR-0024

Office: 16

Prepared By: AMMATOVI
Last Updated By: AMMATOVI

Prepared By Date: 02/14/2019
Last Updated By Date: 02/14/2019

Provision Type: Child Support

Event Date	Event Type	Current Amount Due	NCP Paid	Unadjudicated Arrears		Adjudicated Arrears	
				Adjustment Amount	Running Balance	Adjustment Amount	Running Balance
12/01/2018	J	0.00	0.00	0.00	0.00	0.00	0.00
12/01/2018	O	898.00	0.00	898.00	898.00	0.00	0.00
12/01/2018	P	0.00	1072.00	-1072.00	-174.00	0.00	0.00
01/01/2019	O	898.00	0.00	898.00	724.00	0.00	0.00
01/01/2019	P	0.00	1104.00	-1104.00	-380.00	0.00	0.00
Totals:				\$0.00	\$-380.00	\$0.00	\$0.00

Total Unadjudicated: \$-380.00
Total Adjudicated: \$0.00
Total Arrears: \$-380.00

Custodian Financial Audit (part 2 of 2)

Run Date: 02/14/2019
Run Time: 08:07 AM

NCP Name: Barker, Christopher
CST Name: Barker, Megan
Case ID: 586191200A
Docket#: 18-UR-0024
Office: 16
Prepared By: AMMATOVI
Last Updated By: AMMATOVI
Prepared By Date: 02/14/2019
Last Updated By Date: 02/14/2019

Provision Type: Child Support

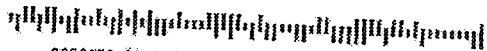
Event Date	Event Type	Current Amount Due	NCP Paid	Unadjudicated Interest (On UA)		Unadjudicated Interest (On AA)		Adjudicated Interest		Unadjudicated Penalty		Adjudicated Penalty	
				Adjust Amount	Running Balance	Adjust Amount	Running Balance	Adjust Amount	Running Balance	Adjust Amount	Running Balance	Adjust Amount	Running Balance
1 12/01/2018	J	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2 12/01/2018	O	898.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3 12/01/2018	P	0.00	1072.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4 01/01/2019	O	898.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5 01/01/2019	P	0.00	1104.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Totals:				\$1796.00	\$2176.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Total Unadjudicated Interest on UA: \$0.00
Total Unadjudicated Interest on AA: \$0.00
Total Adjudicated Interest: \$0.00
Total Interest: \$0.00
Total Unadjudicated Penalty: \$0.00
Total Adjudicated Penalty: \$0.00
Total Penalty: \$0.00
Total Arrears: \$-380.00
Total Interest: \$0.00
Total Penalty: \$0.00
Grand Total: \$-380.00

Social Security Administration
Retirement, Survivors, and Disability Insurance
Important Information

M7

Office of Central
Operations
1500 Woodlawn Drive
Baltimore, Maryland 21241-1500
Date: January 20, 2019
BNC#: [REDACTED]



0000659 00013540 1 ME 0.424 0115MDC1R7PI T54 P3
CHRISTOPHER W BARKER
[REDACTED]

We are writing to you about your Social Security benefits.

Your Benefits

We are suspending your benefits until information about your work and earnings is verified.

What You Should Know

Based on the information we have, we cannot pay benefits beginning January 2019.

Information About Medicare

We will continue to charge a monthly premium for your medical insurance under Medicare.

We will send your first bill for the premiums within a month. Each bill after that will be for a 3-month period.

If You Disagree With The Decision

If you do not agree with this decision, you have the right to appeal. We will review your case and look at any new facts you have. A person who did not make the first decision will decide your case. We will review the parts of the decision that you think are wrong and correct any mistakes. We may also review the parts of our decision that you think are right. We will make a decision that may or may not be in your favor.

- You have 60 days to ask for an appeal in writing.
- The 60 days start the day after you receive this letter. We assume you got this letter 5 days after the date on it unless you show us that you did not get it within the 5-day period.

SEE NEXT PAGE

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 25 2019
BOBBIE R. WILLIAMS Clerk of Court
of the State of Nevada, in and for the County of Douglas,
By [Signature] Deputy

ADDRESS ONLY
CRITICAL TO THE SECURITY OF THE NATION
DO NOT REPRODUCE OR TRANSMIT

B