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SHAWNYNE GARREN, RECORDER

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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:

Obligor's Name: Franklin Warren Reed

Case number: 3200341490

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. 10-UR-0058

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 KELLY ANNA SMITH

8 Obligees

**AFFIDAVIT OF RECORDATION**

9 Vs.

10 FRANKLIN WARREN REED  
11 Obligor

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

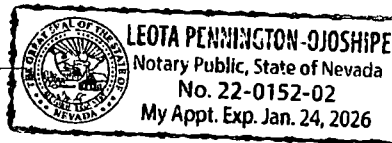
- 13 1. That affiant is, and at all times mentioned herein was, a citizen of the State of Nevada, over the
- 14 age of twenty-one years of age, and an employee of the Division of Welfare and Supportive
- 15 Services Child Support Enforcement Office managing the legal process under Case Number
- 16 3200341490.
- 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 Franklin Warren Reed, whose address, Social Security number and
- 20 date of birth is confidential on file with the Division of Welfare and Supportive Services Child
- 21 Support Enforcement Office.
- 22 4. That attached hereto is a certified copy of the Judgment and Order filed on February 24, 2023.

23 Alyssa Matovina  
24 Alyssa Matovina  
25 Family Service Supervisor I

26 State of Nevada, County of Washoe  
27 Subscribed and sworn before me this

28 23rd day of March, 2023

Leota Pennington-Joshipe  
NOTARY PUBLIC





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Case No. 10-UR-0058

FEB 22 2023

2023 FEB 24 AM 8:28

Dept No. II

Douglas County  
District Court Clerk

BOBBIE R. WILLIAMS  
CLERK

BY F. SHOEMAKER  
DEPUTY

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 KELLY ANNA SMITH  
Obligees

Vs.

FRANKLIN WARREN REED  
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 January 27, 2023 for Modification requested by Obligor. The Court Master with the following were present:

Obligee:  Present, via Zoom

Obligor:  Not Present

Represented by: Day R. Williams-Attorney

Presented by: Christine Carter

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:

NAME

DOB

JAYCE EVAN REED

MAY 16, 2009

1  Obligor was properly served and noticed of today's hearing at his last known address  
2 and failed to appear.

3  Using Federal Poverty Guidelines, Obligor's gross monthly earnings are up to \$849.00.  
4 Pursuant to the formula prescribed within NRS 125B.080 and NAC 425 et seq., the state  
5 calculates an obligation of \$90.00 per month.

6 RECOMMENDED ORDER IS:

7 1.  Ongoing support is ordered in the amount of \$90.00 per month beginning  
8 January 1, 2023. The obligation for Child Support continues until the child turns 18  
9 years of age, or until the child turns 19 years of age if the child is enrolled in High  
10 School. NRS 425.300. However, this obligation to support a child is affected by a  
11 child's ability to live on their own (NRS129.080 to 129.140 – legal emancipation) or  
12 when applicable, continued financial support beyond the age of majority per NRS  
13 125B.110.

14 2.  The Obligor is responsible for **child support** arrears for the period of  
15 January 1, 2022 through September 30, 2022.

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

17  Principal in the amount of \$3,872.32

18  Interest in the amount of \$737.84

19  Penalty in the amount of \$474.56

20 For a total judgment of \$5,084.72 to be repaid at \$25.00 per month beginning January 1, 2023.

21 3.  The Obligor is responsible for **medical cash** arrears for the period of  
22 January 1, 2022 through September 30, 2022.

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

24  Principal in the amount of \$550.11

25  Interest in the amount of \$207.33

26  Penalty in the amount of \$49.72

27 For a total judgment of \$807.16 to be repaid at \$10.00 per month beginning January 1, 2023.  
28

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 3200341490 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 is  
17 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 or at any time withholding does not occur, you are responsible to make  
20 voluntary payments to the STATE COLLECTION AND DISBURSEMENT UNIT  
21 (SCaDU). If you fail to do so you will be subject to the assessment of penalties and  
22 interest. You may avoid these additional costs by making your current child support  
23 payments each month.

24 5.  The Obligee will cover the child's medical, vision, or dental health insurance needs  
25 using either a private for fee insurance plan or public insurance plan. The accessible and  
26 reasonable cost of medical support for the child is the amount of \$0.00 per month. The  
27 Obligor will pay \$0.00 for the monthly medical cash support effective January 1, 2023.  
28 NAC 425.135.

- 1 6.  Pursuant NRS 425.382 et seq. and NAC 425 et seq., expenses for health care which  
2 are not reimbursed through insurance, including expenses for medical, surgical, dental,  
3 orthodontic and optical expenses, must be shared equally by both parents. If a parent  
4 seeks reimbursement for a child's medical/dental expense not covered by insurance, that  
5 parent must send proof of the expense to the other parent within 30 days of paying that  
6 bill. The other parent then has 30 days to reimburse the paying parent 1/2 the cost of  
7 that bill. The parents are required to comply with this provision for reimbursement  
8 under this provision. The parents seeking enforcement of this provision must either go  
9 to small claims court or district court to obtain a judgment against the other parent  
10 before CSEP is required to collect on that judgment.
- 11 7. The Obligor shall keep the Division of Welfare and Supportive Services informed of any  
12 change regarding current residential and/or mailing address, employment and of access  
13 to health insurance coverage in WRITING (including health insurance policy  
14 information) within 10 days of such change.
- 15 8. Effective July 1, 2004 simple interest will accrue on all adjudicated arrears balances  
16 (including payment in lieu of medical insurance) and spousal support balances, for cases  
17 with a Nevada controlling order pursuant to NRS 99.040. Interest assessed by a  
18 judgment of the court prior to July 1, 2004 will be enforced. Interest on the judgment  
19 shall accrue at the rate established by NRS 125B.140(2)(c)(1).
- 20 9. A 10% penalty will be assessed on each unpaid installment, or portion thereof, of an  
21 obligation to pay child support for a child, pursuant to NRS 125B.095 until January 31,  
22 2020. All penalties accrued through that date will be enforced/collected until the amount  
23 is paid in full.
- 24 10. 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 11. The Master finds that these Recommendations are in the best interest of the child.  
28

1 It is further ordered that: All previously ordered amounts and provisions to remain the same for  
2 October 2022 through December 2022. The Court heard testimony from attorney Day Williams  
3 witnesses mother of Obligor, Harriet Reed and sister of Obligor, Mariah Rios. Mariah Rios has  
4 power of attorney over the Obligor while he is in Dream Center. She testified that Obligor will  
5 be in the facility for one-year per the contract. He is unable to leave the facility, nor does he  
6 have any income while in the treatment center. Pursuant to Exhibit B from Obligor's  
7 coordinator, Jonathon Holliday, at Dream Center, his expiration date is June 19, 2023. The  
8 Division questioned Mariah Rios regarding her ability to obtain documentation from the facility  
9 that reflects the Obligor's contract conditions. Mariah Rios stated that she does believe that she  
10 can. She will obtain the required documents and forward them to the Division. Review hearing  
11 scheduled July 14, 2023 at 10:30 am. The Hearing Master requested that the Obligor appear via  
12 Zoom for the review hearing. Attorney, Day Williams or Mariah Rios is court ordered to  
13 provide any and all medical records, prognosis, and the reason for his inability to work, at least  
14 14 days prior to the review hearing. Court waived prospective interest.

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**SUPPORT OBLIGATION BREAKDOWN AS FOLLOWS:**

Child Support.....	<u>\$90.00</u>	Effective <u>January 1, 2023</u>
Child Support Arrearages.....	<u>\$25.00</u>	Effective <u>January 1, 2023</u>
Medical Cash.....	<u>\$0.00</u>	Effective <u>January 1, 2023</u>
Medical Cash Arrearages.....	<u>\$10.00</u>	Effective <u>January 1, 2023</u>
<b>TOTAL PAYMENT.....</b>	<b><u>\$125.00</u></b>	

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 with 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 2nd day of Feb, 2023.

1s/ Kathleen T. Breckenridge  
Court Master

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**NOTICE OF RIGHT TO WAIVE OBJECTION**

- 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.
- 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.

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

\_\_\_\_\_  
Franklin Reed, Obligor

\_\_\_\_\_  
Kelly Smith, Obligee

**NOTICE OF RIGHT TO OBJECTION**

Objections are governed by NRCPP 53(f)(1). You have 14 (fourteen) days from mailing of this recommendation to file your objection. A failure to file and serve a written objection will result in final Judgment being ordered by District Court.

Objections to this Order **must be filed** with the First Judicial District Court of the State of 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.

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.

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 Second Street Suite 1200, Reno, NV 89501.**

**ORDER**

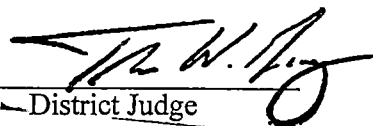
The Court, having reviewed the above and foregoing Master's Report prepared by the Court

Master and,

- The Obligor having waived the right to object thereto.
- No timely objection having been filed hereto.

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

Dated: February 23, 2023.

  
\_\_\_\_\_  
District Judge

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Case No. 10-UR-0058

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 KELLY ANNA SMITH  
Obligee(s)

Vs.

FRANKLIN WARREN REED  
Obligor

CERTIFICATE OF MAILING

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

Day R. Williams-Attorney  
1601 Fairview Dr. Suite C  
Carson City, NV 89701

Kelly Smith  
Address in file- Confidential

Dated: February 10<sup>th</sup>, 2023

Signed: *L. Mattonia*  
for Leota Pennington-Ojoshipe  
Administrative Assistant II

Document: Judgment and Order  
Case No. 10-UR-0058

# 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 02/01/2022

2022 ▼

Respondent's Gross Monthly Income:

849.00

Children in Petitioner's custody:

1

Respondent's Obligation: \$ 90

Calculate

Copy

Respondent's Gross Monthly Income: \$849.00

Number of Children: 1

For 1 child,  
and Gross Monthly Income above \$0.00 and  
up to \$849.00 the 2022 Low-Income Payers table  
Obligation amount is \$90.00.

Respondent's Obligation: \$90.00

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

MEDICAL ASSESSMENT FORM

INSTRUCTIONS: This form is completed by both the patient and the patient's medical service provider.

SECTION I: (Date of Release) (Without attestation) To be completed by the patient.

SECTIONS III and IV To be completed by the patient's medical service provider only.

Date: JANUARY 11, 2023

CSI Case Number: 1200341490

SECTION I: PATIENT INFORMATION AND MEDICAL RELEASE

(Pursuant to and in compliance with the Health Insurance Portability and Accountability Act and following regulations in Title 45, Code of Federal Regulations, Part 164.)

Patient Name: Franklin Warren Reed

Date of Birth: [REDACTED]

As the patient identified above, I hereby authorize the disclosure and release of my personal health information as follows:

1. I authorize Mariah Rios  
(Name of Medical/Service Provider)

408 Roche St Carson City NV 89701  
(Medical/Service Provider's Address, City State, Zip)

to disclose and release my personal and protected health information stated in Section III of this report to the recipient identified in Section II below. This authorization constitutes a full and complete release from any liability resulting from disclosure of such information.

2. I permit the release of this health information to the RENO PROGRAM AREA OFFICE.

3. The purpose of this requested disclosure is described in Section II.

4. This authorization for disclosure of health information expires on

JUNE 19, 2023  
(Specify Date)

5. I understand that I have a right to revoke this authorization for disclosure in writing by delivering copies of the revocation to both my health care provider and to the child support agency.

6. I understand that the health information disclosed by my health care provider to the child support agency has the potential to be re-disclosed to others and lose its protected status.

Executed on 1-17-23  
(Specify Month and Day)

2023 at Phoenix AZ  
(Specify City, State)

Franklin Reed  
Print Name

[Signature]  
Signature of Patient

B



**SECTION II: INSTRUCTIONS FOR MEDICAL SERVICE PROVIDER**

The RENO PROGRAM AREA OFFICE and representatives thereof are requesting the following information from you to verify that the above patient is either temporarily or permanently disabled. This means the patient is either temporarily or permanently unable to perform any work at either his or her usual occupation or at any other job, that he or she could be trained to do. The purpose of this disclosure requested in Section III is to provide information necessary for the local child support agency to determine the support potential of your patient. If possible, please return completed assessment via fax to (775) 448-5199.

**SECTION III: MEDICAL/SERVICE PROVIDER STATEMENT**

Does this patient have a total permanent medical disability?  Yes  No  
Is this patient able to work?  Yes  No  
If no, or what period of time will this patient be unable to work?  Lifetime  Temporary  
If temporary, please provide a timeframe for when this patient can return to work:

June 2023  
Onset date for this disability: \_\_\_\_\_

Diagnosis: Disruptive School / Attention

Prognosis: \_\_\_\_\_

Current Treatment and Medication: Disruptive School

Date of last examination: 12-22-23

Additional Notes: \_\_\_\_\_

**SECTION IV: MEDICAL/SERVICE PROVIDER CERTIFICATION**

Name of Medical/Service Provider: Phoenix Dream Center

Type of Provider:  MD  DO  PA  Psychiatrist  Psychologist  APRN

Other (Please Specify): DC School Coordinator

Signature of Doctor: [Signature] Date: 1-17-2025

Print Name: Jonathan Holliday License #: NYA

Address: [Redacted]

Contact Number: [Redacted] Fax Number: \_\_\_\_\_

**Custodian Financial Audit (part 1 of 2)**

Run Date: 01/11/2023  
Run Time: 10:40 AM

NCP Name: Reed , Franklin  
CST Name: Smith, Kelly

Case ID: 907742000B  
Docket#: 10-UR-0058  
Office: 03  
Prepared By: CHRCARTE  
Last Updated By: TCORDLE  
Prepared By Date: 01/11/2023  
Last Updated By Date: 11/03/2022

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
01/01/2022	J	0.00	0.00	0.00	0.00	993.17	993.17
01/01/2022	O	512.00	0.00	512.00	512.00	0.00	993.17
01/13/2022	P	0.00	279.23	-279.23	232.77	0.00	993.17
01/31/2022	M	0.00	0.00	0.00	232.77	0.00	993.17
02/01/2022	O	639.00	0.00	639.00	871.77	0.00	993.17
02/14/2022	P	0.00	139.62	-139.62	732.15	0.00	993.17
02/28/2022	M	0.00	0.00	0.00	732.15	0.00	993.17
03/01/2022	O	639.00	0.00	639.00	1371.15	0.00	993.17
03/14/2022	P	0.00	1775.00	-781.83	589.32	-993.17	0.00
03/31/2022	M	0.00	0.00	0.00	589.32	0.00	0.00
04/01/2022	O	639.00	0.00	639.00	1228.32	0.00	0.00
04/13/2022	P	0.00	300.00	-300.00	928.32	0.00	0.00
04/30/2022	M	0.00	0.00	0.00	928.32	0.00	0.00
05/01/2022	O	639.00	0.00	639.00	1567.32	0.00	0.00
05/31/2022	M	0.00	0.00	0.00	1567.32	0.00	0.00
06/01/2022	O	639.00	0.00	639.00	2206.32	0.00	0.00
06/23/2022	P	0.00	500.00	-500.00	1706.32	0.00	0.00
06/30/2022	M	0.00	0.00	0.00	1706.32	0.00	0.00
07/01/2022	O	639.00	0.00	639.00	2345.32	0.00	0.00
07/31/2022	M	0.00	0.00	0.00	2345.32	0.00	0.00
08/01/2022	O	639.00	0.00	639.00	2984.32	0.00	0.00

Event Date	Event Type	Current Amount Due	NCP Paid	Unadjudicated Arrears		Adjudicated Arrears	
				Adjustment Amount	Running Balance	Adjustment Amount	Running Balance
22 08/31/2022	M	0.00	0.00	0.00	2984.32	0.00	0.00
23 09/01/2022	O	888.00	0.00	888.00	3872.32	0.00	0.00
24 09/30/2022	M	0.00	0.00	0.00	3872.32	0.00	0.00
<b>Totals:</b>		\$5873.00	\$2993.85	\$0.00	\$3872.32	\$0.00	\$0.00

Total Unadjudicated: \$3872.32

Total Adjudicated: \$0.00

Total Arrears: \$3872.32



**Custodian Financial Audit (part 2 of 2)**

Run Date: 01/11/2023  
Run Time: 10:40 AM

NCP Name: Reed , Franklin  
CST Name: Smith, Kelly  
Case ID: 907742000B  
Docket#: 10-UR-0058  
Office: 03  
Prepared By: CHRCARTE  
Last Updated By: TCORDLE  
Provision Type: Child Support  
Prepared By Date: 01/11/2023  
Last Updated By Date: 11/03/2022

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
01/01/2022	J	0.00	0.00	0.00	0.00	0.00	0.00	652.19	652.19	0.00	0.00	474.56	474.56
01/01/2022	O	512.00	0.00	0.00	0.00	0.00	0.00	652.19	652.19	0.00	0.00	474.56	474.56
01/13/2022	P	0.00	279.23	0.00	0.00	0.00	0.00	652.19	652.19	0.00	0.00	474.56	474.56
01/31/2022	M	0.00	0.00	1.02	1.02	4.35	4.35	652.19	652.19	0.00	0.00	474.56	474.56
02/01/2022	O	639.00	0.00	0.00	0.00	4.35	4.35	652.19	652.19	0.00	0.00	474.56	474.56
02/14/2022	P	0.00	139.62	0.00	1.02	0.00	4.35	652.19	652.19	0.00	0.00	474.56	474.56
02/28/2022	M	0.00	0.00	3.20	4.22	8.70	8.70	652.19	652.19	0.00	0.00	474.56	474.56
03/01/2022	O	639.00	0.00	0.00	4.22	0.00	8.70	652.19	652.19	0.00	0.00	474.56	474.56
03/14/2022	P	0.00	1775.00	0.00	4.22	0.00	8.70	652.19	652.19	0.00	0.00	474.56	474.56
03/31/2022	M	0.00	0.00	2.58	6.80	8.70	8.70	652.19	652.19	0.00	0.00	474.56	474.56
04/01/2022	O	639.00	0.00	0.00	6.80	0.00	8.70	652.19	652.19	0.00	0.00	474.56	474.56
04/13/2022	P	0.00	300.00	0.00	6.80	0.00	8.70	652.19	652.19	0.00	0.00	474.56	474.56
04/30/2022	M	0.00	0.00	4.06	10.86	0.00	8.70	652.19	652.19	0.00	0.00	474.56	474.56
05/01/2022	O	639.00	0.00	0.00	10.86	0.00	8.70	652.19	652.19	0.00	0.00	474.56	474.56
05/31/2022	M	0.00	0.00	6.86	17.72	0.00	8.70	652.19	652.19	0.00	0.00	474.56	474.56
06/01/2022	O	639.00	0.00	0.00	17.72	0.00	8.70	652.19	652.19	0.00	0.00	474.56	474.56
06/23/2022	P	0.00	500.00	0.00	17.72	0.00	8.70	652.19	652.19	0.00	0.00	474.56	474.56
06/30/2022	M	0.00	0.00	7.47	25.19	0.00	8.70	652.19	652.19	0.00	0.00	474.56	474.56
07/01/2022	O	639.00	0.00	0.00	25.19	0.00	8.70	652.19	652.19	0.00	0.00	474.56	474.56
07/31/2022	M	0.00	0.00	13.19	38.38	0.00	8.70	652.19	652.19	0.00	0.00	474.56	474.56

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		
21 08/01/2022	O	639.00	0.00	0.00	38.38	0.00	8.70	0.00	652.19	0.00	0.00	0.00	474.56
22 08/31/2022	M	0.00	0.00	16.79	55.17	0.00	8.70	0.00	652.19	0.00	0.00	0.00	474.56
23 09/01/2022	O	888.00	0.00	0.00	55.17	0.00	8.70	0.00	652.19	0.00	0.00	0.00	474.56
24 09/30/2022	M	0.00	0.00	21.78	76.95	0.00	8.70	0.00	652.19	0.00	0.00	0.00	474.56
<b>Totals:</b>		\$5873.00	\$2993.85	\$0.00	\$76.95	\$0.00	\$8.70	\$0.00	\$652.19	\$0.00	\$0.00	\$0.00	\$474.56

**Total Unadjudicated Interest on UA: \$76.95**      **Total Unadjudicated Penalty: \$0.00**  
**Total Unadjudicated Interest on AA: \$8.70**      **Total Adjudicated Penalty: \$474.56**  
**Total Adjudicated Interest: \$652.19**      **Total Penalty: \$474.56**  
**Total Interest: \$737.84**

**Total Arrears: \$3872.32**  
**Total Interest: \$737.84**  
**Total Penalty: \$474.56**  
**Grand Total: \$5084.72**

**Custodian Financial Audit** (part 1 of 2)

Run Date: 01/11/2023  
Run Time: 10:41 AM

NCP Name: Reed, Franklin  
CST Name: Smith, Kelly

Case ID: 907742000B  
Docket#: 10-UR-0058  
Prepared By: CHRCARTE  
Last Updated By: TCORDLE

Office: 03  
Prepared By Date: 01/11/2023  
Last Updated By Date: 11/03/2022

Provision Type: Medical Cash

Event Date	Event Type	Current Amount Due	NCP Paid	Unadjudicated Arrears		Adjudicated Arrears	
				Adjustment Amount	Running Balance	Adjustment Amount	Running Balance
01/01/2022	J	0.00	0.00	0.00	0.00	575.11	575.11
01/01/2022	O	0.00	0.00	0.00	0.00	0.00	575.11
01/31/2022	M	0.00	0.00	0.00	0.00	0.00	575.11
02/01/2022	O	0.00	0.00	0.00	0.00	0.00	575.11
02/28/2022	M	0.00	0.00	0.00	0.00	0.00	575.11
03/01/2022	O	0.00	0.00	0.00	0.00	0.00	575.11
03/14/2022	P	0.00	25.00	0.00	0.00	-25.00	550.11
03/31/2022	M	0.00	0.00	0.00	0.00	0.00	550.11
04/01/2022	O	0.00	0.00	0.00	0.00	0.00	550.11
04/30/2022	M	0.00	0.00	0.00	0.00	0.00	550.11
05/01/2022	O	0.00	0.00	0.00	0.00	0.00	550.11
05/31/2022	M	0.00	0.00	0.00	0.00	0.00	550.11
06/01/2022	O	0.00	0.00	0.00	0.00	0.00	550.11
06/30/2022	M	0.00	0.00	0.00	0.00	0.00	550.11
07/01/2022	O	0.00	0.00	0.00	0.00	0.00	550.11
07/31/2022	M	0.00	0.00	0.00	0.00	0.00	550.11
08/01/2022	O	0.00	0.00	0.00	0.00	0.00	550.11
08/31/2022	M	0.00	0.00	0.00	0.00	0.00	550.11
09/01/2022	O	0.00	0.00	0.00	0.00	0.00	550.11
09/30/2022	M	0.00	0.00	0.00	0.00	0.00	550.11
<b>Totals:</b>		\$0.00	\$25.00	\$0.00	\$0.00	\$0.00	\$550.11

Total Unadjudicated: \$0.00  
Total Adjudicated: \$550.11

*Handwritten mark resembling a stylized 'D' or 'P'.*

Total Arrears: \$550.11

COPY

**Custodian Financial Audit** (part 2 of 2)

Run Date: 01/11/2023  
Run Time: 10:41 AM

NCP Name: Reed , Franklin  
CST Name: Smith, Kelly

Case ID: 907742000B  
Docket#: 10-UR-0058  
Prepared By: CHRCARTE  
Last Updated By: TCORDLE

Office: 03  
Prepared By Date: 01/11/2023  
Last Updated By Date: 11/03/2022

Provision Type: Medical Cash

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	01/01/2022	J	0.00	0.00	0.00	0.00	0.00	183.41	183.41	0.00	0.00	49.72	49.72
2	01/01/2022	O	0.00	0.00	0.00	0.00	0.00	183.41	183.41	0.00	0.00	0.00	49.72
3	01/31/2022	M	0.00	0.00	0.00	2.51	2.51	0.00	183.41	0.00	0.00	0.00	49.72
4	02/01/2022	O	0.00	0.00	0.00	0.00	2.51	0.00	183.41	0.00	0.00	0.00	49.72
5	02/28/2022	M	0.00	0.00	0.00	0.00	2.51	0.00	183.41	0.00	0.00	0.00	49.72
6	03/01/2022	O	0.00	0.00	0.00	0.00	5.02	0.00	183.41	0.00	0.00	0.00	49.72
7	03/14/2022	P	0.00	25.00	0.00	0.00	5.02	0.00	183.41	0.00	0.00	0.00	49.72
8	03/31/2022	M	0.00	0.00	0.00	0.00	7.42	0.00	183.41	0.00	0.00	0.00	49.72
9	04/01/2022	O	0.00	0.00	0.00	0.00	7.42	0.00	183.41	0.00	0.00	0.00	49.72
10	04/30/2022	M	0.00	0.00	0.00	0.00	9.82	0.00	183.41	0.00	0.00	0.00	49.72
11	05/01/2022	O	0.00	0.00	0.00	0.00	9.82	0.00	183.41	0.00	0.00	0.00	49.72
12	05/31/2022	M	0.00	0.00	0.00	0.00	12.22	0.00	183.41	0.00	0.00	0.00	49.72
13	06/01/2022	O	0.00	0.00	0.00	0.00	12.22	0.00	183.41	0.00	0.00	0.00	49.72
14	06/30/2022	M	0.00	0.00	0.00	0.00	2.40	0.00	183.41	0.00	0.00	0.00	49.72
15	07/01/2022	O	0.00	0.00	0.00	0.00	0.00	0.00	183.41	0.00	0.00	0.00	49.72
16	07/31/2022	M	0.00	0.00	0.00	0.00	3.10	0.00	183.41	0.00	0.00	0.00	49.72
17	08/01/2022	O	0.00	0.00	0.00	0.00	0.00	0.00	183.41	0.00	0.00	0.00	49.72
18	08/31/2022	M	0.00	0.00	0.00	0.00	3.10	0.00	183.41	0.00	0.00	0.00	49.72
19	09/01/2022	O	0.00	0.00	0.00	0.00	0.00	0.00	183.41	0.00	0.00	0.00	49.72
20	09/30/2022	M	0.00	0.00	0.00	0.00	3.10	0.00	183.41	0.00	0.00	0.00	49.72
Totals:			\$0.00	\$25.00	\$0.00	\$0.00	\$0.00	\$23.92	\$0.00	\$183.41	\$0.00	\$0.00	\$49.72

Total Unadjudicated Interest on UA: \$0.00  
Total Unadjudicated Interest on AA: \$23.92  
Total Adjudicated Interest: \$183.41  
Total Interest: \$207.33

Total Unadjudicated Penalty: \$0.00  
Total Adjudicated Penalty: \$49.72  
Total Penalty: \$49.72

Total Arrears: \$550.11  
Total Interest: \$207.33  
Total Penalty: \$49.72  
Grand Total: \$807.16

**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 February 24, 2023

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

By [Signature] Deputy