DOUGLAS COUNTY, NV 2023-1001399 This is a no fee document 10/12/2023 03:18 PM NO FEE STATE OF NEVADA 1 2 APN# 00173786202310013990160162 3 SHAWNYNE GARREN, RECORDER 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: Joshua Franklin Boyer 20 Case number: 3200033767 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

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Pgs=16

CASE NO. 2023-UR-00008

DEPT. NO. II

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 REBEKAH PAIGE MILLER **Obligees** 

AFFIDAVIT OF RECORDATION

Vs.

JOSHUA FRANKLIN BOYER Obligor

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I, Lindsey Rippy, hereby swear and affirm under penalty of perjury that the following assertions are true:

- 1. That affiant is, and at all times mentioned herein was, a citizen of the State of Nevada, over the 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 3200033767.
- 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.
- 3. That the Obligor's name is Joshua Franklin Boyer, whose address, Social Security number and date of birth is confidential on file with the Division of Welfare and Supportive Services Child Support Enforcement Office.
- That attached hereto is a certified copy of the Judgment and Order filed on October 2, 2023. 4.

Lindsey Rippy

Administrative Assistant 1

State of Nevada, County of Subscribed and sworn

NOTÁRY PUBLIC

EOTA PENNINGTON-OJOSHIPE lotary Public, State of Nevada No. 22-0152-02 My Appt. Exp. Jan. 24, 2026

#### INSTRUCTIONS TO RECORDER

5 Obligee:

Obligor:

Date:

9 From:

Enclosed:

Joshua Franklin Boyer

Rebekah Paige Miller

October 10, 2023

Lindsey Rippy, 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.

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) 448-5265.

1 Case No. 2023-UR-00008 RECEIVED ( P 2 Dept No. II 3 SEP 2 7 2023 BOETH IN LLIAMS Douglas County District Court Civile F. SHOEMAKE 5 IN THE NINTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA 6 7 IN AND FOR THE COUNTY OF DOUGLAS 8 DIVISION OF WELFARE AND SUPPORTIVE SERVICES AND REBEKAH PAIGE MILLER 9 10 Obligee 11 Vs. 12 JOSHUA FRANKLIN BOYER 13 Obligor 14 JUDGMENT AND ORDER 15 16 The undersigned does hereby affirm this document does not contain the social security number of 17 any person, pursuant to NRS 239B.030. 18 This matter was heard on August 25, 2023, for Notice and Finding of Financial 19 Responsibility. The Court Master with the following were present: 20 21 Obligee: Present Not Present The court attempted a call at 10:30 a.m. 22 Obligor: Presented by: Lissette McCoy Division of Welfare and Support Services 23 Child Support Enforcement 24 After considering all the evidence, the Master hereby makes the following Findings and 25 Recommendations: 26 The Obligor was properly served on June 28, 2023, with a Notice and Finding of Financial and Responsibility. Obligor is the parent of Malachi David Miller, born December 16, 2019.

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- Obligor was properly served and noticed of today's hearing at his last known address and failed to appear.
- Using Federal Poverty Guidelines, Obligor's gross monthly earnings are up to \$911.00.

  Pursuant to the formula prescribed within NRS 125B.080 and NAC 425 et seq., the state calculates an obligation of \$96.00 per month.

#### THE RECOMMENDED ORDER:

- 2. An arrears Judgment is entered in the amount of \$816.00 for June 1, 2021 through August 31, 2023.
  - $\boxtimes$  To be paid by payments of \$20.00 per month beginning September 1, 2023.

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>3200033767</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.

3. All payments shall be made by immediate income withholding. If your full obligation 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 or at any time withholding does not occur, you are responsible to make voluntary payments to the STATE COLLECTION AND DISBURSEMENT UNIT (SCaDU). If you fail to do so you will be subject to the assessment of interest. You may avoid these additional costs by making your current child support payments each month.
4. The Obligee will cover the child's medical, vision, or dental health insurance needs

- Pursuant to NRS 425.3824(1)(d) and NAC 425 et seq., 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. If a parent seeks reimbursement for a child's medical/dental expense not covered by insurance, that parent must send proof of the expense to the other parent within 30 days of paying that bill. The other parent then has 30 days to reimburse the paying parent 1/2 the cost of that bill. The parents are required to comply with this provision for reimbursement under this provision. The parents seeking enforcement of this provision must either go to small claims court or district court to obtain a judgment against the other parent before CSEP is required to collect on that judgment.
- 6. 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.
- 7. 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

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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).

- 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.
- 9. The Master finds that these Recommendations are in the best interest of the child.

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#### SUPPORT OBLIGATION BREAKDOWN AS FOLLOWS:

Child Support......\$96.00 Effective September 1, 2023

Child Support Arrearages... \$20.00 Effective September 1, 2023

Medical Cash......\$0.00 Effective September 1, 2023

**TOTAL PAYMENT......\$116.00** 

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

NOTICE: Pursuant to NAC 425.165, if you want to adjust the amount of child support established in this order, you MUST file a motion to modify the order or submit a stipulation to the court. If a motion to modify the order is not filed or a stipulation is not submitted, the child support obligation established in this order will continue until such time as all children who are the subject of this order reach 18 years of age or, if the youngest child who is subject to this order is still in high school when he or she reaches 18 years of age, when the child graduates from high school or reaches 19 years of age, whichever comes first.

Unless the parties agree otherwise in a stipulation, any modification made pursuant to a motion to modify the order will be effective as of the date the motion was filed.

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 August

\_\_, 2023.

1s Kathleen T. Breckenridge
Court Master

1	NOTICE OF RIGHT TO WAIVE OBJECTION							
2	The Obligor waives the fourteen (14) days for objection to the Master's Report, and this report may be submitted to the District Court immediately.							
4	The Obligee waives the fourteen (14) 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	Joshua Boyer, Obligor							
8	Rebekah Miller, Obligee							
9	NOTICE OF RIGHT TO OBJECTION							
10								
11	Objections are governed by NRCP 53(f)(1). You have 14 (fourteen) days from mailing this 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 Nevada and served upon the other party and the Division of Welfare and Supportive							
14	Services at 300 East Second Street Suite 1200, Reno, NV 89501.							
15	You must submit your objection to the Court Clerk for filing by submitting your original							
16	objection and two copies. Legal advice regarding your objection will not be provided.							
17	For information on obtaining an objection packet or the objection process please call the Division of Welfare and Supportive Services at (775) 448-5150 located at 300 East							
18	Second 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	iviastei aliu,							
23	The Obligor having waived the right to object thereto.							
24	No timely objection has been filed hereto.							
25	IT IS HEREBY ORDERED that the Master's Findings and Recommendations are							
26	affirmed and adopted.							
27								
28	Dated: September 29, 2023.							
20	Dated: September 29, 2023.  District Judge							

1	Case No. 2023-UR-00008
2	Dept. No. II
3	
4	\ \
5	\ \
6	IN THE NINTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
7	IN AND FOR THE COUNTY OF DOUGLAS
8	
9	DIVISION OF WELFARE AND SUPPORTIVE SERVICES
10	AND REBEKAH PAIGE MILLER Obligees
11	Vs.
12	JOSHUA FRANKLIN BOYER
13	Obligor /
14	
15	<u>CERTIFICATE OF MAILING</u>
16	Pursuant to NRCP 5(b), I certify that on this date I deposited for mailing, postage prepaid,
17	at Reno, Nevada, a true copy of the attached document addressed to:
18	Rebekah Miller
19	Address in file- Confidential
20	Joshua Boyer
21	Address in file- Confidential
22	
23	Dated: Definition 8, 2023
24	
25	Signed: Kindsen Lings
26	Lindsey Rippy / / / Administrative Assistant II
27	
28	Document: Judgment and Order Case No. 2023-UR-0008

## Nevada Child Support Guidelines Calculator

A free web application tool to calculate the child support guidelines obligation.

Primary Custody	Switch to Joint/Mixed Clear
Calculation Year: Effective 02/01/2023 Respondent's Gross Monthly Income:	2023 🗸
Children in Petitioner's custody:	
Respondent's Obligation: \$	96 Calculate Copy
R	espondent's Gross Monthly Income: \$0.00
	Number of Children: 1
	For 1 child,
an	nd Gross Monthly Income above \$0.00 and

and Gross Monthly Income above \$0.00 and up to \$911.00 the 2023 Low-Income Payers table Obligation amount is \$96.00.

Respondent's Obligation: \$96.00

Show User Guide

2021 - Nevada Child Support Guidelines Calculator

#### Website Disclaimer

Please read this disclaimer carefully before using this website. All information posted is merely for informational purposes as it relates to child support cases in the State of Nevada. It should not be considered legal advice. The court has the ability to make adjustments to any estimated obligation. Should you decide to act upon any information on this website, you do so at your own risk. While the information on this website has been verified to the best of our abilities, we cannot guarantee that there are no mistakes or errors. We reserve the right to change this policy at any given time. If you want to make sure that you are up to date with the latest changes, we advise you to frequently visit this website.

Exhibit A

### ARREARAGE WORKSHEET

Aug-23	\ \	\$96.00			
Jul-23		\$96.00			
Jun-23		\$96.00		\	
May-23	1 1	\$336.00			PKD Partnership GMI: \$2,097 x 16%
Apr-23		\$96.00	70.	1	The same
Mar-23		\$96.00			No Income found, federal poverty guidelines apply for one child
Feb-23		\$0.00		1	Obligor Paroled 02/2023
Jan-23		\$0.00	<del></del>	\ /	
Dec-22		\$0.00		V .	
Nov-22		\$0.00	1		/
Oct-22		\$0.00		\ \ \ \ \ \	17
Sep-22		\$0.00		/	1 /
Aug-22	<del></del>	\$0.00			
Jul-22		\$0.00		1	
Jun-22		\$0.00			
May-22		\$0.00			//
Apr-22		\$0.00			/
Mar-22		\$0.00			
Feb-22		\$0.00			
Jan-22		\$0.00			
Dec-21		\$0.00			
Nov-21		\$0.00			<del>- 1   -</del>
Sep-21 Oct-21		\$0.00 \$0.00			<del>                                     </del>
Aug-21		\$0.00			
Jul-21		\$0.00		ļ	\ \
Jun-21		\$0.00			Obligor Incarcerated 04/21/2021
			-, .,	OBLIGATION	
DATE	ASST PAID	RQSTD OBL	PAYMENTS	COURT ORDEREL	NOTES/COMMENTS
REBEKAH PAIGE M		L.RUSSELL		DOUGLAS	2023-UR-00008
OBLIGEE:		IV-D CASE WORKER	₹:	COUNTY:	DOCKET NUMBER:
OBLIGOR: JOSHUA FRANKLYN		IV-D CASE NUMBER 3200033767		PAO OFFICE: Reno	COMPLETION DATE: 05/05/2023



RICHARD WHITLEY MS.

ROBERT THOMPSON

DEPARTMENT OF REALTH AND HUMAN SERVICES
DIVISION OF WELFARE AND SUPPORTIVE SERVICES
Child Support Enforcement Program
Sour E. Second Street, Suite 1200
Reno, NY 89501-1586
Telephone (775) 448-5150 • Fax (775) 448-5199
http://dyss.ny.gov

**AUGUST 07, 2023** 

PKD PARTNERSHIP 1403 28TH ST SACRAMENTO, CA. 95816-6404

Please complete & fax back to (775) 448-5199 or email to:

A GONZALEZ COWSS, NV. 601

Re: JOSHUA FRANKLIN BOYER SSN:

Participant ID: 1000026367

Federal and State law (Uniform Interstate Family Support Act & Nevada Revised Statute (NRS) 425) requires employers to disclose employee information upon request of a child support enforcement agency. Please provide written response on the original copy of this letter as soon as possible. Per NRS 425.393 "A disclosure made in good faith...does not give rise to any action for damages for disclosure."

Thank you for your assistance.

EDGAR GONZALEZ

CHILD SUPPORT ENFORCEMENT

Employee's current address or address on W-2:

Home/message telephone:

Job Site location: Payagay y S, 1401 28 St, Salva mento CA 95816

Date hired: O4 28 2623 Hourly wage: \$ 18 plus types

Occupation: 1 C DD C

Scheduled shift: Days () Swing () Graveyard () Other: DD DVCV

Hours scheduled to work per week:

If less than 40 hours, is full-time work available? Yes X No ()

Union member: Yes () No X Union name and address:

HMPLOYER VERIFICATION NVGN000088



NEVADA CHILD SUPPORT PROGRAM PAGE 1 OF 3

Exhibit C

Frequency of paycheck: Weekly () Bi-weekly () Semi-monthly () Monthly ()
Date of first paycheck: 05 05 2025
Will tips be received? Yes No() Estimated amount of monthly tips: \$ 190
Please provide employee's GROSS earnings for the last twelve (12) months, listing tips on the second line:    JAN   FEB   MAR   APR   MAY   JUN   JUL   AUG   SEP   OCT   NOV   DEC
Company Address:
Effective date: Date coverage ceases:
Name of dependents covered by medical insurance.
Monthly cost:  Employee only coverage; \$  Dependent coverage (for those currently covered): \$
Additional dependents (not currently covered): \$  Family plan \$  Volumery resided Weekly () Bi-weekly () Semi-monthly () Monthly ()  Is employee terminated? Yes () No () Date of termination: 5/17/7073  Is employee applying for/collecting UIB? Yes () No () Unknown ()
Is employee terminated? Yes (No () Date of termination: 5/17/2023
SIIS/Worker's Comp: Yes () No W Unknown () Other benefits:
Name and address of benefit provider:



AUGUS1 U/, 2023 Participant ID: 1000026367

Page Three

New employer's name and address (if known):

Munnm

ignature of employer

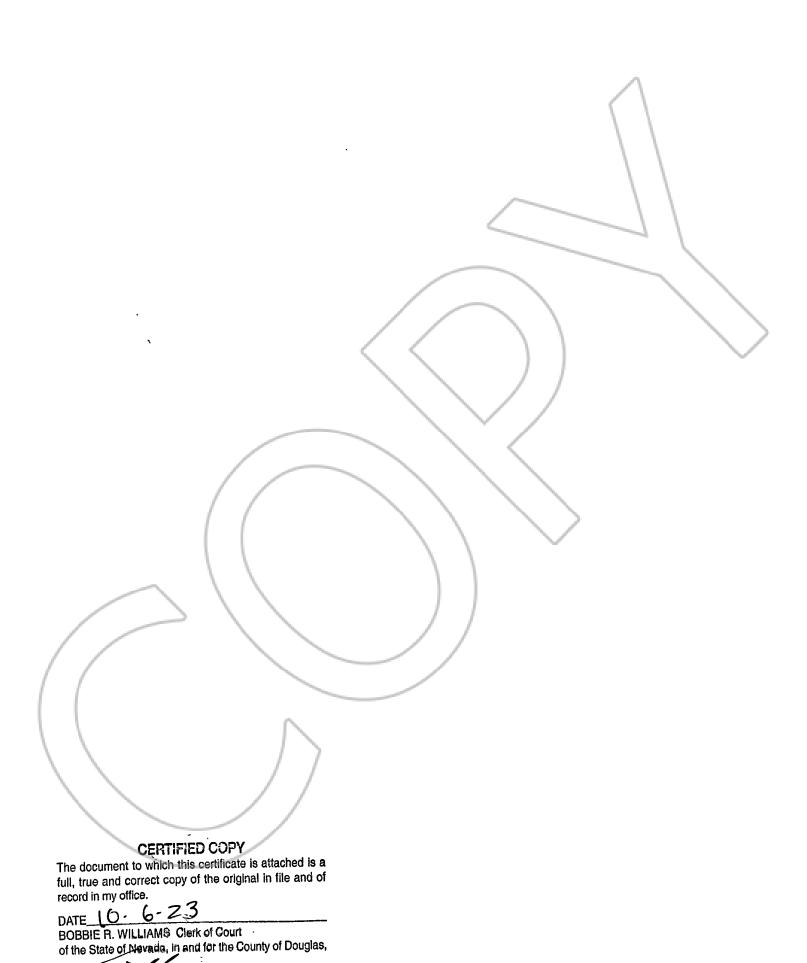
Telephone number

the Marager

Date

EMPLOYER VERIFICATION
-NVGN000088





Deputy