



OFFICIAL RECORD
LESLIE BOUCHER, RECORDER

E99

RECORDING REQUESTED BY AND RETURN TO

**STATE OF NEVADA
ELKO PROGRAM AREA OFFICE
CHILD SUPPORT ENFORCEMENT
1020 RUBY VISTA DR, #101
ELKO, NV 89801**

**ORDER AFFIRMING AND ADOPTING CHILD SUPPORT MASTER'S
RECOMMENDATION**

***This is a cover page that only the Lincoln County Records Office will use to record the above named document Do not file stamp this cover sheet Only attach this form to the front of the Order and Notice of Entry of Order form that will be given to the recorders office**

received
8/6/18

2018 AUG -6 PM 2:28

LINCOLN COUNTY CLERK

1 CASE NO CV-0834012

2 DEPT NO 2

3
4 SEVENTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA

5 IN AND FOR THE COUNTY OF LINCOLN

6 FAMILY DIVISION

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9 DIVISION OF WELFARE AND SUPPORTIVE
10 SERVICES and
11 STEVEN J RUIZ,

ORDER AFFIRMING AND ADOPTING
CHILD SUPPORT MASTER'S
RECOMMENDATION

12 Obligee,

13 vs

14 APRIL H RUIZ,

Affirmation Pursuant to NRS 239B 030
SSN Does Appear
SSN Does Not Appear AK

15 Obligor

16 The Court, having reviewed the Master's Recommendation prepared by the Court Master
17 on June 15, 2018, and,

18 (x) No timely objection having been filed hereto

19 () The Court, having received the objection(s) thereto, as well as any other papers,
20 testimony and argument related thereto, and good cause appearing

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

23 IT IS THEREFORE ORDERED AS FOLLOWS

24 1 (x) The Obligor is the mother of the following child

25 NAME DOB
26 Harlee Ruiz August 22, 2003

27 2 (x) A Judgment is entered against Obligor for child support arrears in the amount of
28 \$600 00 from May 1, 2017 through March 31, 2018 This shall be paid at \$40 00 a

1 month starting April 1, 2018 until paid in full A Judgment is entered against
2 Obligor for interest on child support arrears in the amount of \$32 79 from May 1,
3 2017 through March 31, 2018 A Judgment is entered against Obligor for penalties
4 on child support arrears in the amount of \$30 00 from May 1, 2017 through March
5 31, 2018

6
7 3 (x) The Obligor shall pay \$316 81 per month in ongoing support beginning April 1,
8 2018 and on the same day each month thereafter until further order of this Court

9 4 (x) The Obligor shall pay \$0 00 per month in ongoing medical cash support beginning
10 April 1, 2018 and on the same day each month thereafter until further order of this
11 Court

12 **All payments MUST be in the form of a cashier's check or money order ONLY. Effective**
13 **August 1, 2000, all child support payments must be payable to State Collection and**
14 **Disbursement Unit (SCaDU) and mailed to SCaDU, P O Box 98950, Las Vegas, NV 89193-**
15 **8950**

16 **NOTICE NO CREDIT WILL BE GIVEN FOR PAYMENTS PAID DIRECTLY**
17 **TO THE OBLIGEE OR THE CHILD**

18 **Additionally, the Obligor MUST place her social security number on each payment**

19 **Effective January 1, 2004, simple interest will accrue on all unpaid child support balances**
20 **for cases with a Nevada controlling order pursuant to NRS 99 040 Interest assessed by a**
21 **judgment of the court prior to January 1, 2004 will be enforced**

22 **A 10% penalty will be assessed on each unpaid installment, or portion thereof, of an**
23 **obligation to pay support for a child, pursuant to NRS 125B 095**

24 **If you pay your child support through income withholding and your full obligation is not**
25 **met by the amount withheld by your employer, you are responsible to pay the difference**
26 **between your court ordered obligation and the amount withheld by your employer directly**
27 **to the state disbursement unit. If you fail to do so you will be subject to the assessment of**
28 **penalties and interest**

YOU MAY AVOID THESE ADDITIONAL COSTS BY MAKING YOUR CURRENT
CHILD SUPPORT PAYMENTS EACH MONTH

3 (x) The Obligor shall provide health insurance, including medical, dental, orthodontic
and ophthalmological coverage for the child if available through her employment
at a reasonable cost, including any group health plan(s) under ERISA, from the
date of this order on and until said child is no longer eligible for said coverage, and
both parties shall cooperate and provide assistance in obtaining payment for health
care services You are required to notify the Child Support Enforcement Office
when health insurance coverage is available or has been terminated

1 Last known mailing address of Obligor Confidential

2 Last known mailing address of child Confidential

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6 (x) Any medical, dental, optical, orthodontic, or any other health-related expense
4 incurred for the benefit of the minor children that is not covered by insurance,
5 including deductibles, co-pays, or other un-reimbursed expenses, shall be equally
6 divided between the parties. The party incurring the cost shall have thirty (30) days
7 to provide documentation of the expense/receipt to the other party, if not tendered
8 within the thirty (30) day period, the Court may consider it as a waiver of
9 reimbursement. At which time the other party shall have thirty (30) days to
reimburse one-half (1/2) the expense, if not paid or disputed in writing within the
thirty (30) day period, the party may be subject to a finding of contempt and
appropriate sanctions

10 7 (x) The Obligor shall notify the State Child Support Office or the District Attorney's
11 Child Support Office of any change of address or employment within ten (10) days

12 8 (x) A wage/income withholding shall be issued starting immediately

13 9 Pursuant to NRS 125B 145 this Order may be reviewed every three (3) years and is subject
14 to future modifications

15 10 Unless a stay of this Order is obtained from District Court, all enforcement procedures
16 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

17 11 If any determination of paternity in this Order is at variance with the child's birth
18 certificate issued in this state, a new birth certificate is to be issued pursuant to NRS
440 325

19 12 The parties shall fill out the attached Court Information Sheet and mail or deliver the same
20 to the Nevada State Division of Welfare and Supportive Services, Child Support
21 Enforcement Program, 1470 College Parkway, Carson City, Nevada 89706-7924 for filing
22 with the court within ten (10) days from the date of this order. The parties shall update this
23 form within ten (10) days of it becoming inaccurate.

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SO ORDERED this 2 day of ^{August} ~~July~~, 2018


HON GARY FAIRMAN
DISTRICT JUDGE
SEVENTH JUDICIAL DISTRICT COURT

