



00177142202410042670190198

SHAWNYNE GARREN, RECORDER

1  
2 APN # \_\_\_\_\_

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  Judgment and Order

14  Stipulation and Order

15  Other:

16  
17  
18  
19 Obligor's Name: Michael Griffin

20 Case number: 3200252618

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. 12-UR-0042

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 PATRICIA MINTER  
7 NKA PATRICIA GRIFFIN  
8 Obligees

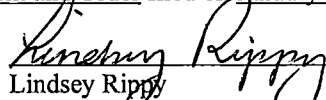
**AFFIDAVIT OF RECORDATION**

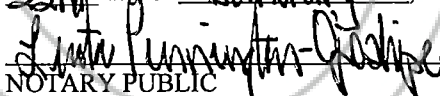
8 Vs.

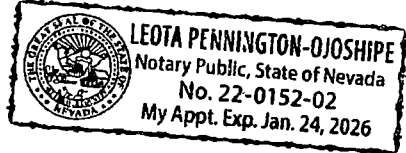
9 MICHAEL GRIFFIN  
10 Obligor  
\_\_\_\_\_ /

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

- 12 1. That affiant is, and at all times mentioned herein was, a citizen of the State of Nevada, over the
- 13 age of twenty-one years of age, and an employee of the Division of Welfare and Supportive
- 14 Services Child Support Enforcement Office managing the legal process under Case Number
- 15 3200252618.
- 16 2. That this affidavit and Judgment and Order is being filed pursuant to NRS125B.142 and
- 17 NRS17.150, and when so recorded shall become a lien upon all the real property of the Obligor.
- 18 3. That the Obligor's name is Michael Griffin, whose address, Social Security number and date of
- 19 birth is confidential on file with the Division of Welfare and Supportive Services Child Support
- 20 Enforcement Office.
- 21 4. That attached hereto is a certified copy of the Judgment and Order filed on January 5, 2024.

22   
23 Lindsey Rippy  
24 Administrative Assistant II

24 State of Nevada, County of Washoe  
25 Subscribed and sworn before me this 4  
22nd day of January, 2024  
26   
NOTARY PUBLIC



1  
2 **INSTRUCTIONS TO RECORDER**

3  
4 Obligor: Michael Griffin

5 Oblige: Patricia Griffin

6  
7 Date: January 22, 2024

8  
9 From: Lindsey Rippey, Administrative Assistant II, Division of Welfare and Supportive  
10 Services Child Support Enforcement Office

11  
12 Enclosed: Certified copy of Child Support Judgment and Order

13  
14 In accordance with NRS125B.142 and NRS17.150, on the behalf of the Division please record the  
15 attached Affidavit and Judgment and Order at the request of the Division of Welfare and Supportive  
16 Services Child Support Enforcement Office.

17  
18 Please note: If the judgment is a Stipulation and Order, they should be recorded as one document.

19  
20 Thank you for your assistance. If you have any questions or concerns, please call me at (775) 448-  
21 5265.

22  
23  
24  
25  
26  
27  
28

RECEIVED

FILED

1 Case No. 12-UR-0042

JAN 03 2024

2024 JAN -5 PM 1:36

2 Dept No. I

Douglas County  
District Court Clerk

BOBBIE R. WILLIAMS  
CLERK

K. WILFERT DEPUTY

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 PATRICIA MINTER  
10 NKA PATRICIA GRIFFIN  
Obligees

11 Vs.

12 MICHAEL GRIFFIN  
13 Obligor

14  
15 **JUDGMENT AND ORDER**

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 **December 8, 2023**, for Modification Requested by Obligee. The

19 Court Master with the following were present:

20 Obligee:  Present

21 Obligor:  Present

22 Presented by: Lissette McCoy

Division of Welfare and Support Services  
Child Support Enforcement

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

24 Recommendations:

25 The Obligor is the parent of the following child:

26 NAME

DOB

27 TALON RAY GRIFFIN

JUNE 1, 2012

1  Using imputed income NV minimum wages at \$11.25 per hour x 40 hours per week,  
2 Obligor's gross monthly earnings are \$1,950.00. Pursuant to the formula prescribed  
3 within NRS 125B.080 and NAC 425 et seq., 16% of those earnings, the state calculates  
4 an obligation of \$312.00 per month.

5 \*Using Obligee's paystub, Obligee's gross monthly earning are \$5,434.00. Pursuant to  
6 the formula prescribed within NRS 125B.080 and NAC 425 et seq., 16% of those  
7 earnings, the state calculates an obligation of \$869.00 per month.

8 Obligee's monthly child support obligation is higher than Obligor's's monthly  
9 obligation therefore Obligor's's monthly child support obligation will be \$0.00 per  
10 month. (\$312.00 - \$869.00) NAC 425.115 and *Wright v. Osburn*, 114 \*Nev. 1367,  
11 1368-1369 (1998).

12 The Court finds the Obligor underemployed or unemployed without good cause based on the  
13 following provisions contained in NAC 425.125:

14  Assets: Obligor testifies he does not have a vehicle or a home

15  Residence: lives with his mother

16  Employment and earning history: Obligor started his own business November  
2023

17  Job skills: Carpentry, Property management

18  Education: high school diploma

19  Literacy: Good per Obligor

20  Age: 38 years old

21  Health: Obligor believes he is in good health

22  Criminal record and other employment barriers: Obligor was released from  
incarceration July 2023

23  Record of seeking work: Obligor states he was not seeking employment to focus  
on his business

24  The local job market: Obligor states he was not seeking employment to focus on  
his business

25  The availability of employers willing to hire the Obligor: Obligor states he is  
ready to work if called in the next day

26  The prevailing earnings level in the local community: N/A

27  Any other relevant background factors in this case: The Court determined the  
Obligor to be physically and mentally capable of earning Nevada minimum wage

28 RECOMMENDED ORDER IS:

1.  Ongoing support is ordered in the amount of \$0.00 per month beginning December 1, 2023. The obligation for Child Support continues until the child turns 18 years of age, or until the child turns 19 years of age if the child is enrolled in High School. NRS 425.300. However, this obligation to support a child is affected by a child's ability to live on their own (NRS129.080 to 129.140 – legal emancipation) or when applicable, continued financial support beyond the age of majority per NRS 125B.110.

2.  The Obligor is responsible for **child support** arrears for the period of October 1, 2022 through October 31, 2023.

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

Principal in the amount of \$10,231.28

Interest in the amount of \$81207

Penalty in the amount of \$0.00

For a total judgment of \$11,043.35 to be repaid at \$100.00 per month beginning December 1, 2023.

3.  The Obligor is responsible for **medical cash** arrears for the period of October 1, 2022 through October 31, 2023.

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

Principal in the amount of \$0.00

Interest in the amount of \$0.00

Penalty in the amount of \$0.00

For a total judgment of \$0.00 beginning December 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:

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

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

3 C. Child support case number 3200252618 listed on each payment.

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

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

9 4. All payments shall be made by immediate income withholding. If your full obligation is  
10 not met by the amount withheld by your employer, you are responsible to pay the  
11 difference between your court ordered obligation and the amount withheld by your  
12 employer or at any time withholding does not occur, you are responsible to make  
13 voluntary payments to the STATE COLLECTION AND DISBURSEMENT UNIT  
14 (SCaDU). If you fail to do so you will be subject to the assessment interest. You may  
15 avoid these additional costs by making your current child support payments each month.

16 5.  The Obligee will cover the child's medical, vision, or dental health insurance needs  
17 using either a private for fee insurance plan or public insurance plan. The accessible and  
18 reasonable cost of medical support for the child is the amount of \$249.34 per month.  
19 The Obligor will pay \$98.00 for the monthly medical cash support effective  
20 December 1, 2023. NAC 425.135.

21 6.  Pursuant NRS 425.382 et seq. and NAC 425 et seq., expenses for health care which  
22 are not reimbursed through insurance, including expenses for medical, surgical, dental,  
23 orthodontic and optical expenses, must be shared equally by both parents. If a parent  
24 seeks reimbursement for a child's medical/dental expense not covered by insurance, that  
25 parent must send proof of the expense to the other parent within 30 days of paying that  
26 bill. The other parent then has 30 days to reimburse the paying parent 1/2 the cost of  
27 that bill. The parents are required to comply with this provision for reimbursement  
28 under this provision. The parents seeking enforcement of this provision must either go

1 to small claims court or district court to obtain a judgment against the other parent  
2 before CSEP is required to collect that judgment.

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

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

12 9. A 10% penalty will be assessed on each unpaid installment, or portion thereof, of an  
13 obligation to pay child support for a child, pursuant to NRS 125B.095 until January 31,  
14 2020. All penalties accrued through that date will be enforced/collected until the amount  
15 is paid in full.

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

19 11. The Master finds that these Recommendations are in the best interest of the child.

20 It is further ordered that: All previously ordered amounts and provisions will remain in effect  
21 for November 2023. \$0.00 order pursuant to Wright vs. Osburn from Docket 2020-DI-00113  
22 between the parties. The amount Obligor is ordered to pay for Medical Cash provision is 5% of  
23 the imputed wages.

24 ///

25 ///

26 ///

27 ///

28 ///



**SUPPORT OBLIGATION BREAKDOWN AS FOLLOWS:**

Child Support.....	<b>\$0.00</b>	Effective <u>December 1, 2023</u>
Child Support Arrearages.....	<b>\$100.00</b>	Effective <u>December 1, 2023</u>
Medical Cash.....	<b>\$98.00</b>	Effective <u>December 1, 2023</u>
Medical Cash Arrearages.....	<b>\$0.00</b>	Effective <u>December 1, 2023</u>
<b>TOTAL PAYMENT.....</b>	<b><u>\$198.00</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 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 13 day of Dec, 2023.

  
Court Master

1 **NOTICE OF RIGHT TO WAIVE OBJECTION**

2  The Obligor waives the fourteen (14) days for objection to the Master's Report,  
3 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,  
5 and this report may be submitted to the District Court immediately.

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

7 \_\_\_\_\_  
Michael Griffin, Obligor

8 \_\_\_\_\_  
Patricia Griffin, Obligee

9 **NOTICE OF RIGHT TO OBJECTION**

10 Objections are governed by NRCPC 53(f)(1). You have 14 (fourteen) days from mailing 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  
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  
18 **Division of Welfare and Supportive Services at (775) 448-5150 located at 300 East  
Second Street Suite 1200, Reno, NV 89501.**

19 **ORDER**

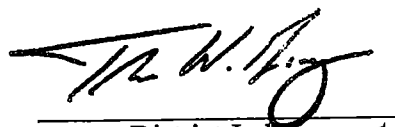
20 The Court, having reviewed the above and foregoing Master's Report prepared by the Court  
21 Master and,

22  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.**

26 Dated: January 5, 2023.<sup>4</sup>

27   
28 \_\_\_\_\_  
District Judge

1 Case No. 12-UR-0042

2 Dept No. I

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 PATRICIA MINTER  
10 NKA PATRICIA GRIFFIN  
Obligee(s)

11 Vs.

12 MICHAEL GRIFFIN  
13 Obligor

14 **CERTIFICATE OF MAILING**

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

17  
18 Michael Griffin  
Address in file- Confidential

19  
20 Patricia Griffin  
Address in file- Confidential

21  
22 Dated: December 15, 2023

23  
24 Signed: *Lindsey Rippey*  
25 Lindsey Rippey  
Administrative Assistant II

26  
27 Document: Judgment and Order  
28 Case No. 12-UR-0042

# Nevada Child Support Guidelines Calculator

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

Joint/Mixed Custody

Switch to Primary

Clear

Calculation Year:    
 Effective 02/01/2023

Respondent's Gross Monthly Income:    
 Children in Petitioner's custody:

Petitioner's Gross Monthly Income:    
 Children in Respondent's custody:

Petitioner's Obligation: \$ 557.44

Calculate

Copy

Respondent's Gross Monthly Income: \$1,950.00

Number of Children: 1

Tier 1 ( $\$1,950.00 * 16.00\% = \$312.00$ )

Obligation amount is \$312.00.

Petitioner's Gross Monthly Income: \$5,434.00

Number of Children: 1

Tier 1 ( $\$5,434.00 * 16.00\% = \$869.44$ )

Obligation amount is \$869.44.

Petitioner's Obligation: ( $\$869.44 - \$312.00$ ) = \$557.44

Show User Guide

2021 - Nevada Child Support Guidelines Calculator

Website Disclaimer

EXHIBIT A

Per NAC 425.125

(Imputing income to an Obligor who is under employed or unemployed without good cause)

- Assets:** NO
- Residence:** lives with mother
- Employment and earning history:** was started own Business  
for party maintenance
- Job skills:** Carpentry
- Education:** High school
- Literacy:** GOOD
- Age:** 28
- Health:** GOOD
- Criminal record and other employment barriers:**  
released 07/2023,  
~~180~~
- Record of seeking work:**
  - The local job market:** \_\_\_\_\_
  - The availability of employers willing to hire the Obligor:** \_\_\_\_\_
  - The prevailing earnings level in the local community:** \_\_\_\_\_
- Any other relevant background factors in this case:** \_\_\_\_\_

carpenter

was going to get CDL EXHIBIT B

\$ w/c 11.25 x 40  
\$97.50 1950 x 16%  
GMT 3/20

# Custodian Financial Audit (part 1 of 2)

Run Date: 12/05/2023

Run Time: 07.43 AM

NCP Name: GRIFFIN, MICHAEL, KING

Case ID: 3200252618

Office: 21

CST Name: GRIFFIN, PATRICIA, JUNE

Docket#: 12-UR-0042

Fips:

Prepared By: MCCOY, LISSETTE

Prepared By Date: 12/05/2023

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	
1	10/01/2022	J	0.00	0.00	0.00	0.00	10,435.28	10,435.28	1
2	10/01/2022	O	0.00	0.00	0.00	0.00	0.00	10,435.28	2
3	10/31/2022	M	0.00	0.00	0.00	0.00	0.00	10,435.28	3
4	11/01/2022	O	0.00	0.00	0.00	0.00	0.00	10,435.28	4
5	11/30/2022	M	0.00	0.00	0.00	0.00	0.00	10,435.28	5
6	12/01/2022	O	0.00	0.00	0.00	0.00	0.00	10,435.28	6
7	12/31/2022	M	0.00	0.00	0.00	0.00	0.00	10,435.28	7
8	01/01/2023	O	0.00	0.00	0.00	0.00	0.00	10,435.28	8
9	01/31/2023	M	0.00	0.00	0.00	0.00	0.00	10,435.28	9
10	02/01/2023	O	0.00	0.00	0.00	0.00	0.00	10,435.28	10
11	02/28/2023	M	0.00	0.00	0.00	0.00	0.00	10,435.28	11
12	03/01/2023	O	0.00	0.00	0.00	0.00	0.00	10,435.28	12
13	03/31/2023	M	0.00	0.00	0.00	0.00	0.00	10,435.28	13
14	04/01/2023	O	0.00	0.00	0.00	0.00	0.00	10,435.28	14
15	04/30/2023	M	0.00	0.00	0.00	0.00	0.00	10,435.28	15
16	05/01/2023	O	0.00	0.00	0.00	0.00	0.00	10,435.28	16
17	05/31/2023	M	0.00	0.00	0.00	0.00	0.00	10,435.28	17
18	06/01/2023	O	0.00	0.00	0.00	0.00	0.00	10,435.28	18
19	06/30/2023	M	0.00	0.00	0.00	0.00	0.00	10,435.28	19
20	07/01/2023	O	0.00	0.00	0.00	0.00	0.00	10,435.28	20
21	07/31/2023	M	0.00	0.00	0.00	0.00	0.00	10,435.28	21
22	08/01/2023	O	90.00	0.00	90.00	90.00	0.00	10,435.28	22
23	08/09/2023	P	0.00	156.00	-90.00	0.00	-66.00	10,369.28	23
24	08/31/2023	M	0.00	0.00	0.00	0.00	0.00	10,369.28	24
25	09/01/2023	O	90.00	0.00	90.00	90.00	0.00	10,369.28	25
26	09/07/2023	P	0.00	156.00	-90.00	0.00	-66.00	10,303.28	26
27	09/30/2023	M	0.00	0.00	0.00	0.00	0.00	10,303.28	27
28	10/01/2023	O	90.00	0.00	90.00	90.00	0.00	10,303.28	28
29	10/11/2023	P	0.00	162.00	-90.00	0.00	-72.00	10,231.28	29
30	10/31/2023	M	0.00	0.00	0.00	0.00	0.00	10,231.28	30
<b>Totals</b>			\$270.00	\$474.00	\$0.00	\$0.00	\$0.00	\$10,231.28	

Total Unadjudicated: \$0.00

Total Adjudicated: \$10,231.28

Total Arrears: \$10,231.28

131 C



# Custodian Financial Audit (part 2 of 2)

Run Date: 12/05/2023

Run Time: 07.43 AM

NCP Name: GRIFFIN, MICHAEL, KING

Case ID: 3200252618

Office: 21

CST Name: GRIFFIN, PATRICIA, JUNE

Docket#: 12-UR-0042

Fips:

Prepared By: MCCOY, LISSETTE

Prepared By Date: 12/05/2023

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			
				Adjustment Amount	Running Balance	Adjustment Amount	Running Balance	Adjustment Amount	Running Balance	Adjustment Amount	Running Balance	Adjustment Amount	Running Balance		
1	10/01/2022	J	0.00	0.00	0.00	0.00	0.00	0.00	548.07	548.07	0.00	0.00	0.00	0.00	1
2	10/01/2022	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	2
3	10/31/2022	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	3
4	11/01/2022	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	4
5	11/30/2022	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	5
6	12/01/2022	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	6
7	12/31/2022	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	7
8	01/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	8
9	01/31/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	9
10	02/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	10
11	02/28/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	11
12	03/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	12
13	03/31/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	13
14	04/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	14
15	04/30/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	15
16	05/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	16
17	05/31/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	17
18	06/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	18
19	06/30/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	19
20	07/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	20
21	07/31/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	21
22	08/01/2023	O	90.00	0.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	22
23	08/09/2023	P	0.00	156.00	0.00	0.00	0.00	0.00	0.00	548.07	0.00	0.00	0.00	0.00	23
24	08/31/2023	M	0.00	0.00	0.00	0.00	88.58	88.58	0.00	548.07	0.00	0.00	0.00	0.00	24
25	09/01/2023	O	90.00	0.00	0.00	0.00	0.00	88.58	0.00	548.07	0.00	0.00	0.00	0.00	25
26	09/07/2023	P	0.00	156.00	0.00	0.00	0.00	88.58	0.00	548.07	0.00	0.00	0.00	0.00	26
27	09/30/2023	M	0.00	0.00	0.00	0.00	88.02	176.60	0.00	548.07	0.00	0.00	0.00	0.00	27
28	10/01/2023	O	90.00	0.00	0.00	0.00	0.00	176.60	0.00	548.07	0.00	0.00	0.00	0.00	28
29	10/11/2023	P	0.00	162.00	0.00	0.00	0.00	176.60	0.00	548.07	0.00	0.00	0.00	0.00	29
30	10/31/2023	M	0.00	0.00	0.00	0.00	87.40	264.00	0.00	548.07	0.00	0.00	0.00	0.00	30
<b>Totals</b>			\$270.00	\$474.00	\$0.00	\$0.00	\$0.00	\$264.00	\$0.00	\$548.07	\$0.00	\$0.00	\$0.00	\$0.00	

<b>Total Unadjudicated Interest on UA:</b>	\$0.00	<b>Total Unadjudicated Penalty:</b>	\$0.00
<b>Total Unadjudicated Interest on AA:</b>	\$264.00	<b>Total Adjudicated Penalty:</b>	\$0.00
<b>Total Adjudicated Interest:</b>	\$548.07	<b>Total Penalty:</b>	\$0.00
<b>Total Interest:</b>	\$812.07		

**Total Arrears:** \$10,231.28  
**Total Interest:** \$812.07  
**Total Penalty:** \$0.00  
**Grand Total:** \$11,043.35

# Custodian Financial Audit (part 1 of 2)

Run Date: 12/05/2023

Run Time: 07.45 AM

NCP Name: GRIFFIN, MICHAEL, KING

Case ID: 3200252618

Office: 21

CST Name: GRIFFIN, PATRICIA, JUNE

Docket#: 12-UR-0042

Fips:

Prepared By: MCCOY, LISSETTE

Prepared By Date: 12/05/2023

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	
1	10/01/2022	J	0.00	0.00	0.00	0.00	0.00	0.00	1
2	10/01/2022	O	0.00	0.00	0.00	0.00	0.00	0.00	2
3	10/31/2022	M	0.00	0.00	0.00	0.00	0.00	0.00	3
4	11/01/2022	O	0.00	0.00	0.00	0.00	0.00	0.00	4
5	11/30/2022	M	0.00	0.00	0.00	0.00	0.00	0.00	5
6	12/01/2022	O	0.00	0.00	0.00	0.00	0.00	0.00	6
7	12/31/2022	M	0.00	0.00	0.00	0.00	0.00	0.00	7
8	01/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	8
9	01/31/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	9
10	02/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	10
11	02/28/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	11
12	03/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	12
13	03/31/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	13
14	04/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	14
15	04/30/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	15
16	05/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	16
17	05/31/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	17
18	06/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	18
19	06/30/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	19
20	07/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	20
21	07/31/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	21
22	08/01/2023	O	18.00	0.00	18.00	18.00	0.00	0.00	22
23	08/09/2023	P	0.00	18.00	-18.00	0.00	0.00	0.00	23
24	08/31/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	24
25	09/01/2023	O	18.00	0.00	18.00	18.00	0.00	0.00	25
26	09/07/2023	P	0.00	18.00	-18.00	0.00	0.00	0.00	26
27	09/30/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	27
28	10/01/2023	O	18.00	0.00	18.00	18.00	0.00	0.00	28
29	10/11/2023	P	0.00	18.00	-18.00	0.00	0.00	0.00	29
30	10/31/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	30
<b>Totals</b>			<b>\$54.00</b>	<b>\$54.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	

Total Unadjudicated: \$0.00

Total Adjudicated: \$0.00

Total Arrears: \$0.00

11 D



# Custodian Financial Audit (part 2 of 2)

Run Date: 12/05/2023

Run Time: 07.45 AM

**NCP Name:** GRIFFIN, MICHAEL, KING  
**CST Name:** GRIFFIN, PATRICIA, JUNE

**Case ID:** 3200252618  
**Docket#:** 12-UR-0042  
**Prepared By:** MCCOY, LISSETTE

**Office:** 21  
**Fips:**  
**Prepared By Date:** 12/05/2023

**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			
				Adjustment Amount	Running Balance	Adjustment Amount	Running Balance	Adjustment Amount	Running Balance	Adjustment Amount	Running Balance	Adjustment Amount	Running Balance		
1	10/01/2022	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	1
2	10/01/2022	O	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
3	10/31/2022	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3
4	11/01/2022	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4
5	11/30/2022	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5
6	12/01/2022	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6
7	12/31/2022	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7
8	01/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8
9	01/31/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9
10	02/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10
11	02/28/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11
12	03/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12
13	03/31/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13
14	04/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14
15	04/30/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15
16	05/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16
17	05/31/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17
18	06/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18
19	06/30/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19
20	07/01/2023	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20
21	07/31/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21
22	08/01/2023	O	18.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22
23	08/09/2023	P	0.00	18.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	23
24	08/31/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24
25	09/01/2023	O	18.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25
26	09/07/2023	P	0.00	18.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26
27	09/30/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27
28	10/01/2023	O	18.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28
29	10/11/2023	P	0.00	18.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29
30	10/31/2023	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30
<b>Totals</b>			\$54.00	\$54.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	

<b>Total Unadjudicated Interest on UA:</b>	\$0.00	<b>Total Unadjudicated Penalty:</b>	\$0.00
<b>Total Unadjudicated Interest on AA:</b>	\$0.00	<b>Total Adjudicated Penalty:</b>	\$0.00
<b>Total Adjudicated Interest:</b>	\$0.00	<b>Total Penalty:</b>	\$0.00
<b>Total Interest:</b>	\$0.00		

**Total Arrears:** \$0.00  
**Total Interest:** \$0.00  
**Total Penalty:** \$0.00  
**Grand Total:** \$0.00



# COUNTY OF ALPINE

Administration

Nichole Williamson- CAO/Health and Human Services Director

Sarah Simis- Assistant CAO to Personnel/Risk Management

## All Employees and Elected Officials HEALTH ELECTION FORM

THE ENROLLMENT FORM INCLUDES MEDICAL, DENTAL AND VISION.

THE COUNTY OFFERS THE PLATINUM, GOLD and SILVER PPO MEDICAL PLANS ONLY.

THE COST FOR MEDICAL, DENTAL AND VISION TO THE EMPLOYEE IS AS FOLLOWS (for 2024 plan year and per current MOUs): **All Employees**

	Check coverage and status selected 2024					
	Platinum Plan		Gold Plan		Silver Plan	
	2024 Employee Share	2024 Employee Share	2024 Employee Share	2024 Employee Share	2024 Employee Share	2024 Employee Share
	(Per Month)	(Per Pay Period)	(Per Month)	(Per Pay Period)	(Per Month)	(Per Pay Period)
Employee (EE) <input type="checkbox"/>	\$507.86 <input type="checkbox"/>	\$253.93	\$418.25 <input type="checkbox"/>	\$209.13	\$64.96 <input type="checkbox"/>	\$32.48
EE +1 <input type="checkbox"/>	\$1199.07 <input type="checkbox"/>	\$599.54	\$1021.91 <input type="checkbox"/>	\$510.96	\$314.30 <input checked="" type="checkbox"/>	\$157.15
EE +2 or more <input type="checkbox"/>	\$1,568.20 <input type="checkbox"/>	\$784.10	\$1337.48 <input type="checkbox"/>	\$668.74	\$414.60 <input type="checkbox"/>	\$207.30

Premiums for the plan are collected one month in advance of the coverage period twice per month. I authorize Alpine County to deduct employee premium cost from my salary every pay period for the coverage selected. In the event of a rate change, I authorize a corresponding change in the amount deducted from my salary without signing a new Salary Redirection Agreement.

Patricia Griffin  
Employee Print Name

[Signature] 10/16/2024  
Employee signature Date

Personnel Office use only

Employee Hire Date or effective date of change in coverage: 1/1/2024

Please deduct \$ 314.30 for pay period ending 12/24/2023 and  
 \$ 157.15 for pay period ending 1/7/2024

Check dates 12/29/2023 & 1/12/2024

Then please deduct \$ 157.15 (half of the employee share of the monthly premium) for every pay period thereafter. Premiums for the plan are collected one month in advance of the coverage

Copy: File  Payroll

FILE

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 1/5/2024

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

By [Signature] Deputy