

RICHARD KILGORE,)	
Appellant/Cross-Respondent,)	Case No.: 73977
)	
vs.)	
)	
ELENI KILGORE,)	
Respondent/Cross-Appellant.)	

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Jun 12 2018 03:20 p.m.
Elizabeth A. Brown
Clerk of Supreme Court

Volume 1

Betsy Allen, Esq.
Nevada Bar No. 6878
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P.O. Box 46991
Las Vegas, NV 89144

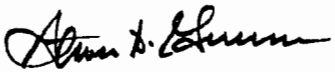
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8/21/2017	Notice Of Entry Of Order Of Findings Of Fact, Conclusions Of Law, And Orders	8	JA-001559



CLERK OF THE COURT

1 **DECD**
2 LOUIS C. SCHNEIDER, ESQ.
3 State Bar No: 009683
4 LAW OFFICE OF LOUIS C. SCHNEIDER, LLC
5 500 South Seventh Street
6 Las Vegas, Nevada 89101
7 (702) 435-2121
8 Attorney for Plaintiff

9 **DISTRICT COURT, FAMILY DIVISION**
10 **CLARK COUNTY, NEVADA**

11 RICHARD SCOTT KILGORE,)

12 Plaintiff,)

13 vs.)

14 ELENI KILGORE,)

15 Defendant.)

CASE NO.: D-12-459171-D

DEPT. NO.: I

HEARING DATE: January 10, 2013

HEARING TIME: 9:30 am

DECREE OF DIVORCE

16 THIS MATTER having come on for hearing on January 10, 2013, with Plaintiff,
17 RICHARD SCOTT KILGORE, appearing by and through his attorney of record, LOUIS C.
18 SCHNEIDER, ESQ., and Defendant, ELENI KILGORE, appearing by and through her attorney of
19 record, ROGER GIULIANI, ESQ.

20 The Court being duly advised in the premises, having considered the papers and pleadings
21 on file, the representations of Counsel, the testimony of the parties, the settlement of the parties,
22 and good cause appearing, makes the following FINDINGS:

23 1. That the Court has jurisdiction in the premises, both as to the subject matter
24 thereof as well as the parties hereto, NRS 125.010 et seq;

25 2. That the parties, RICHARD SCOTT KILGORE and ELENI KILGORE, have
26 been, and are now, actual, bona fide residents of the County of Clark, State of Nevada, and have
27 actually domiciled herein for more than six weeks immediately preceding the commencement of
28 this action;

Non-Trial Dispositions:
☐ Other
☐ Dismissed - Want of Prosecution
☐ Involuntary (Statutory) Dismissal
☐ Default Judgment
☐ Transferred
Settled/Withdrawn:
☐ Without Judicial Conf/Hrg
☐ With Judicial Conf/Hrg
☐ By ADR

Trial Dispositions:
☐ Judgment Reached by Trial
☐ Judgment Reached by Settlement
☐ Disposed After Trial
☐ Disposed Before Trial

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DISTRICT COURT
DEPT I

1 3. That the parties were married December 15, 1992 in Las Vegas, Nevada;

2 4. That there are three (3) minor children (ALEXANDRA KILGORE, born August
3 22, 1995; NICHOLAS KILGORE, born June 29, 2000; and RICHARD KILGORE, born June 29,
4 2000) born the issue of this marriage; and to the best of her knowledge, Defendant is not now
5 pregnant;
6

7 5. That the parties are entitled to an absolute Decree of Divorce on the grounds as
8 set forth in the Complaint.

9 **NOW, THEREFORE, IT IS HEREBY ORDERED, ADJUDGED, AND DECREED**
10 that the bonds of matrimony heretofore and now existing between parties, be and the same are
11 hereby wholly dissolved, set aside, and forever held for naught, and that the parties are awarded
12 an absolute and final Decree of Divorce, and each of the parties hereto is hereby restored to the
13 status of a single, unmarried person, with all of the rights and privileges thereof.

14 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that Defendant shall
15 have PRIMARY PHYSICAL CUSTODY of the Parties' daughter, Alexandria Kilgore, with
16 TEENAGE DISCRETION to the daughter for VISITATION.

17 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that the Parties shall
18 share JOINT PHYSICAL CUSTODY of the twin boys on a week on / week off rotation. The
19 Parties shall adhere to the standard court ordered HOLIDAY VISITATION SCHEDULE,
20 attached herein and incorporated into the Decree of Divorce.

21 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that Plaintiff's CHILD
22 SUPPORT is SET at \$1275.00 per month, commencing November 1, 2012, via voluntary wage
23 garnishment. The Plaintiff has paid \$576.00 per month for November and December 2012
24 towards the \$1275.00 per month owed, with a balance owing of \$1398.00. The Plaintiff, as of
25 January 25, 2013 has not paid any of the \$1275.00 child support for January 2013. The parties
26 acknowledge that a Writ of Garnishment shall be immediately issued and served upon the
27 Plaintiff's employer. The Decree of Divorce shall be used as an Order for the issuance of the Writ
28 of Garnishment. The Plaintiff shall complete any and all necessary documentation necessary

1 to effectuate the voluntary garnishment. Until the wage garnishment is in place, Plaintiff shall
2 pay child support by providing money orders to Attorney Giuliani's office to be forwarded to
3 Defendant.

4 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that Child support at
5 \$1275.00 will be paid through 8/31/13; beginning 9/1/13 child support will be paid through the
6 already existing voluntary garnishment via Wesley vs. Foster (if joint custody), or 25% (if primary
7 custody to either parent), plus the additional payment of insurance premiums, currently set at
8 \$193.00 (this amount is also included in the \$1275.00 figure); Each Party will provide their most
9 CURRENT pay stubs to the other by 8/1/13 to make accurate calculations of the exact figures.

10 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that CHILD SUPPORT
11 ARREARS totaling \$1152.00 for the time period prior to November 1, 2012 have already been
12 paid and are no longer at issue.

13 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that the Parties will
14 equally divide any unreimbursed medical expenses using the 30/30 rule; all outstanding medical
15 bills for the minor children shall be re-submitted to the other party via FAMILY WIZARD within
16 30 days of the signing of the Decree of Divorce - each Party will have 30 days from the receipt of
17 the re-submitted bills to reimburse the other Party. Placed on the record at the time of the hearing,
18 counsel for the Defendant handed to counsel for the Plaintiff the resubmission of outstanding
19 medical bills through January 1, 2013 in the total amount of \$2992.49, with Plaintiff's one half
20 amount due and owing to the Defendant within thirty days of January 10, 2013 the amount of
21 \$1496.24, a copy of which was provided to the court as evidence.

22 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that each Party shall
23 keep the vehicle currently in their possession as their sole and separate property, subject to any
24 encumbrance thereon, holding the other harmless from such debt.

25 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that the Parties'
26 retirement accounts shall be divided via Gemma vs. Fondi; there are three retirement accounts
27 that need to be addressed. Marvin Snyder shall prepare and complete the QDRO s with each Party
28

1 paying one half of the expenses. All three QDRO s must be complete within 90 days of the filing
2 of the Decree of Divorce. Mr. Snyder shall inquire about Plaintiff s military retirement, with
3 regard to its value, prior to the preparation of the QDRO. The Parties agree that a military QDRO
4 or similar instrument shall be prepared for purposes of dividing the community interest in
5 Plaintiff's retirement. If it is determined that there is a value of zero in the Plaintiff's military
6 retirement, then Defendant shall pay for the entire expense of that QDRO. However, in the event
7 there is a community interest in Plaintiff's military retirement, regardless of the amount, then
8 Plaintiff shall pay for the entire expense of that QDRO.

9 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that the parties shall
10 divide any and all community property via an A/B list. Defendant shall prepare an A/B list within
11 five days from the filing of the Decree of Divorce and Plaintiff shall choose which list he wants
12 within five days of receiving the list. Defendant, upon Plaintiff choosing which list, shall have ten
13 days to arrange movers and retrieve her items, with the residence being made available to her
14 during that ten day time period. Both Parties, pursuant to the Joint Preliminary Injunction, are
15 admonished and must immediately cease from disposing of any community property.

16 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that pursuant to
17 agreement between the Parties, the following items will not be included on the A/B list, and shall
18 be distributed as follows: - Defendant is awarded one (1) golf cart, three (3) junior dragsters, and
19 one (1) motorcycle, currently in the possession of Charles Payne. - Plaintiff is awarded two (2)
20 ATV's, three (3) dirtbikes, one (1) motorcycle, one canoe, and the Jacuzzi that were in his
21 possession. Special note is made that the junior dragsters are for the use and enjoyment of the
22 children, and when used by the children while with Plaintiff, Plaintiff will ensure the dragsters are
23 returned to Defendant on the same day they are utilized.

24 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that in exchange for the
25 value of the two vehicles that were sold by Plaintiff and the proceeds retained by him, Plaintiff
26 shall bear the costs of preparing the Decree of Divorce and all subsequent documents, with
27 Attorney Giuliani reviewing and signing off on all pleadings/interlocutory pleadings prior to
28

1 submission.

2 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that the parties shall
3 equally divide any monies owed to the IRS prior to and including tax year 2011. The Parties shall
4 each be responsible for their own returns, filed separately, in 2012. Any tax liability either party
5 assumes for 2012 shall be the responsibility of the party incurring that liability. As well, should
6 either Party be entitled to a refund, that refund shall be retained by the Party receiving the refund.
7 Additionally noted is the letter received by Defendant indicating and additional tax debt of
8 \$2500.00, to be addressed as follows: - If Defendant can demonstrate that the liability was
9 incurred by the Plaintiff, Plaintiff shall be responsible for payment of this additional debt. If
10 Plaintiff can demonstrate that the liability was incurred by Defendant, Defendant shall be
11 responsible for payment of this additional debt. If it is found that both Parties are responsible for
12 the additional debt, the cost will be split evenly between the Parties. The Court will retain
13 jurisdiction regarding this debt.

14 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that both parties waive
15 any claim for ALIMONY.

16 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that the Parties shall file
17 their 2012 tax returns separately. Plaintiff shall claim the minor child Richard Jr. and Defendant
18 shall claim the minor children Alexandria and Nick each and every year the children can legally
19 be claimed for tax purposes.

20 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that the parties each
21 have family pets in their respective possessions. Each will be awarded the pets they currently have
22 and are responsible for all costs associated with their respective pets

23 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that the parties shall
24 each pay one half of all agreed upon extracurricular activities for the minor children, including
25 uniforms and necessary safety equipment. Football for the twins is deemed an agreed upon
26 activity.

27 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that the items belonging
28

1 to the minor child Alexandria including her furniture, television, three boxes of doll collection,
2 and clothing will not be listed on the A/B list. Alexandria will pick up her furniture and clothing
3 at the time the items from the A/B list are retrieved.

4 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that there are two
5 collection notices from Quantum Collections that have been addressed. The Parties are equally
6 responsible for the debt owed on these accounts. Defendant has already remitted her one half of
7 the amount owed. The remaining balance on the two accounts is the sole responsibility of
8 Plaintiff.

9 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that the two additional
10 collection accounts totaling approximately \$1700.00 from Quantum Collections regarding debt
11 from pet-related expenses shall be split equally between the parties. Defendant has indicated that
12 she has already remitted her one half of the amount owed. Subject to proof of Defendant's claim
13 of payment, the remaining balance on these accounts shall be the sole responsibility of Plaintiff.
14 The Court shall retain jurisdiction over this item

15 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that each party shall
16 bear their own ATTORNEY'S FEES and COSTS.

17 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that Defendant shall
18 retain the last name Kilgore.

19 **IT IS FURTHER ORDERED, ADJUDGED AND DECREED** that both parties
20 acknowledged concurrence with the settlement terms.

21
22 **NOTICE IS HEREBY GIVEN** of the following provisions of NRS 125.510(6):

23 PENALTY FOR VIOLATION OF ORDER: THE ABDUCTION, CONCEALMENT OR
24 DETENTION OF A CHILD IN VIOLATION OF THIS ORDER IS PUNISHABLE AS A
25 CATEGORY D FELONY AS PROVIDED IN NRS 193.130. NRS 200.359 provides that
26 every person having a limited right of custody to a child or any parent having no right of
27 custody to the child who willfully detains, conceals or removes the child from a parent,
28

1 guardian or other person having lawful custody or a right of visitation of the child in
2 violation of an order of this court, or removes the child from the jurisdiction of the court
3 without the consent of either the court or all persons who have the right to custody or
4 visitation is subject to being punished for a category D felony as provided in NRS
5 193.130.

6
7 **NOTICE IS HEREBY GIVEN** that the terms of the Hague Convention of October 25,
8 1980, adopted by the 14th Session of the Hague Conference on Private International Law apply if
9 a parent abducts or wrongfully retains a child in a foreign country. The parties are also put on
10 notice of the following provisions in NRS 125.510(8):

11 If a parent of the child lives in a foreign country or has significant commitments in
12 a foreign country:

13 (a) The parties may agree, and the court shall include in the order for custody of
14 the child, that the United States is the country of habitual residence of the child for
15 the purposes of applying the terms of the Hague Convention as set forth in
16 subsection 7.

17
18 (b) Upon motion of one of the parties, the court may order the parent to post a
19 bond if the court determines that the parent poses an imminent risk of wrongfully
20 removing or concealing the child outside the country of habitual residence. The
21 bond must be in an amount determined by the court and may be used only to pay
22 for the cost of locating the child and returning him to his habitual residence if the
23 child is wrongfully removed from or concealed outside the country of habitual
24 residence. The fact that a parent has significant commitments in a foreign country
25 does not create a presumption that the parent poses an imminent risk of wrongfully
26 removing or concealing the child.

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NOTICE IS HEREBY GIVEN of the following provisions of NRS 125C.200:

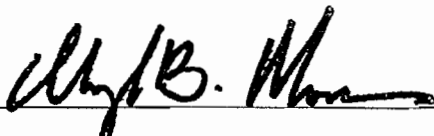
If custody has been established and the custodial parent intends to move his residence to a place outside of this state and to take the child with him, he must, as soon as possible and before the planned move, attempt to obtain the written consent of the noncustodial parent to move the child from this state. If the noncustodial parent refuses to give that consent, the custodial parent shall, before he leaves this state with the child, petition the court for permission to move the child. The failure of a parent to comply with the provisions of this section may be considered as a factor if a change of custody is requested by the noncustodial parent.

NOTICE IS HEREBY GIVEN that they are subject to provisions of NRS 31A and NRS 125.450 regarding the collection of delinquent child support payments.

IT IS SO ORDERED.

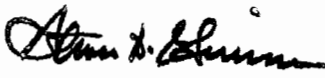
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DATED this _____ day of _____, 2013.



DISTRICT COURT JUDGE, FAMILY DIVISION *UR*

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VERIFICATION

STATE OF NEVADA)
)ss.
COUNTY OF CLARK)

RICHARD SCOTT KILGORE being first duly sworn, deposes and says that: I am the Plaintiff in the above-entitled action. I have read the foregoing **DECREE OF DIVORCE**, know the contents thereof, and the same are true of my own knowledge, except as to any matters therein stated upon information and belief and as to those matters, I believe them to be true and approve such **DECREE OF DIVORCE**, as already binding, placed on the record and entered at the hearing on January 10, 2013.


RICHARD SCOTT KILGORE

SUBSCRIBED and SWORN to before me
this 21 day of Feb., 2013.


NOTARY PUBLIC



VERIFICATION

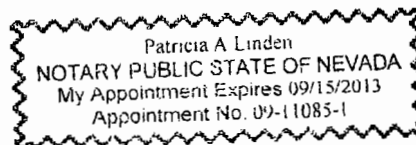
STATE OF NEVADA)
)ss.
COUNTY OF CLARK)

ELENI KILGORE being first duly sworn, deposes and says that: I am the Defendant in the above-entitled action. I have read the foregoing **DECREE OF DIVORCE**, know the contents thereof, and the same are true of my own knowledge, except as to any matters therein stated upon information and belief and as to those matters, I believe them to be true and approve such **DECREE OF DIVORCE**, as already binding, placed on the record and entered at the hearing on January 10, 2013.


ELENI KILGORE

SUBSCRIBED and SWORN to before me
this 27 day of Feb., 2013.


NOTARY PUBLIC

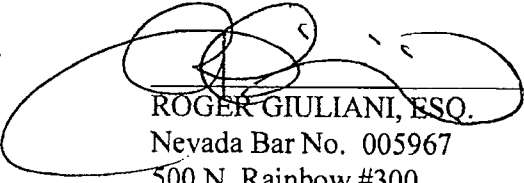


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Respectfully Submitted:

Maurin Kamalani #10907
LOUIS C. SCHNEIDER, ESQ., *FOR*
Nevada Bar No. 009683
500 South Seventh Street
Las Vegas, Nevada 89101
(702) 435-2121
Attorney for Plaintiff

Approved as to Form and Content:


ROGER GIULIANI, ESQ.
Nevada Bar No. 005967
500 N. Rainbow #300
Las Vegas, Nevada 89107
(702) 388-9800
Attorney for Defendant

Standard Holiday Visitation Schedule

All visitations below are from 8:00 a.m. to 8 p.m.

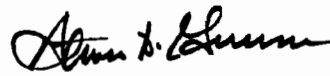
Even Years

<u>Dad</u>	<u>Mom</u>
Martin Luther King Day	President's Day
Easter	Independence Day
Labor Day	Nevada Day
Veteran's Day	Thanksgiving Weekend (Starts 8 p.m. on Wed.)
Winter Break (1 st Half)	Winter Break (2 nd Half)
Children's Birthday	Mother's Day
Father's Day	Mother's Birthday
Father's Birthday	
Spring Break	

Odd Years

<u>Dad</u>	<u>Mom</u>
President's Day	Martin Luther King Day
Independence Day	Easter
Nevada Day	Labor Day
Thanksgiving Weekend (Starts 8 p.m. on Wed.)	Veteran's Day
Winter Break (2 nd Half)	Winter Break (1 st Half)
Father's Day	Children's Birthday
Father's Birthday	Mother's Day
	Mother's Birthday
	Spring Break

For Winter Break and Spring Break, the timeshare commences on Friday when school lets out before the break and ends on Sunday at 6:00 p.m. before school re-commences, unless the parties agree otherwise.


CLERK OF THE COURT

NK
MOT
Name: RICHARD KILGORE
Address: 6509 COLUMBIA FALLS CT
LV NV 89149
Telephone: (702) 325-3518
Email Address: LYMARSHAL2@GMAIL.COM
In Proper Person

DISTRICT COURT
CLARK COUNTY, NEVADA

RICHARD KILGORE
Plaintiff

vs.

ELENI KILGORE
Defendant

CASE NO.: D12-459171-D
DEPT: 1

DATE OF HEARING: 12-09-2014
TIME OF HEARING: 9:30 a.m.

Oral Argument Requested: ☐ Yes ☐ No

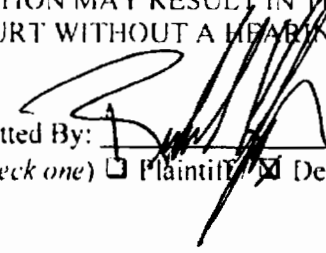
MOTION AND NOTICE OF MOTION FOR ORDERS TO MODIFY CHILD CUSTODY,
VISITATION, AND/OR CHILD SUPPORT

TO: Name of Opposing Party and Party's Attorney, if any. Eleni Kilgore

PLEASE TAKE NOTICE that a hearing on this motion will be held on the date and time
above before the Eighth Judicial District Court - Family Division located at: (☒ check one)

- ☒ The Family Courts and Services Center, 601 N. Pecos Road Las Vegas, Nevada 89101.
☐ The Regional Justice Center, 200 Lewis Avenue Las Vegas, Nevada 89101.
☐ The Child Support Center of Southern Nevada, 1900 E. Flamingo Rd #100, LV NV 89119.

NOTICE: YOU ARE REQUIRED TO FILE A WRITTEN RESPONSE TO THIS MOTION
WITH THE CLERK OF THE COURT AND TO PROVIDE THE UNDERSIGNED WITH A
COPY OF YOUR RESPONSE WITHIN 10 DAYS OF THE RECEIPT OF THIS MOTION.
FAILURE TO FILE A WRITTEN RESPONSE WITH THE CLERK OF COURT WITHIN 10
DAYS OF YOUR RECEIPT OF THIS MOTION MAY RESULT IN THE REQUEST FOR
RELIEF BEING GRANTED BY THE COURT WITHOUT A HEARING PRIOR TO THE
SCHEDULED HEARING DATE.

Submitted By: 
(☒ check one) ☐ Plaintiff ☒ Defendant In Proper Person



MOTION

(Your name) RICHARD KUGORE, in Proper Person, moves this Court for an Order modifying child custody, visitation, and/or child support.

POINTS AND AUTHORITIES
LEGAL ARGUMENT

(☒ you must check and comply with the box below)

- ☐ I understand that I must file my Financial Disclosure Form to support my request to modify child support, and that failure to file my Financial Disclosure Form may result in my request being denied.

The court may modify or vacate its child custody order at any time. NRS 125.510. When considering whether to modify physical custody, the court must determine what type of physical custody arrangement exists between the parties. The court must look at the actual physical custody timeshare the parties are exercising to determine what custody arrangement is in effect. Rivero v. Rivero, 125 Nev. 410, 430, 216 P.3d 213, 227 (2009).

Different tests apply to modify custody depending on the current custody arrangement. Joint physical custody may be modified or terminated if it is in the best interest of the child. NRS 125.510; Truax v. Truax, 110 Nev. 473, 874 P.2d 10 (1994). Primary physical custody may be modified only when "(1) there has been a substantial change in circumstances affecting the welfare of the child, and (2) the modification would serve the child's best interest." Ellis v. Carucci, 123 Nev. 145, 153, 161 P.3d 239, 244 (2007).

A child support order must be reviewed by the court every three years upon request of a parent or guardian. A child support order may be reviewed at any time on the basis of changed circumstances. A change in 20% or more in the gross monthly income of a person subject to a child support order shall be deemed changed circumstances. NRS 125B.145. Any inaccuracy or falsification of financial information which results in an inappropriate award of child support is also grounds to modify child support. NRS 125B.080.

FACTS AND ARGUMENT

A. Request to Modify Child Custody and/or Visitation

1. **Current Custody Order.** The current custody order was filed on (date) _____.

2. **Modification of Legal Custody.** (☒ check one)

☒ Legal custody should not be changed. (*STOP. Go to Section 3*)

☐ Legal custody should be changed. Listed below are the current legal custody order and the legal custody order I would like the Court to order.

Child's Name:	Date of Birth	I Have Now: <input checked="" type="checkbox"/> check one	I Would Like: <input checked="" type="checkbox"/> check one
		<input type="checkbox"/> No legal custody <input type="checkbox"/> Joint legal custody <input type="checkbox"/> Sole legal custody	<input type="checkbox"/> Joint legal custody <input type="checkbox"/> Sole legal custody
		<input type="checkbox"/> No legal custody <input type="checkbox"/> Joint legal custody <input type="checkbox"/> Sole legal custody	<input type="checkbox"/> Joint legal custody <input type="checkbox"/> Sole legal custody
		<input type="checkbox"/> No legal custody <input type="checkbox"/> Joint legal custody <input type="checkbox"/> Sole legal custody	<input type="checkbox"/> Joint legal custody <input type="checkbox"/> Sole legal custody
		<input type="checkbox"/> No legal custody <input type="checkbox"/> Joint legal custody <input type="checkbox"/> Sole legal custody	<input type="checkbox"/> Joint legal custody <input type="checkbox"/> Sole legal custody

a. It is in the best interest of the child(ren) to change legal custody because (*explain*):

3. **Modification of Physical Custody.** (☒ check one)

☒ Physical custody should not be changed. (*STOP. Go to Section 4*)

☐ Physical custody should be changed. Listed below are the current physical custody order and the physical custody order I would like the Court to order.

Child's Name:	Date of Birth	I Have Now: <input checked="" type="checkbox"/> check one	I Would Like: <input checked="" type="checkbox"/> check one
		<input type="checkbox"/> No visitation <input type="checkbox"/> Visitation only <input type="checkbox"/> Joint physical custody <input type="checkbox"/> Primary physical custody <input type="checkbox"/> Sole physical custody	<input type="checkbox"/> Visitation only <input type="checkbox"/> Joint physical custody <input type="checkbox"/> Primary physical custody <input type="checkbox"/> Sole physical custody
		<input type="checkbox"/> No visitation <input type="checkbox"/> Visitation only <input type="checkbox"/> Joint physical custody <input type="checkbox"/> Primary physical custody <input type="checkbox"/> Sole physical custody	<input type="checkbox"/> Visitation only <input type="checkbox"/> Joint physical custody <input type="checkbox"/> Primary physical custody <input type="checkbox"/> Sole physical custody
		<input type="checkbox"/> No visitation <input type="checkbox"/> Visitation only <input type="checkbox"/> Joint physical custody <input type="checkbox"/> Primary physical custody <input type="checkbox"/> Sole physical custody	<input type="checkbox"/> Visitation only <input type="checkbox"/> Joint physical custody <input type="checkbox"/> Primary physical custody <input type="checkbox"/> Sole physical custody
		<input type="checkbox"/> No visitation <input type="checkbox"/> Visitation only <input type="checkbox"/> Joint physical custody <input type="checkbox"/> Primary physical custody <input type="checkbox"/> Sole physical custody	<input type="checkbox"/> Visitation only <input type="checkbox"/> Joint physical custody <input type="checkbox"/> Primary physical custody <input type="checkbox"/> Sole physical custody

a. It is in the best interest of the child(ren) to change physical custody because (explain):

b. **You MUST complete this section if the other party currently has primary physical custody and you want to change the custody order.**

Since the last order, there has been a substantial change in circumstances affecting the welfare of the child(ren). (Explain the substantial changes affecting the children that have happened since the last custody order): _____

4. **Visitation.** (☒ check all that apply)

☒ Visitation should not be changed. (STOP. Go to Section B)

☐ The regular visitation / timeshare should be changed. My proposed new visitation / timeshare schedule is attached as Exhibit 1.

☐ The holiday schedule should be changed. My proposed new holiday schedule is attached as Exhibit 2.

B. Request to Modify Child Support

☐ Not Applicable (☒ check if not applicable, and sign and date page 7)

5. **Current Child Support Order.** (☒ check one)

(Name of party) RICHARD KILBORE currently pays (amount) \$486.00
per month in child support for (number) 2 minor children. I want this order modified.

6. **Public Assistance.** (☒ check one)

☒ I have never received Temporary Assistance for Needy Families (TANF).

☐ I am now or have received Temporary Assistance for Needy Families (TANF) in the past.

7. **Parties' Income.**

The mother's gross monthly income is (insert amount): \$ 5,600⁰⁰ / OR ☐ unknown.

The father's gross monthly income is (insert amount): \$ 0 / OR ☐ unknown.

8. **Reason for Modification.** I want child support modified because: (☒ check all that apply)

☐ Child support should be reset based on the change in custody I am requesting.

☒ The gross monthly income of the person paying child support has changed by more than 20% since the last child support order was entered.

☐ It has been more than three years since child support was last reviewed.

☐ The following child(ren) has/have emancipated (write name(s)):

☐ The current child support order was set based on inaccurate or false information. (give the reason you believe child support was set inaccurately) _____

☐ The parties are not following the custodial schedule on which child support was based: (explain the custodial schedule you have been following): _____

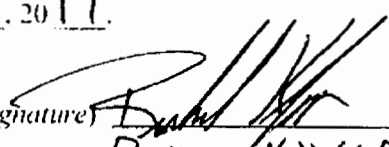
It is in the children's best interest to modify child support because (tell the judge why it is in the children's best interest to change child support): _____

9. Amount Requested. (☒ check one)

- ☐ Child support should be modified so that (name of person who should pay child support) _____ pays (amount) \$ _____ per month in child support.
- ☐ Child support should be set at the statutory minimum of \$100 per month, per child.
- ☒ I'm not sure how much child support should be paid. The judge should set child support.
- ☐ Other (explain how much child support should be ordered and how you came up with the amount of child support): _____

I respectfully ask the Court to grant me the relief requested above, including an award of attorney's fees if I am able to retain an attorney for this matter, and any other relief the Court finds appropriate.

DATED OCT 20, 2014.

Submitted By: (your signature) 

(print your name) RICHARD KILGORE

DECLARATION IN SUPPORT OF MOTION TO MODIFY CHILD CUSTODY,
VISITATION, AND/OR CHILD SUPPORT


I declare, under penalty of perjury:

1. That I have personal knowledge of the facts contained in this Motion and in this Declaration and I am competent to testify to the same.
2. That the statements in this Motion and Declaration are true and correct to the best of my knowledge.
3. Additional facts to support my requests include: MY EMPLOYMENT WITH THE CITY OF LAS VEGAS ON OCTOBER 14, 2014. THIS WAS DUE TO MY EX-WIFE BENI KILGORE'S BOYFRIEND TIMOTHY L. ROWE FILING A FORMAL COMPLAINT AGAINST ME WITH THE CLV

4. I have attached the following Exhibit(s) to the Motion to support my requests: (*Describe exhibit or write N/A on any blank lines.*)
 - a. NOTICE OF TERMINATION
 - b. _____
 - c. _____
 - d. _____

I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct.

DATED OCT 20, 2014.

Submitted By: (your signature) 

(print your name) RICHARD KILGORE

EXHIBIT 1
REGULAR TIMESHARE / VISITATION

Week	Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.
<i>Sample</i>	Mom Pick up at 11 a.m.	Mom	Dad Pick up after school at 3 p.m.	Dad	Dad	Mom Pick up after school at 3 p.m.	Mom
Week #1							
Week #2							
Week #3							
Week #4							

EXHIBIT 2
HOLIDAY SCHEDULE

Check box if this holiday applies:	Holiday:	Time (circle a.m. or p.m.):	Even Years	Odd Years
<input type="checkbox"/>	New Year's Eve	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	New Year's Day	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Martin Luther King, Jr. Day	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Presidents' Day	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Passover	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Easter	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Memorial Day	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Mother's Day	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Father's Day	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	4 th of July	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Labor Day	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Rosh Hashanah	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Yom Kippur	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Nevada Day	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Halloween	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Veterans Day	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Thanksgiving Day	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad

EXHIBIT 2 Continued

<input type="checkbox"/>	Chanukkah (Days):	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Chanukkah (Days):	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Christmas Eve	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Christmas	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Father's Birthday	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Mother's Birthday	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>	Child's Birthday	From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>		From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad
<input type="checkbox"/>		From: _____ a.m./p.m. To: _____ a.m./p.m.	Mom Dad	Mom Dad

**DANA P. HLAVAC, COURT ADMINISTRATOR
LAS VEGAS MUNICIPAL COURT**

NOTICE OF TERMINATION

TO: Richard S. Kilgore, Municipal Court Marshal
FROM: Dana P. Hlavac, Court Administrator
Las Vegas Municipal Court

In accordance with the authority vested in me under the Las Vegas Municipal Code, Section 3.40.010, which Title and Chapter adopt the Civil Service Rules and Regulations of the City of Las Vegas, Nevada, your employment with the City of Las Vegas is being terminated effective at the close of business on October 13, 2014.

You were previously provided a copy of a Notice of Proposed Disciplinary Action, advising you of the allegations and grounds for disciplinary action. On October 6, 2014, you met with me and had the opportunity to respond to the grounds for disciplinary action.

As a result of the above, it has been determined that there is no justifiable reason to preclude this action; therefore, you are being terminated.

Grounds for this action are violation of the Civil Service Rules of the City of Las Vegas and violation of Article 14 (O), [Just Cause,] of the contract between the City of Las Vegas and the Las Vegas Police Protective Association, Metro Inc. Specifically, the rules allegedly violated are:

Civil Service Rules: Chapter VI, Section 4a.(2), Violation of the Civil Services Rules of the city of Las Vegas or the rules and regulations as are prescribed by the City Manager or a

department director; Section 4a.(8), Improper action by the employee in his/her official capacity; Section 4a.(10), "cause," said cause being conduct unbecoming an employee and misuse of city property; and violation of Article 14 (O) Just Cause – The City will only discipline employees for Just Cause.

This action stems from one or more of the following:

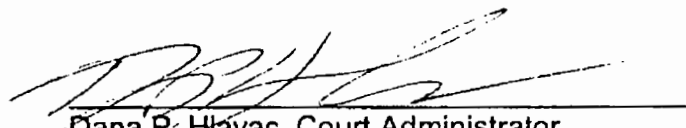
1. That on September 8, 2014, a formal complaint was received in the Human Resources Department from a citizen, Timothy L. Rowe.
2. That the complaint contends you behaved in a threatening and harassing manner towards Mr. Rowe on September 3, 2014 at the Centennial High School Open House and again on September 5, 2014 at the Centennial varsity football game.
3. That the complaint also states that Mr. Rowe is the boyfriend of your ex-wife Eleni Kilgore, with whom you have children who attend Centennial High School.
4. That as a result of the complaint, an investigation was launched. You were subsequently interviewed on September 30, 2014.
5. That during your interview, you admitted that your behavior on September 3, 2014 at the Centennial Open House was inappropriate and your conduct was unbecoming.
6. That in addition, during the course of the investigation, it was discovered that a CJIS/JLINK inquiry was made on Timothy Rowe on April 30, 2013 using the PMDC CAD application on the city issued laptop in your work vehicle. That each laptop receives a unique JLINK terminal ID and the ID used to perform the inquiry (LMVC921J) was assigned to your city issued laptop.
7. That during the interview, you admitted to making the inquiry.

8. That there was no business necessity for the CJIS/JLINK inquiry of your ex-wife's boyfriend.
9. That on March 28, 2013, you signed and acknowledged the conditions of the Las Vegas Municipal Court Criminal Justice System Security and Dissemination Agreement.
10. That your actions above bring discredit to the Las Vegas Municipal Court.

In addition to the above stated grounds, the City considered your overall employment history with the City of Las Vegas and to arrive at a decision in this matter. In light of all of the information available to me, I do not find any of the issues, or allegations you raised at our meeting to have sufficient credibility to overcome the overwhelming weight of the facts indicating the truth of the allegations set forth above.

You are advised that should you wish to appeal this action, you must submit a written grievance to the Director of Human Resources within fourteen (14) calendar days of receipt of this Notice. The Director of Human Resources shall forward the grievance to the City Manager for a Response.

Failure to properly and timely file the aforementioned written grievance shall constitute a waiver of your appeal rights, which shall make the action ordered herein final and binding on all parties.



Dana P. Hlavac, Court Administrator
Las Vegas Municipal Court

SERVED this 14 day of October 2014 at 11:00 AM/PM.

BY: [Signature]

RECEIPT of the preceding Notice of Termination is hereby acknowledged.

[Signature]
Signature of Employee

14TH OCT 2014
Date

MOFI

DISTRICT COURT
FAMILY DIVISION
CLARK COUNTY, NEVADA

RICHARD KILGORE
Plaintiff/Petitioner

-vs-

ELENI KILGORE
Defendant/Respondent

CASE NO. D12-459171D

DEPT. 1

**FAMILY COURT MOTION/OPPOSITION
FEE INFORMATION SHEET (NRS 19.0312)**

Party Filing Motion/Opposition: ☒ Plaintiff/Petitioner ☐ Defendant/Respondent

MOTION FOR/OPPOSITION TO _____

Notice

**Motions and Oppositions to
Motions filed after entry of
final Decree or Judgment
(pursuant to NRS 125,
125B & 125C)
are subject to the Re-open
Filing Fee of \$25.00, unless
specifically excluded.
(See NRS 19.0312)**

Excluded Motions/Oppositions

- ☐ Motions filed before final Divorce/Custody Decree entered
(Divorce/Custody Decree NOT final)
- ☒ Child Support Modification ONLY
- ☐ Motion/Opposition For Reconsideration (Within 10 days of Decree)
Date of Last Order _____
- ☐ Request for New Trial (Within 10 days of Decree)
Date of Last Order _____
- ☐ Other Excluded Motion _____
(Must be prepared to defend exclusion to Judge)

NOTE :If no boxes are checked, filing fee **MUST** be paid.

☐ Motion/Opp IS subject to \$25.00 filing fee ☐ Motion/Opp IS NOT subject to filing fee

Date: OCTOBER 21, 2014

RICHARD KILGORE
Printed Name of Preparer

[Signature]
Signature of Preparer

MISC

Name: _____

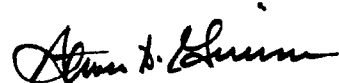
Address: _____

Phone: _____

Email: _____

Attorney for _____

Nevada State Bar No. _____



CLERK OF THE COURT

Judicial District Court
_____, Nevada

<u>RICHARD KILGORE</u> Plaintiff,	Case No. <u>D-12-459171-D</u>
vs. <u>ELENI KILGORE</u> Defendant.	Dept. <u>1</u>

GENERAL FINANCIAL DISCLOSURE FORM

A. Personal Information:

1. What is your full name? (first, middle, last) RICHARD SCOTT KILGORE
2. How old are you? 53
3. What is your date of birth? 04/20/61
4. What is your highest level of education? _____

B. Employment Information:

1. Are you currently employed/self-employed? (☒ check one)

☒ No

☐ Yes

If yes, complete the table below. Attached an additional page if needed.

Date of Hire	Employer Name	Job Title	Work Schedule (days)	Work Schedule (shift times)

2. Are you disabled? (☒ check one)

☐ No

☐ Yes

If yes, what is your level of disability? _____

What agency certified you disabled? _____

What is the nature of your disability? _____

C. Prior Employment: If you are unemployed or have been working at your current job for less than 2 years, complete the following information.

Prior Employer: CITY LAS VEGAS Date of Hire: 4/18/1989 Date of Termination: 10/13/14

Reason for Leaving: TERMINATED

Monthly Personal Income Schedule

A. Year-to-date Income.

As of the pay period ending Oct 17, 14 my gross year to date pay is 78,000⁰⁰

B. Determine your Gross Monthly Income.

Hourly Wage

\emptyset	\times		$=$		\times	52	$=$		\div	12	$=$	\emptyset
Hourly Wage		Number of hours worked per week		Weekly Income		Weeks		Annual Income		Months		Gross Monthly Income

Annual Salary

\emptyset	\div	12	$=$	\emptyset
Annual Income		Months		Gross Monthly Income

C. Other Sources of Income.

Source of Income	Frequency	Amount	12 Month Average
Annuity or Trust Income	\emptyset		
Bonuses	\emptyset		
Car, Housing, or Other allowance:	\emptyset		
Commissions or Tips:	\emptyset		
Net Rental Income:	\emptyset		
Overtime Pay	\emptyset		
Pension Retirement:	\emptyset		
Social Security Income (SSI):	\emptyset		
Social Security Disability (SSD):	\emptyset		
Spousal Support	\emptyset		
Child Support	\emptyset		
Workman's Compensation	\emptyset		
Other:	\emptyset		
Total Average Other Income Received			

Total Average Gross Monthly Income (add totals from B and C above)	\emptyset
--	-------------

D. Monthly Deductions

	Type of Deduction	Amount
1.	Court Ordered Child Support (automatically deducted from paycheck)	
2.	Federal Health Savings Plan	
3.	Federal Income Tax	
4.	Health Insurance Amount for you: _____ For Opposing Party: _____ For your Child(ren): _____	
5.	Life, Disability, or Other Insurance Premiums	
6.	Medicare	
7.	Retirement, Pension, IRA, or 401(k)	
8.	Savings	
9.	Social Security	
10.	Union Dues	
11.	Other: (Type of Deduction)	
Total Monthly Deductions (Lines 1-11)		

Business/Self-Employment Income & Expense Schedule

A. Business Income:

What is your average gross (pre-tax) monthly income/revenue from self-employment or businesses?
\$ _____

B. Business Expenses: Attach an additional page if needed.

Type of Business Expense	Frequency	Amount	12 Month Average
Advertising			
Car and truck used for business			
Commissions, wages or fees			
Business Entertainment Travel			
Insurance			
Legal and professional			
Mortgage or Rent			
Pension and profit-sharing plans			
Repairs and maintenance			
Supplies			
Taxes and licenses (include est. tax payments)			
Utilities			
Other:			
Total Average Business Expenses			

Personal Expense Schedule (Monthly)

A. Fill in the table with the amount of money you spend each month on the following expenses and check whether you pay the expense for you, for the other party, or for both of you.

Expense	Monthly Amount I Pay	For Me <input type="checkbox"/>	Other Party <input type="checkbox"/>	For Both <input type="checkbox"/>
Alimony/Spousal Support	Ø			
Auto Insurance	152.00	✓		
Car Loan/Lease Payment	499.99	✓		
Cell Phone	200.00	✓		✓
Child Support (not deducted from pay)	686.00	✓		
Clothing, Shoes, Etc...	75.00	✓		✓
Credit Card Payments (minimum due)	25.00	✓		
Dry Cleaning	25.00	✓		
Electric	450.00	✓		
Food (groceries & restaurants)	750.00	✓		✓
Fuel	360.00	✓		
Gas (for home)	60.00	✓		
Health Insurance (not deducted from pay)				
HOA	110.00	✓		
Home Insurance (if not included in mortgage)	60.00	✓		
Home Phone	Ø			
Internet/Cable	180.00	✓		
Lawn Care	25.00	✓		
Membership Fees	Ø			
Mortgage/Rent/Lease	800.00	✓		
Pest Control	20.00	✓		
Pets	125.00	✓		
Pool Service	40.00	✓		
Property Taxes (if not included in mortgage)	Ø			
Security	Ø			
Sewer	100.00	✓		
Student Loans	Ø			
Unreimbursed Medical Expense	140.00	✓		
Water	100.00	✓		
Other:	500.00	✓		
Total Monthly Expenses	4,682.99			

Household Information

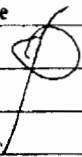
- A. Fill in the table below with the name and date of birth of each child, the person the child is living with, and whether the child is from this relationship. Attached a separate sheet if needed.

	Child's Name	Child's DOB	Whom is this child living with?	Is this child from this relationship?	Has this child been certified as special needs/disabled?
1 st	NICHOLAS KILGORE		50/50	YES	NO
2 nd	RICHARD KILGORE		50/50	YES	NO
3 rd					
4 th					

- B. Fill in the table below with the amount of money you spend each month on the following expenses for each child.

Type of Expense	1 st Child	2 nd Child	3 rd Child	4 th Child
Cellular Phone	50 ⁰⁰	50 ⁰⁰		
Child Care	0	0		
Clothing	200 ⁰⁰	200 ⁰⁰		
Education	50	50		
Entertainment	50 ⁰⁰	50 ⁰⁰		
Extracurricular & Sports	150 ⁰⁰	150 ⁰⁰		
Health Insurance (if not deducted from pay)	65 ⁰⁰	65 ⁰⁰		
Summer Camp Programs	100 ⁰⁰	100 ⁰⁰		
Transportation Costs for Visitation	0	0		
Unreimbursed Medical Expenses	57.50	57.50		
Vehicle	0	0		
Other:				
Total Monthly Expenses	72.50	72.50		

- C. Fill in the table below with the names, ages, and the amount of money contributed by all persons living in the home over the age of eighteen. If more than 4 adult household members attached a separate sheet.

Name	Age	Person's Relationship to You (i.e. sister, friend, cousin, etc...)	Monthly Contribution
			

Personal Asset and Debt Chart

A. Complete this chart by listing all of your assets, the value of each, the amount owed on each, and whose name the asset or debt is under. If more than 15 assets, attach a separate sheet.

Line	Description of Asset and Debt Thereon	Gross Value	Total Amount Owed	Net Value	Whose Name is on the Account? You, Your Spouse/Domestic Partner or Both
1.	2011 FORD F150	\$	- \$17,500 ⁰⁰	= \$	R KILGORE
2.	MEDICAL	\$	- \$3,500 ⁰⁰	= \$	R KILGORE
3.		\$	- \$	= \$	
4.		\$	- \$	= \$	
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10.		\$	- \$	= \$	
11.		\$	- \$	= \$	
12.		\$	- \$	= \$	
13.		\$	- \$	= \$	
14.		\$	- \$	= \$	
15.		\$	- \$	= \$	
Total Value of Assets (add lines 1-15)		\$	- \$	= \$	

B. Complete this chart by listing all of your unsecured debt, the amount owed on each account, and whose name the debt is under. If more than 5 unsecured debts, attach a separate sheet.

Line #	Description of Credit Card or Other Unsecured Debt	Total Amount owed	Whose Name is on the Account? You, Your Spouse Domestic Partner or Both
1.	CAPITAL ONE CREDIT CARD	\$750 ⁰⁰	R KILGORE
2.		\$	
3.		\$	
4.		\$	
5.		\$	
6.		\$	
Total Unsecured Debt (add lines 1-6)		\$	

CERTIFICATION

Attorney Information: Complete the following sentences.

1. I have ~~have not~~ _____ retained an attorney for this case.
2. As of the date of today, the attorney has been paid a total of \$ 0 on my behalf.
3. I have a credit with my attorney in the amount of \$ 0.
4. I currently owe my attorney a total of \$ unknown.
5. I owe my prior attorney a total of \$ 0.

IMPORTANT: Read the following paragraphs carefully and initial each one.

_____ I swear or affirm under penalty of perjury that I have read and followed all instructions in completing this Financial Disclosure Form. I understand that, by my signature, I guarantee the truthfulness of the information on this Form. I also understand that if I knowingly make false statements I may be subject to punishment, including contempt of court.

_____ I have attached a copy of my 3 most recent pay stubs to this form.

_____ I have attached a copy of my most recent YTD income statement/P&L statement to this form, if self-employed.

X I have not attached a copy of my pay stubs to this form because I am currently unemployed.


Signature

20 Oct 14
Date

CERTIFICATE OF SERVICE

I hereby declare under the penalty of perjury of the State of Nevada that the following is true and correct:

That on (date) 21 OCT 2014 service of the General Financial Disclosure Form was made to the following interested parties in the following manner:

☒ Via 1st Class U.S. Mail, postage fully prepaid addressed as follows:

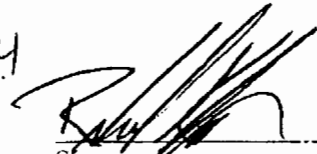
ELENI KILGORE 9149 W. DORRELL LN LV, NV 89149

☐ Via Electronic Service, in accordance with the Master Service List, pursuant to NEFCR 9, to:

☐ Via Facsimile and/or Email Pursuant to the Consent of Service by Electronic Means on file

herein to: _____

Executed on the 21 day of OCTOBER, 2014



Signature


CLERK OF THE COURT

OPCM
ELENI KILGORE,
10151 Dorrell Lane
Las Vegas, Nevada 89166
Telephone: (702) 325-1835
kilgoex@interact.ccsd.net
Defendant in Proper Person

DISTRICT COURT, FAMILY DIVISION
CLARK COUNTY, NEVADA

RICHARD KILGORE,

Plaintiff,

vs.

ELENI KILGORE,

Defendant.

Case No.: D-12-459171-D

Dept No.: I

Date of Hearing: 12/9/14

Time of Hearing: 9:30 A.M.

ORAL ARGUMENT REQUESTED: YES

"NOTICE: YOU ARE REQUIRED TO FILE A WRITTEN RESPONSE TO THIS MOTION/COUNTERMOTION WITH THE CLERK OF THE COURT AND TO PROVIDE THE UNDERSIGNED WITH A COPY OF YOUR RESPONSE WITHIN TEN (10) DAYS OF YOUR RECEIPT OF THIS MOTION/COUNTERMOTION. FAILURE TO FILE A WRITTEN RESPONSE WITH THE CLERK OF THE COURT WITHIN TEN (10) DAYS OF YOUR RECEIPT OF THIS MOTION/COUNTERMOTION MAY RESULT IN THE REQUESTED RELIEF BEING GRANTED BY THE COURT WITHOUT HEARING PRIOR TO THE SCHEDULED HEARING DATE."

**DEFENDANTS OPPOSITION TO PLAINTIFF'S
MOTION TO REVIEW AND MODIFY CHILD SUPPORT
AND**

**DEFENDANT'S COUNTER MOTION FOR AN ORDER TO SHOW CAUSE TO FIND
THE PLAINTIFF IN CONTEMPT OF COURT AND TO REDUCE ARREARS TO
JUDGMENT; MODIFYING PHYSICAL CUSTODY AND AWARDING THE
DEFENDANT PRIMARY PHYSICAL CUSTODY OF THE TWO MINOR CHILDREN,
FOR CHILD INTERVIEWS AND TEENAGE DISCRETION; TO RESOLVE ISSUES
REGARDING THE EXECUTION OF THE QDRO'S FOR DEFENDANT'S
ATTORNEY'S FEES AND COSTS INCURRED HEREIN; AND RELATED MATTERS**

COMES NOW the Defendant, ELENI KILGORE, In Proper Person and moves this
Honorable Court for the following relief:

1. Denying the relief sought by the Plaintiff;

2. Defendant's counter motion for an order to show cause to find the Plaintiff in contempt of court, for sanctions and to reduce arrears to judgment;
3. Modifying physical custody and awarding the Defendant primary physical custody of the parties' two minor children, for child interviews and teenage discretion regarding their visitation with the Plaintiff;
4. To resolve issues regarding the execution of the QDRO'S;
5. For Defendant's attorney's fees and costs incurred herein; and related matters
6. For Defendant's preliminary attorney's fees and costs incurred herein;
7. For such other and further relief as the court deems just and equitable.

This opposition and counter motion is made and based upon all the papers and pleadings on file, the attached affidavit and is made in good faith and not to delay justice.

Dated this 3rd day of November, 2014.

Respectfully submitted:

/s/Eleni Kilgore
ELENI KILGORE.
10151 Dorrell Lane
Las Vegas, Nevada 89166
Telephone: (702) 325-1835
kilgoex@interact.ccsd.net
Defendant in Proper Person

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1 Not only do those circumstances explain why RICHARD was fired but they also illustrate the
2 problems ELENi has encountered dealing with RICHARD since the divorce.

3 RICHARD has always had anger and impulse control issues. His abusive behavior has
4 been escalating since the divorce. For instance, RICHARD has created trouble at the boys'
5 school. Nicholas confided in his teacher who told ELENi that Nicholas is still afraid of his dad
6 because of the scene RICHARD caused. CPS became involved and based on evidence produced
7 by its investigation they informed ELENi that the boys do not want to be with RICHARD
8 however they are too afraid to say anything to RICHARD because they are afraid of him. It was
9 RICHARD's abusive behavior that resulted in the parties' oldest child Alexandria being granted
10 teenage discretion regarding visitation with their father. Not surprisingly, Alexandria, who is
11 now emancipated, has exercised little of that visitation.

14 RICHARD's lack of employment and lack of income now create an unstable living
15 environment for the two minor boys. The only reason RICHARD is not living on the street is the
16 fact that he currently lives in foreclosed house but he will eventually be kicked out of that
17 residence. With no income ELENi has no idea how RICHARD intends to support himself let
18 alone two teenage boys. RICHARD has neglected the children's needs such as failing to ensure
19 they get their homework done. RICHARD does not even have a working internet service or a
20 computer in his home so the children can complete their homework when they are with him.
21 RICHARD has also neglected the children's medical needs (see medical records attached hereto
22 as **Exhibit A**). Indeed ELENi has been solely responsible to see to the children's medical care
23 and treatment. She has incurred a substantial amount of copayments but RICHARD has refused
24 to reimburse her for his share of these uncovered medical costs (see medical bills attached hereto
25 as **Exhibit B**). RICHARD has also refused to pay for his share of the boys' participation in
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1 football and other activities. ELENi has paid \$1,650.00 for the boys' participation in football
2 and one summer of wrestling.

3 On a separate issue, there are three retirement accounts that were addressed in the Decree.
4 Court ordered the parties to use Marvin Snyder to prepare and complete the QDRO s with each
5 party paying one half of the expenses. All three QDRO s must be completed within 90 days of
6 the filing of the Decree of Divorce. Mr. Snyder shall inquire about RICHARD's s military
7 retirement, with regard to its value, prior to the preparation of the QDRO. The parties agreed
8 that a military QDRO or similar instrument shall be prepared for purposes of dividing the
9 community interest in this retirement account and in that event ELENi shall pay for the QDRO.
10 However, in the event there is a community interest in RICHARD's military retirement,
11 regardless of the amount, then RICHARD shall pay for the QDRO. To date only one QDRO has
12 been prepared.

13 **II. ANALYSIS AND ARGUMENT**

14 **1. OPPOSITION TO RICHARD'S REQUEST TO MODIFY CHILD SUPPORT**

15 **NRS 125B.145 Review and modification of order for support: Request for review;**
16 **jurisdiction; notification of right to request review.**

17 1. An order for the support of a child must, upon the filing of a request for review by:

18 (a) The Welfare Division of the Department of Human Resources, its designated
19 representative or the district attorney, if the Welfare Division or the district attorney has
20 jurisdiction in the case; or

21 (b) A parent or legal guardian of the child,
22 shall be reviewed by the Court at least every 3 years pursuant to this section to determine
23 whether the order should be modified or adjusted. Each review conducted pursuant to this
24 section must be in response to a separate request.

25 2. If the Court:

26 (a) Does not have jurisdiction to modify the order, the Court may forward the request
27 to any Court with appropriate jurisdiction.

28 (b) Has jurisdiction to modify the order and, taking into account the best interests of
the child, determines that modification or adjustment of the order is appropriate, the Court shall
enter an order modifying or adjusting the previous order for support in accordance with the
requirements of NRS 125B.070 and 125B.080.

3. The Court shall ensure that:

1 (a) Each person who is subject to an order for the support of a child is notified, not
2 less than once every 3 years, that he may request a review of the order pursuant to this section; or

3 (b) An order for the support of a child includes notification that each person who is
4 subject to the order may request a review of the order pursuant to this section.

5 4. An order for the support of a child may be reviewed at any time on the basis of
6 changed circumstances. For the purposes of this subsection, a change of 20 percent or more in
7 the gross monthly income of a person who is subject to an order for the support of a child shall
8 be deemed to constitute changed circumstances requiring a review for modification of the order
9 for the support of a child.

10 5. As used in this section:

11 (a) "Gross monthly income" has the meaning ascribed to it in NRS 125B.070.

12 (b) "Order for the support of a child" means such an order that was issued or is being
13 enforced by a Court of this State.

14 Pursuant to NRS125B.145, the district Court must review a support order every three
15 years. The Court may also review a support order upon a showing of changed circumstances.
16 The Nevada Supreme Court has held that because the term "may" is discretionary, the district
17 Court has discretion to review a support order based on changed circumstances but is not
18 required to do so. However, a change of 20 percent or more in the obligor parent's gross
19 monthly income requires the Court to review the support order. Although these provisions
20 indicate when the review of a support order is mandatory or discretionary, they do not require the
21 Court to modify the order upon the basis of these mandatory or discretionary reviews. In
22 summary, although a party need not show changed circumstances for the district Court to review
23 a support order after three years, changed circumstances are still required for the district Court to
24 modify the order and the district Court must also consider the best interests of the child and
25 determine whether it is appropriate to modify the order. *Rivero v. Rivero*, 216 P.3d 213 (2009).

26 RICHARD is only unemployed by virtue of circumstances that he alone created. He is
27 the one who violated the law and engaged in an unauthorized background check on ELENI's
28 boyfriend, which led to RICHARD's dismissal. ELENI respectfully submits that RICHARD
should not reap the benefit of his illegal behavior. The fact remains that RICHARD is able

1 bodied and certainly capable of working up to his potential and fully contributing to the support
2 of the minor children. ELENi respectfully submits that the foregoing circumstances indicate that
3 RICHARD is willfully unemployed pursuant to NRS125B.080(8)¹. The only reason he no
4 longer earns as much as he did is due to his voluntary decision to violate the rules and
5 restrictions governing his conduct is a police officer. In the addressing the issue of willful
6 underemployment the Nevada Supreme Court has held that:

8 "....where evidence of willful under-employment preponderates, a presumption will arise
9 that such underemployment is for the purpose of avoiding support. Once this
10 presumption arises, the burden of proving willful underemployment for reasons other
11 than avoidance of a support obligation will shift to the supporting parent." *Minear v.*
Minear, 107 Nev. 495, 814 P.2d 85 (1991)

12 In this case the preponderance of the evidence indicates that RICHARD voluntarily left
13 his job even though it was available to him. Instead he now has a job that he claims has resulted
14 in a decrease in income. There is ample evidence to indicate that RICHARD is being
15 opportunistic and is trying to take advantage of firing to eliminate his support obligation and
16 even obtain child support from ELENi. Pursuant to *Minear, supra*, RICHARD has the burden of
17 proving otherwise. RICHARD should therefore found to be willfully unemployed and his child
18 support payment should remain at \$1,275.00 per month.

20 III. ELENi'S COUNTER MOTION

21 1. MODIFICATION OF PHYSICAL CUSTODY; CHILD INTERVIEWS; 22 TEENAGE DISCRETION

23 **NRS125.510. Orders: modification or termination; form; expiration.**

24 1. In determining custody of a minor child in an action brought under this chapter, the
25 court may:

26 (a) During the pendency of the action, at the final hearing or at any time
27 thereafter during the minority of any of the children of the marriage, make such an

28 ¹ NRS125B.080(8). If a parent who has an obligation for support is willfully underemployed or unemployed to
avoid an obligation for support of a child, that obligation must be based upon the parent's true potential earning
capacity.

1 order for the custody, care, education, maintenance and support of the minor children as
2 appears in their best interest;

3 2. Any order for joint custody may be modified or terminated by the court upon
4 the petition of one or both parents or on the court's own motion if it is shown that the
5 best interest of the child requires the modification or termination. The court shall state
6 in its decision the reasons for the order of modification or termination if either parent
7 opposes it.

8 **NRS 125.480 Best interest of child; preferences; considerations of court;**
9 **presumption when court determines that parent or person residing with child is**
10 **perpetrator of domestic violence.**

11 1. In determining custody of a minor child in an action brought under this chapter, the
12 sole consideration of the court is the best interest of the child. If it appears to the court that joint
13 custody would be in the best interest of the child, the court may grant custody to the parties
14 jointly.

15 2. Preference must not be given to either parent for the sole reason that the parent is the
16 mother or the father of the child.

17 3. The court shall award custody in the following order of preference unless in a
18 particular case the best interest of the child requires otherwise:

19 (a) To both parents jointly pursuant to NRS 125.490 or to either parent. If the court does
20 not enter an order awarding joint custody of a child after either parent has applied for joint
21 custody, the court shall state in its decision the reason for its denial of the parent's application.

22 (b) To a person or persons in whose home the child has been living and where the child
23 has had a wholesome and stable environment.

24 (c) To any person related within the third degree of consanguinity to the child whom the
25 court finds suitable and able to provide proper care and guidance for the child, regardless of
26 whether the relative resides within this State.

27 (d) To any other person or persons whom the court finds suitable and able to provide
28 proper care and guidance for the child.

29 4. In determining the best interest of the child, the court shall consider and set forth its
30 specific findings concerning, among other things:

31 (a) The wishes of the child if the child is of sufficient age and capacity to form an
32 intelligent preference as to his custody.

33 (b) Any nomination by a parent or a guardian for the child.

34 (c) Which parent is more likely to allow the child to have frequent associations and a
35 continuing relationship with the noncustodial parent.

36 (d) The level of conflict between the parents.

37 (e) The ability of the parents to cooperate to meet the needs of the child.

38 (f) The mental and physical health of the parents.

39 (g) The physical, developmental and emotional needs of the child.

40 (h) The nature of the relationship of the child with each parent.

41 (i) The ability of the child to maintain a relationship with any sibling.

42 (j) Any history of parental abuse or neglect of the child or a sibling of the child.

43 (k) Whether either parent or any other person seeking custody has engaged in an act of
44 domestic violence against the child, a parent of the child or any other person residing with the
45 child.

1 5. Except as otherwise provided in subsection 6 or NRS 125C.210, a determination by
2 the court after an evidentiary hearing and finding by clear and convincing evidence that either
3 parent or any other person seeking custody has engaged in one or more acts of domestic violence
4 against the child, a parent of the child or any other person residing with the child creates a
5 rebuttable presumption that sole or joint custody of the child by the perpetrator of the domestic
6 violence is not in the best interest of the child. Upon making such a determination, the court shall
7 set forth:

8 (a) Findings of fact that support the determination that one or more acts of domestic
9 violence occurred; and

10 (b) Findings that the custody or visitation arrangement ordered by the court adequately
11 protects the child and the parent or other victim of domestic violence who resided with the child.

12 6. If after an evidentiary hearing held pursuant to subsection 5 the court determines that
13 each party has engaged in acts of domestic violence, it shall, if possible, then determine which
14 person was the primary physical aggressor. In determining which party was the primary physical
15 aggressor for the purposes of this section, the court shall consider:

16 (a) All prior acts of domestic violence involving either party;

17 (b) The relative severity of the injuries, if any, inflicted upon the persons involved in
18 those prior acts of domestic violence;

19 (c) The likelihood of future injury;

20 (d) Whether, during the prior acts, one of the parties acted in self-defense; and

21 (e) Any other factors which the court deems relevant to the determination.

22 In such a case, if it is not possible for the court to determine which party is the primary
23 physical aggressor, the presumption created pursuant to subsection 5 applies to both parties. If it
24 is possible for the court to determine which party is the primary physical aggressor, the
25 presumption created pursuant to subsection 5 applies only to the party determined by the court to
26 be the primary physical aggressor.

27 7. As used in this section, "domestic violence" means the commission of any act
28 described in NRS 33.018.

 When the parties share joint physical custody the standard for a modification of custody
is the "best interest of the child". *Truax v. Truax* 110 Nev. 437; 874 P.2d 10 (1994); (See also,
Mosley v. Figliuzzi, 113 Nev. 51; 930 P.2d 1110 (1997)).

 In the instant case the children's relationship with their father has deteriorated to the point
that they prefer to remain living with ELENI the majority of the time and see their father every
other weekend. The boys have told ELENI that they want to live with her and have made similar
comments to CPS as well. Nevada law allows the Court to take the boys' wishes into
consideration regarding their custody if they are old enough to form an intelligent preference on
the issue. Both boys are 14 years old and certainly old enough and mature enough to describe to

1 the court and the problems they have encountered in relating with their father, his abusive and
2 demeaning behavior, and, the anxiety, distress and alienation they have been experiencing.
3 ELENi would therefore ask that the Court interview the boys outside the presence of both
4 parents to determine their wishes as to their custody and that if they say they want to remain
5 living primarily with ELENi that they be allowed to do so. ELENi would therefore request that
6 the Court award the parties joint legal custody of their children and that she have primary
7 physical custody, and that the boys have teenage discretion to decide when and under what
8 circumstances they have visitation with their father, or, that RICHARD have visitation every
9 other weekend.
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12 **2. ORDER TO SHOW CAUSE**

13 **NRS 22.010 Acts or omissions constituting contempts. The following acts or**
14 **omissions shall be deemed contempts:**

15 3. Disobedience or resistance to any lawful writ, order, rule or process issued by the
16 court or judge at chambers.

17 **NRS 22.110 Imprisonment until performance if contempt is omission to perform an**
18 **act;**

19 1. Except as otherwise provided in subsection 2, when the contempt consists in the
20 omission to perform an act which is yet in the power of the person to perform, he may be
21 imprisoned until he performs it. The required act must be specified in the warrant of
22 commitment.

23 Pursuant to NRS22.010 contempt includes acts of disobedience or resistance to any
24 lawful writ, order, rule or process issued by the court. Any order meant to be the subject of a
25 contempt proceeding must be clear, unambiguous, and set forth the details of compliance in
26 clear, specific terms, so the parties will know what duties or obligations are imposed.
27 *Cunningham v. District Court*, 102 Nev. 551, 729 P.2d 1328 (1986). The moving party carries
28 the burden of demonstrating the other party had the ability to comply with the order, and the
violation of the order was willful. *Rodriguez v. District Court*, 120 Nev. 789, 102 P.3d 41
(2004). The inability of a contemnor to obey the order (without fault on their part) is a complete

1 defense and sufficient to purge them of the contempt charged. *Mccormick v. Sixth Judicial*
2 *District Court*, 67 Nev. 318, 326; 218 P.2d 939 (1950). However, where the contemnors have
3 voluntarily or contumaciously brought on themselves the disability to obey the order or Decree,
4 such a defense is not available; and the burden of proving inability to comply is upon the
5 contemnor. Id.

7 RICHARD has refused to pay his share of certain uncovered medical costs. In addition
8 he has refused to pay his share of the cost of the boys' participation and football and has refused
9 to cooperate with ELENi regarding the QDRO'S. There is no reason for RICHARD's refusal to
10 comply with the court order regarding these matters. He knows what is required of him yet he
11 has deliberately chosen to ignore the court's orders. ELENi is therefore requesting that
12 RICHARD be found in contempt and sanctioned appropriately.

14 ELENi is also requesting that she have judgment against RICHARD in the sum of
15 \$1,180.10 for his share of the uncovered medical costs and \$825.00 for his share of the boys'
16 football expense.

18 3. THE QDRO'S

19 ELENi hired QDRO Masters and paid \$850.00 to have a QDRO prepared for
20 RICHARD's City of Las Vegas retirement benefit (see QDRO and proof of payment attached
21 hereto as **Exhibit C**). RICHARD must be ordered to sign the QDRO or the Court should instruct
22 the clerk to sign on his behalf. RICHARD must also be ordered to reimburse ELENi the sum of
23 \$425.00 for his share of the QDRO and that ELENi have judgment against RICHARD in that
24 amount, together with interest thereon.
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2. In addition to the cases where an allowance is authorized by specific statute, the court may make an allowance of attorney's fees to a prevailing party:

- (a) When he has not recovered more than \$20,000.00; or
- (b) Without regard to the recovery sought, when the court finds that the claim, counterclaim, cross-claim or third party complaint or defense of the opposing party was brought without reasonable ground or to harass the prevailing party.

In a long line of cases, the Nevada Supreme Court has held that attorney's fees may be awarded in a post divorce action pursuant to NRS18.010 and NRS125.150(3). See *Sargeant v. Sargeant*, 88 Nev. 223, 495 P.2d 618 (1972); *Leeming v. Leeming*, 87 Nev. 530, 490 P.2d 342 (1971); *Korbel v. Korbel*, 101 Nev. 140, 696 P.2d 993 (1985); *Fletcher v. Fletcher*, 89 Nev. 540, 516 P.2d 103 (1973); *Halbrook v. Halbrook*, 114 Nev. 1455, 971 P.2d 1262 (1998); and, *Love v. Love*, 114 Nev. 572, 959 P.2d 523 (1998).

-12-

1 requesting that she have an award of attorney's fees and sanctions in the sum of \$5,000.00.

2 WHEREFORE, in the best interests of the minor children, let an order issue granting the
3 relief requested by Defendant.

4 Dated this 3rd day of November, 2014.

5
6 Respectfully submitted:

7
8 /s/Eleni Kilgore

9 ELENI KILGORE.

10 10151 Dorrell Lane

11 Las Vegas, Nevada 89166

12 Telephone: (702) 325-1835

13 kilgoex@interact.ccsd.net

14 *Defendant in Proper Person*
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STATE OF NEVADA)
)
COUNTY OF CLARK) SS.

1. ELENI KILGORE, being first duly sworn on oath, states as follows:

2. That I am the Defendant in the above-entitled action. That I have read the foregoing opposition and counter motion, including the points and authorities and any exhibits attached thereto and the same are true and correct to the best of my knowledge and belief.

3. Plaintiff, RICHARD SCOTT KILGORE (hereinafter "RICHARD") and I were divorced in Clark County, Nevada by a Decree of Divorce that was entered on March 13, 2013. We have three children born as a result of the marriage, namely, Alexandria Kilgore, born: August 22, 1995, age 19; Nicholas Kilgore, born: June 29, 2000; and, Richard Kilgore, born: June 29, 2000. Pursuant to the Decree the parties were awarded joint legal custody of our children. I was awarded primary physical custody of the oldest child Alexandria, with Alexandria having teenage discretion regarding visitation with their father. We share joint physical custody of our twin boys using an alternating weekly timeshare.

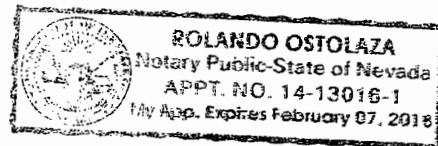
4. I have incurred a substantial amount of medical copayments for the children but RICHARD has refused to reimburse me for his share of these uncovered medical costs. RICHARD has also refused to pay for his share of the boys' participation in football and other activities. I have paid \$1,650.00 for the boys' participation in football and one summer of wrestling but has refused to pay his share of these expenses as well.

1 5. For the reasons stated in my points and authorities, I am requesting that the Court
2 grant me the relief sought in my opposition and counter motion.
3

4 Eleni Kilgore
ELENI KILGORE

5 Subscribed and sworn to before me this

6 30 day of November, 2014
7 [Signature]



8 Notary Public
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EXHIBIT 'A'

Nicholas Kilgore.TXT

Patient Chart

Nicholas Kilgore

Kilgore, Nicholas 06/29/2000

Office/Outpatient Visit

Visit Date: Thu, Jul 17, 2014 01:00 pm

Provider: Sonya Aikels, DO (Supervisor: John Lepore, DO; Assistant: Angelica Garcia Arellano, MA)

Location: Kidfixers Pediatrics

Electronically signed by Sonya Aikels, DO on 07/17/2014 01:58:25 PM

Printed on 10/06/2014 at 12:11 pm.

SUBJECTIVE:

CC:

Nicholas is a 14 year old male. He presents with urinary urgency. The history is obtained from the patient's mother.

HPI:

on 6/30/2014 per mother the patient went to twin peaks for his birthday where the waitresses are wearing skimpy outfits. patient began calling mother approx 5 am the morning after this event with complaints of erection that began the prior evening. per patient father gave him benadryl and advil and then told patient to go to bed. per mother patient complained his penis was still swollen, he complains the left side of penis was swollen and the right was normal. he was taken by father to centennial ER due to mother's coercion and we are unsure of what the diagnosis was. father then texted that a urologist saw the pain and was told it was "fine" to follow up if patient has pain with urination, painful erection or other concerns. since then patient states he is unable to get an erection. the patient denies pain, change of color. he states it "stings" with urination "once in a while". mother is unsure if the patient masturbated. when asked patient states "not really". patient states usually he "just looks at people" and gets an erection. he does not awake with an erection anymore. he has tried to masturbate "once or twice", he does not wake with erections on a normal, he does not normally have wet dreams. he states it "stings" with urination.

ROS:

CONSTITUTIONAL: Negative for failure to thrive, fatigue, unexplained fevers and weight change.

EYES: Negative for apparent vision problems and eye drainage.

E/N/T: Negative for apparent hearing problems, ear pain, mouth-breathing and persistent sore throat.

CARDIOVASCULAR: Negative for chest pain and cyanotic spells.

RESPIRATORY: Negative for persistent cough and exposure to tobacco smoke.

GASTROINTESTINAL: Negative for abdominal pain, anorexia and diarrhea.

MUSCULOSKELETAL: Negative for joint pain, joint swelling and gait abnormality.

INTEGUMENTARY: Negative for rash.

NEUROLOGICAL: Positive for symptoms of possible ADD/ADHD. Negative for dizziness, fainting or seizures.

PMH/FMH/SH:

Past Medical History:

Seen and cleared by cardiology June 2008

Attention Deficit Hyperactivity Disorder

Autism: mild;

Nicholas Kilgore.TXT

Social History:

Parents' Marital Status: Divorced. He Divorced. The parents have joint custody and he alternates between their homes.,
Father's name: Richard, and Mother's Name: Eleni Parent's Occupations: Mother's Occupation: Employed at CCSD and
Father's Occupation: Employed at City of Las Vegas
Household: Lives with his sibling(s) (1 sister, 2 brothers). Alexandra 08-22-95, Richard 06-29-00 Nicholas 6-29-00

Current Problems:

Abscess of face
Acne
ADHD
Attention deficit disorder, without hyperactivity
Attention deficit hyperactivity disorder
Bronchospasm NOS
Constipation
Fever presenting with conditions classified elsewhere
Low back pain
Moderate asthma (exacerbation)
Plantar wart
Undescended testicle

Immunizations:

Pneumococcal 7-valent conjugate vaccine , IM 3/28/2001
Pneumococcal 7-valent conjugate vaccine , IM 5/23/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 9/16/2000
DTaP (Diphtheria-Tetanus-acellular Pertussis) 11/21/2000
DTaP (Diphtheria-Tetanus-acellular Pertussis) 3/7/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 10/4/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 6/7/2005
Haemophilus influenza b (Hib), PRP-D, booster 9/16/2000
Haemophilus influenza b (Hib), PRP-D, booster 11/21/2000
Haemophilus influenza b (Hib), PRP-D, booster 3/7/2001
Haemophilus influenza b (Hib), PRP-D, booster 10/4/2001
Hepatitis B (pedi/adol, 3-dose schedule) 7/13/2000
Hepatitis B (pedi/adol, 3-dose schedule) 8/24/2000
Hepatitis B (pedi/adol, 3-dose schedule) 3/7/2001
Hepatitis A, pedi/adol dose (2-dose schedule) 7/1/2002
Hepatitis A, pedi/adol dose (2-dose schedule) 7/22/2003
IPV Poliovirus, inactivated 9/16/2000
IPV Poliovirus, inactivated 11/21/2000
IPV Poliovirus, inactivated 1/29/2002
IPV Poliovirus, inactivated 6/7/2005
MMR (Measles-Mumps-Rubella), live 7/17/2001
MMR (Measles-Mumps-Rubella), live 6/7/2005
Varicella, live 7/17/2001
Varicella, live 4/13/2007
Influenza, live, intranasal 9/27/2012
Influenza Virus vaccine, unspecified 10/4/2006
Influenza Virus vaccine, unspecified 10/22/2007
Meningococcal Polysaccharide Diphtheria Toxoid Con 8/11/2011
Tdap (Tetanus toxoid, reduced DTaP adsorbed) 8/11/2011

Current Medications:

Adderall XR 30mg Capsules, Extended Release Take 1 cap by mouth qam
Intuniv 3mg Tablets, Extended Release Take 1 tablet(s) by mouth daily
Advil

OBJECTIVE:

Vitals:

Current: 7/17/2014 1:01:01 PM
Wt: 139.9 lbs (85.21%)
T: 98.7 F (temporal); P: 80 bpm; R: 20 bpm

Exams:

GENERAL: well developed; well nourished; no apparent distress
HYDRATION STATUS: normal
HEAD: normocephalic
EYES: lids and conjunctiva are normal; pupils and irises are normal;
E/N/T: normal external ears and nose; normal external auditory canals and tympanic membranes; Nose: normal nasal mucosa, septum, turbinates, and sinuses; Lips, Teeth and Gums: normal; Oropharynx: normal mucosa, palate, and posterior pharynx;
NECK: Neck is supple with full range of motion;
RESPIRATORY: normal respiratory rate and pattern with no distress; normal breath sounds with no rales, rhonchi, wheezes or rubs;
CARDIOVASCULAR: S1, S2 auscultated with no adventitious sounds. No murmur appreciated on exam today.;
MUSCULOSKELETAL: normal gait;
SKIN: No ulcerations, lesions or rashes are noted.
NEUROLOGIC: Normal for age

Lab/Test Results:

LABORATORY RESULTS:

Urinalysis: (-) glucose, (-) bilirubin, (-) ketones, S.G. 1.020, (-) blood, pH 5.0, 1+ (30 mg/dL) protein, normal (0.2-1 EU) urobilinogen, (-) nitrite, (-) leukocyte esterase;

ASSESSMENT:

788.63 Frequent. urgent need to urinate
607.89 Other disorder of penis
314.01 ADHD
493.02 Moderate asthma (exacerbation)
706.1 Acne

ORDERS:

Meds Prescribed:

Refill of: Intuniv (Guanfacine HCl) 2mg Tablets, Extended Release take 1 tab by mouth q pm #100 (One Hundred) tablet(s) Refills: 3
Concerta (Methylphenidate HCl) 36mg Tablets, Extended Release Take 1 tablet(s) by mouth qam #30 (Thirty) tablet(s) Refills: 0
Advair Diskus (Fluticasone/Salmeterol) 100mcg/50mcg per 1blister Inhalation Powder Inhale 1 puff(s) bid #1 (One) 60 blister package Refills: 3
ProAir HFA (Albuterol) 90mcg/lactuation Oral Inhaler 2 puffs before exercise and q 4 h prn cough/wheeze at school #2 (Two) 8.5 gm inhaler Refills: 3
Clindamycin/Benzoyl Peroxide 1%/5% Topical Gel Apply thin film to to affected area bid #45 (Forty Five) gm Refills: 3

Lab Orders:

Urinalysis, nonautomated without microscopy (In-House)

Nicholas Kilgore.TXT

Procedures Ordered:

Handling and/or conveyance of specimen for transfer from the physician's office to a laboratory (In-House)

PLAN:

Frequent, urgent need to urinate will request records from centennial hospital

LABORATORY: Labs ordered to be performed today include and urinalysis.

REFERRALS: Referral initiated to a urologist (for evaluation of dr plaire for evaluation of priapism and cause of erectile dysfunction).

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Finish all medications, increase fluid

intake, and avoid holding in urine. wipe cleanly, no bubble baths or soap in area.

FOLLOW-UP: Advised to call if there is no improvement 2 days. Schedule follow-up appointments on a p.r.n. basis..

Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as fever, Persistent

uncontrollable fevers or Temp > 104.5, abdominal pain, and hematuria. Parent to schedule appointment or call for results

Orders:

Urinalysis, nonautomated without microscopy (In-House)

Handling and/or conveyance of specimen for transfer from the physician's office to a laboratory (In-House)

Other disorder of penis

MEDICATIONS: Advised to take OTC Tylenol and Dosages discussed with parent.

FOLLOW-UP: Schedule follow-up appointment in 3 days..

ADHD

MEDICATIONS: Advised to take OTC Tylenol, Motirn, and Dosages discussed with parent.

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Continue current medication regimen,

Finish all medications, Signs and symptoms of respiratory distress discussed, reduce fever with acetaminophen and/or

ibuprofen if age appropriate, Saline spray, humidifier, and Sleep position.

FOLLOW-UP: Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as

Respiratory distress, Persistent uncontrollable fevers or Temp > 104.5, and vomiting.

Prescriptions:

Refill of: Intuniv (Guanfacine HCl) 2mg Tablets, Extended Release take 1 tab by mouth q pm #100 (One Hundred)

tablet(s) Refills: 3

Concerta (Methylphenidate HCl) 36mg Tablets, Extended Release Take 1 tablet(s) by mouth qam #30 (Thirty) tablet(s)

Refills: 0

Moderate asthma (exacerbation)

MEDICATIONS: Advised to take OTC Tylenol and Motirn.

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Signs and symptoms of respiratory

distress discussed, reduce fever with acetaminophen and/or ibuprofen if age appropriate, , , and Saline spray, humidifier.

FOLLOW-UP: Advised to call if there is no improvement 5 days. Schedule follow-up appointments on a p.r.n. basis..

Nicholas Kilgore.TXT

Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as Respiratory distress and Persistent uncontrollable fevers or Temp > 104.5.

Prescriptions:

Advair Diskus (Fluticasone/Salmeterol) 100mcg/50mcg per 1blister Inhalation Powder
Inhale 1 puff(s) bid #1 (One) 60
blister package Refills: 3
ProAir HFA (Albuterol) 90mcg/lactuation Oral Inhaler 2 puffs before exercise and q
4 h prn cough/wheeze at school #2
(Two) 8.5 gm inhaler Refills: 3

Acne

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Finish all medications, Diaper rash cream q change if appropriate, and use of moisturizing creams, etc discussed. Advised to use throughout day especially after bathing..
FOLLOW-UP: Schedule follow-up appointments on a p.r.n. basis..

Prescriptions:

. Clindamycin/Benzoyl Peroxide 1%/5% Topical Gel Apply thin film to to affected area
bid #45 (Forty Five) gm Refills: 3

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Kilgore, Nicholas 06/29/2000

Office/Outpatient Visit

Visit Date: Tue, Mar 18, 2014 12:44 pm

Provider: John Lepore, DO (Supervisor: John Lepore, DO; Assistant: Dawn Smith, MA)

Location: Kidfixers Pediatrics

Electronically signed by John Lepore, DO on 03/21/2014 07:20:26 AM

Printed on 10/06/2014 at 12:11 pm.

SUBJECTIVE:

CC:

Nicholas is a 13 year old male. He presents with lesion/sore. The history is obtained from the patient's mother.

HPI:

L hand 2nd digit symptoms started sat 3/15 while at dad's house
father began trying to drain with needles- drained pus and blood as per child
father reportedly refused to take child to doctor
warm soaks with peroxide and neosporin
no fevers
changing in size

ROS:

CONSTITUTIONAL: Negative for fatigue and sleep disturbances.

EYES: Negative for eye drainage.

E/N/T: Positive for nasal congestion. Negative for ear pain.

RESPIRATORY: Negative for persistent cough, dyspnea and wheezing.

GASTROINTESTINAL: Negative for anorexia, diarrhea, nausea and vomiting.

MUSCULOSKELETAL: Negative

INTEGUMENTARY: Positive for skin mass. Negative for rash.

NEUROLOGICAL: Positive for symptoms of possible ADD/ADHD. Negative for headaches.

Nicholas Kilgore.TXT

PMH/FMH/SH:

Past Medical History:

Seen and cleared by cardiology June 2008

Attention Deficit Hyperactivity Disorder

Autism: mild;

Social History:

Parents' Marital Status: Divorced. He Divorced. The parents have joint custody and he alternates between their homes.. ,

Father's name: Richard, and Mother's Name: Eleni Parent's Occupations: Mother's

Occupation: Employed at CCSD and

Father's Occupation: Employed at City of Las Vegas

Household: Lives with his sibling(s) (1 sister, 2 brothers). Alexandra 08-22-95,

Richard 06-29-00 Nicholas 6-29-00

Current Problems:

Abscess of face

Acne

ADHD

Attention deficit disorder, without hyperactivity

Attention deficit hyperactivity disorder

Bronchospasm NOS

Constipation

Fever presenting with conditions classified elsewhere

Low back pain

Moderate asthma (exacerbation)

Plantar wart

Undescended testicle

Unspecified skin lesion

Immunizations:

Pneumococcal 7-valent conjugate vaccine , IM 3/28/2001

Pneumococcal 7-valent conjugate vaccine , IM 5/23/2001

DTaP (Diphtheria-Tetanus-acellular Pertussis) 9/16/2000

DTaP (Diphtheria-Tetanus-acellular Pertussis) 11/21/2000

DTaP (Diphtheria-Tetanus-acellular Pertussis) 3/7/2001

DTaP (Diphtheria-Tetanus-acellular Pertussis) 10/4/2001

DTaP (Diphtheria-Tetanus-acellular Pertussis) 6/7/2005

Haemophilus influenza b (Hib), PRP-D, booster 9/16/2000

Haemophilus influenza b (Hib), PRP-D, booster 11/21/2000

Haemophilus influenza b (Hib), PRP-D, booster 3/7/2001

Haemophilus influenza b (Hib), PRP-D, booster 10/4/2001

Hepatitis B (pedi/adol, 3-dose schedule) 7/13/2000

Hepatitis B (pedi/adol, 3-dose schedule) 8/24/2000

Hepatitis B (pedi/adol, 3-dose schedule) 3/7/2001

Hepatitis A, pedi/adol dose (2-dose schedule) 7/1/2002

Hepatitis A, pedi/adol dose (2-dose schedule) 7/22/2003

IPV Poliovirus, inactivated 9/16/2000

IPV Poliovirus, inactivated 11/21/2000

IPV Poliovirus, inactivated 1/29/2002

IPV Poliovirus, inactivated 6/7/2005

MMR (Measles-Mumps-Rubella), live 7/17/2001

MMR (Measles-Mumps-Rubella), live 6/7/2005

Varicella, live 7/17/2001

Varicella, live 4/13/2007

Influenza, live, intranasal 9/27/2012

Influenza virus vaccine 10/4/2006

Influenza virus vaccine 10/22/2007

Meningococcal Polysaccharide Diphtheria Toxoid Con 8/11/2011

Tdap (Tetanus toxoid, reduced DTaP adsorbed) 8/11/2011

Nicholas Kilgore.TXT

Allergies:

Sulfas:

Milk & dairy products:

Current Medications:

Adderall XR 30mg Capsules, Extended Release Take 1 cap by mouth qam
Advair Diskus 100mcg/50mcg per 1blister Inhalation Powder Inhale 1 puff(s) bid
Clindamycin/Benzoyl Peroxide 1%/5% Topical Gel Apply thin film to affected area daily
Intuniv 3mg Tablets, Extended Release Take 1 tablet(s) by mouth daily
ProAir HFA 90mcg/lactuation Oral Inhaler 2 puffs before exercise and q 4 h prn cough/wheeze at school
Advil

OBJECTIVE:

Vitals:

Current: 3/18/2014 12:45:46 PM

Wt: 133.6 lbs (83.74%)

T: 98.8 F (temporal); P: 76 bpm; R: 16 bpm

Exams:

GENERAL: The patient is well developed, well nourished, in no apparent distress.

HYDRATION STATUS: normal

HEAD: normocephalic

EYES: lids and conjunctiva are normal;

RESPIRATORY: normal respiratory rate and pattern with no distress; normal breath sounds with no rales, rhonchi, wheezes or rubs;

CARDIOVASCULAR: S1, S2 auscultated with no adventitious sounds. No murmur appreciated on exam today.;

LYMPHATIC: no enlargement of cervical nodes;

SKIN: L hand 2nd digit with swelling and erythema, tender to touch, no discharge noted;

ASSESSMENT:

883.0 Puncture wound to finger

ORDERS:

Meds Prescribed:

Augmentin (Amoxicillin/Clavulanate) 500mg/125mg Tablet Take 1 tablet(s) by mouth q12h for 10 days #20 (Twenty)

tablet(s) Refills: 0

Bactroban (Mupirocin) 2% Cream Apply small amount to affected area tid #30 (Thirty) gm Refills: 0

PLAN:

Puncture wound to finger

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Continue current medication regimen, Finish all medications, and warm soaks.

FOLLOW-UP: Schedule follow-up appointments on a p.r.n. basis..

Prescriptions:

Augmentin (Amoxicillin/Clavulanate) 500mg/125mg Tablet Take 1 tablet(s) by mouth
Page 7

Nicholas Kilgore.TXT

q12h for 10 days #20 (Twenty)

tablet(s) Refills: 0

Bactroban (Mupirocin) 2% Cream Apply small amount to affected area tid #30
(Thirty) gm Refills: 0

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Kilgore, Nicholas 06/29/2000

Office/Outpatient visit

Visit Date: Fri, Jan 10, 2014 04:11 pm

Provider: Sonya Aikels, DO (Supervisor: John Lepore, DO; Assistant: Dawn Smith, MA)

Location: Kidfixers Pediatrics

Electronically signed by Sonya Aikels, DO on 01/31/2014 08:14:42 AM

Printed on 10/06/2014 at 12:11 pm.

SUBJECTIVE:

CC:

Nicholas is a 13 year old male. Medical problems to be addressed today include ADHD. The history is obtained from the patient's mother.

HPI:

In regard to the attention deficit hyperactivity disorder, Nicholas is here for follow-up on ADHD treatment. He is currently taking concerta 36 mg tabs. "Drug holidays" are not taken. He has been at the current medication dosage for 4 weeks. This dose is very effective. The most recent grade report showed primarily A's, B's, and C's.

ROS:

CONSTITUTIONAL: Negative for failure to thrive, fatigue, unexplained fevers and weight change.

EYES: Negative for apparent vision problems and eye drainage.

E/N/T: Negative for apparent hearing problems, ear pain, mouth-breathing and persistent sore throat.

CARDIOVASCULAR: Negative for chest pain and cyanotic spells.

RESPIRATORY: Negative for persistent cough and exposure to tobacco smoke.

GASTROINTESTINAL: Negative for abdominal pain, anorexia and diarrhea.

MUSCULOSKELETAL: Negative for joint pain, joint swelling and gait abnormality.

INTEGUMENTARY: Negative for rash.

NEUROLOGICAL: Positive for symptoms of possible ADD/ADHD. Negative for dizziness, fainting or seizures.

PMH/FMH/SH:

Past Medical History:

Seen and cleared by cardiology June 2008

Attention Deficit Hyperactivity Disorder

Autism: mild;

Social History:

Parents' Marital Status: Divorced. He Divorced. The parents have joint custody and he alternates between their homes.

Father's name: Richard, and Mother's Name: Eleni Parent's Occupations: Mother's

Occupation: Employed at CCSD and

Father's Occupation: Employed at City of Las Vegas

Household: Lives with his sibling(s) (1 sister, 2 brothers). Alexandra 08-22-95,

Richard 06-29-00 Nicholas 6-29-00

Nicholas Kilgore.TXT

Current Problems:

Abscess of face
Acne
ADHD
Attention deficit disorder, without hyperactivity
Attention deficit hyperactivity disorder
Bronchospasm NOS
Cold symptoms
Constipation
Cough
Diarrhea
Fever presenting with conditions classified elsewhere
Low back pain
Moderate asthma (exacerbation)
Nausea and vomiting
Plantar wart
Serous otitis media, acute
Sore Throat
Undescended testicle

Immunizations:

Pneumococcal 7-valent conjugate vaccine , IM 3/28/2001
Pneumococcal 7-valent conjugate vaccine , IM 5/23/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 9/16/2000
DTaP (Diphtheria-Tetanus-acellular Pertussis) 11/21/2000
DTaP (Diphtheria-Tetanus-acellular Pertussis) 3/7/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 10/4/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 6/7/2005
Haemophilus influenza b (Hib), PRP-D, booster 9/16/2000
Haemophilus influenza b (Hib), PRP-D, booster 11/21/2000
Haemophilus influenza b (Hib), PRP-D, booster 3/7/2001
Haemophilus influenza b (Hib), PRP-D, booster 10/4/2001
Hepatitis B (pedi/adol, 3-dose schedule) 7/13/2000
Hepatitis B (pedi/adol, 3-dose schedule) 8/24/2000
Hepatitis B (pedi/adol, 3-dose schedule) 3/7/2001
Hepatitis A, pedi/adol dose (2-dose schedule) 7/1/2002
Hepatitis A, pedi/adol dose (2-dose schedule) 7/22/2003
IPV Poliovirus, inactivated 9/16/2000
IPV Poliovirus, inactivated 11/21/2000
IPV Poliovirus, inactivated 1/29/2002
IPV Poliovirus, inactivated 6/7/2005
MMR (Measles-Mumps-Rubella), live 7/17/2001
MMR (Measles-Mumps-Rubella), live 6/7/2005
Varicella, live 7/17/2001
Varicella, live 4/13/2007
Influenza, live, intranasal 9/27/2012
Influenza Virus vaccine 10/4/2006
Influenza Virus vaccine 10/22/2007
Meningococcal Polysaccharide Diphtheria Toxoid Con 8/11/2011
Tdap (Tetanus toxoid, reduced DTaP adsorbed) 8/11/2011

Allergies:

Sulfas:

Milk & dairy products:

Current Medications:

Adderall XR 30mg Capsules, Extended Release Take 1 cap by mouth qam
Bromfed-DM 2mg/10mg/30mg per 5ml Syrup Take 2 teaspoon by mouth q4h prn
Hycodan 5mg/1.5mg per 5ml Syrup Take 1 teaspoon by mouth q 4 to 6 hr prn
Ondansetron HCl 8mg Tablets, Orally Disintegrating dissolve 1 tab q 12hrs prn nausea
or vomiting
Prednisone 20mg Tablet Take 1 tablet(s) by mouth bid

Nicholas Kilgore.TXT

Advair Diskus 100mcg/50mcg per 1blister Inhalation Powder Inhale 1 puff(s) bid
Albuterol HFA 90mcg/lactuation Oral Inhaler 2 puffs q4 h prn cough or wheeze for
school

Concerta 36mg Tablets, Extended Release Take 1 tablet(s) by mouth qam
EpiPen Auto-Injector 2-Pak 0.3mg 1:1,000 Solution For Injection use as needed for
anaphylactic reaction to allergen at
home or school. May repeat in 5 mins if still symptomatic
Intuniv 3mg Tablets, Extended Release Take 1 tablet(s) by mouth daily
Advil

OBJECTIVE:

Vitals:

Current: 1/10/2014 4:11:52 PM
Ht: 5 ft, 5 in (72.79%); Wt: 126 lbs (78.97%); BMI: 21.0 (76.27%)
T: 98.7 F (temporal); BP: 106/68 mm Hg; P: 72 bpm; R: 20 bpm

Exams:

GENERAL: well developed; well nourished; no apparent distress
HYDRATION STATUS: normal
HEAD: normocephalic
EYES: lids and conjunctiva are normal; pupils and irises are normal;
E/N/T: normal external ears and nose; normal external auditory canals and tympanic
membranes; Nasal Septum/Mucosa:
partially obscured by clear drainage; Nasal Congestion noted mild; Lips, Teeth and
Gums: normal; Oropharynx: normal
mucosa, palate, and posterior pharynx;
NECK: Neck is supple with full range of motion;
RESPIRATORY: normal respiratory rate and pattern with no distress; normal breath
sounds with no rales, rhonchi,
wheezes or rubs;
CARDIOVASCULAR: S1, S2 auscultated with no adventitious sounds. No murmur appreciated
on exam today.;
MUSCULOSKELETAL: normal gait;
SKIN: No ulcerations, lesions or rashes are noted.
NEUROLOGIC: Normal for age

ASSESSMENT:

314.01 Attention deficit hyperactivity disorder
706.1 Acne
493.02 Moderate asthma (exacerbation)

ORDERS:

Meds Prescribed:

Refill of: Advair Diskus (Fluticasone/Salmeterol) 100mcg/50mcg per 1blister
Inhalation Powder Inhale 1 puff(s) bid #1
(One) 60 blister package Refills: 4
Refill of: Concerta (Methylphenidate HCl) 36mg Tablets, Extended Release Take 1
tablet(s) by mouth qam #30 (Thirty)
tablet(s) Refills: 0
Refill of: Intuniv (Guanfacine HCl) 3mg Tablets, Extended Release Take 1 tablet(s)
by mouth daily #30 (Thirty) tablet(s)
Refills: 6
Refill of: Clindamycin/Benzoyl Peroxide 1%/5% Topical Gel Apply thin film to
affected area daily #50 (Fifty) gm Refills: 4
ProAir HFA (Albuterol) 90mcg/lactuation Oral Inhaler 2 puffs before exercise and q
4 h prn cough/wheeze at school #2
(Two) 8.5 gm inhaler Refills: 4

Nicholas Kilgore.TXT

PLAN:

Attention deficit hyperactivity disorder wrote handwritten rx for concerta dated for 2/7/2014 and 3/7/2014 on this dos

RECOMMENDATIONS given include: continue ame medications at mother's request, monitor home environments/school performance.

Prescriptions:

Refill of: Intuniv (Guanfacine HCl) 3mg Tablets, Extended Release Take 1 tablet(s) by mouth daily #30 (Thirty) tablet(s)

Refills: 6

Refill of: Concerta (Methylphenidate HCl) 36mg Tablets, Extended Release Take 1 tablet(s) by mouth qam #30 (Thirty) tablet(s) Refills: 0

Acne

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Finish all medications, and Use of moisturizing creams, etc discussed. Advised to use throughout day especially after bathing..

FOLLOW-UP: Schedule follow-up appointments on a p.r.n. basis..

Prescriptions:

Refill of: Clindamycin/Benzoyl Peroxide 1%/5% Topical Gel Apply thin film to affected area daily #50 (Fifty) gm Refills: 4

Moderate asthma (exacerbation)

MEDICATIONS: Advised to take OTC Tylenol and Motrin.

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Signs and symptoms of respiratory distress discussed, reduce fever with acetaminophen or ibuprofen, , , and Saline spray, humidifier.

FOLLOW-UP: Advised to call if there is no improvement 5 days. Schedule follow-up appointments on a p.r.n. basis..

Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as Respiratory distress and Persistent uncontrollable fevers or Temp > 104.5.

Prescriptions:

Refill of: Advair Diskus (Fluticasone/Salmeterol) 100mcg/50mcg per 1blister Inhalation Powder Inhale 1 puff(s) bid #1

(One) 60 blister package Refills: 4

ProAir HFA (Albuterol) 90mcg/lactuation Oral Inhaler 2 puffs before exercise and q 4 h prn cough/wheeze at school #2

(Two) 8.5 gm inhaler Refills: 4

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Kilgore, Nicholas 06/29/2000

Office/Outpatient Visit

Visit Date: Thu, Dec 19, 2013 11:44 am

Provider: Sonya Aikels, DO (Supervisor: John Lepore, DO; Assistant: Lorri Taylor, MA)

Location: Kidfixers Pediatrics

Nicholas Kilgore.TXT

Electronically signed by Sonya Aikels, DO on 01/20/2014 07:39:38 AM
Printed on 10/06/2014 at 12:11 pm.

SUBJECTIVE:

CC:

Nicholas is a 13 year old male. He presents with diarrhea and cold symptoms and cough. The history is obtained from the patient and a grandparent.

HPI:

Nicholas presents with diarrhea. This has been a problem for the past 1 days. He estimates the stool frequency at 1 to 2 per day. Stools are described as loose. He denies associated symptoms, including fever, nausea, urgency and vomiting.

In regard to the cold symptoms, these have been present for the past 3 days. The symptoms include cough, nasal congestion, nasal discharge and wheezing. He denies fever. He denies exposure to ill contacts. He has already tried to relieve the symptoms with nasal spray.

Concerning cough, it has been present for the past 3 days. The cough can best be described as recent, dry, and nocturnal. Doesn't disturb sleep. Respiratory symptoms include wheezing, but not shortness of breath. Other symptoms include nasal congestion, nasal discharge and poor or disturbed sleep. He denies fever or wheezing. Nicholas is still feeding as usual. There has been no exposure to ill contacts.

ROS:

CONSTITUTIONAL: Positive for fatigue. Negative for sleep disturbances.

EYES: Negative for eye drainage.

E/N/T: Positive for nasal congestion and frequent rhinorrhea. Negative for ear pain.

CARDIOVASCULAR: Negative for chest pain, cyanotic spells, edema, and poor exercise tolerance.

RESPIRATORY: Positive for persistent cough. Negative for dyspnea or wheezing.

GASTROINTESTINAL: Positive for diarrhea. Negative for anorexia, nausea or vomiting.

MUSCULOSKELETAL: Negative

NEUROLOGICAL: Negative for headaches.

PMH/FMH/SH:

Past Medical History:

Seen and cleared by cardiology June 2008

Attention Deficit Hyperactivity Disorder

Autism: mild;

Social History:

Parents' Marital Status: Divorced. He Divorced. The parents have joint custody and he alternates between their homes..

Father's name: Richard, and Mother's Name: Eleni Parent's Occupations: Mother's Occupation: Employed at CCSD and

Father's Occupation: Employed at City of Las Vegas

Household: Lives with his sibling(s) (1 sister, 2 brothers). Alexandra 08-22-95, Richard 06-29-00 Nicholas 6-29-00

Nicholas Kilgore.TXT

Current Problems:

Abscess of face
Acne
ADHD
Attention deficit disorder, without hyperactivity
Attention deficit hyperactivity disorder
Bronchospasm NOS
Cold symptoms
Constipation
Cough
Fever presenting with conditions classified elsewhere
Low back pain
Moderate asthma (exacerbation)
Plantar wart
Serous otitis media, acute
Sore Throat
Undescended testicle

Immunizations:

Pneumococcal 7-valent conjugate vaccine , IM 3/28/2001
Pneumococcal 7-valent conjugate vaccine , IM 5/23/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 9/16/2000
DTaP (Diphtheria-Tetanus-acellular Pertussis) 11/21/2000
DTaP (Diphtheria-Tetanus-acellular Pertussis) 3/7/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 10/4/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 6/7/2005
Haemophilus influenza b (Hib), PRP-D, booster 9/16/2000
Haemophilus influenza b (Hib), PRP-D, booster 11/21/2000
Haemophilus influenza b (Hib), PRP-D, booster 3/7/2001
Haemophilus influenza b (Hib), PRP-D, booster 10/4/2001
Hépatitis B (pedi/adol, 3-dose schedule) 7/13/2000
Hepatitis B (pedi/adol, 3-dose schedule) 8/24/2000
Hepatitis B (pedi/adol, 3-dose schedule) 3/7/2001
Hepatitis A, pedi/adol dose (2-dose schedule) 7/1/2002
Hepatitis A, pedi/adol dose (2-dose schedule) 7/22/2003
IPV Poliovirus, inactivated 9/16/2000
IPV Poliovirus, inactivated 11/21/2000
IPV Poliovirus, inactivated 1/29/2002
IPV Poliovirus, inactivated 6/7/2005
MMR (Measles-Mumps-Rubella), live 7/17/2001
MMR (Measles-Mumps-Rubella), live 6/7/2005
Varicella, live 7/17/2001
Varicella, live 4/13/2007
Influenza, live, intranasal 9/27/2012
Influenza virus vaccine 10/4/2006
Influenza virus vaccine 10/22/2007
Meningococcal Polysaccharide Diphtheria Toxoid Con 8/11/2011
Tdap (Tetanus toxoid, reduced DTaP adsorbed) 8/11/2011

Allergies:

Sulfas:

Milk & dairy products:

Current Medications:

Adderall XR 30mg Capsules, Extended Release Take 1 cap by mouth qam
Advair Diskus 100mcg/50mcg per 1blister Inhalation Powder Inhale 1 puff(s) bid
Albuterol HFA 90mcg/lactuation Oral Inhaler 2 puffs q4 h prn cough or wheeze for school
Ceftin 250mg Tablet Take 1 tablet(s) by mouth bid for 10 days
Concerta 36mg Tablets, Extended Release Take 1 tablet(s) by mouth qam
EpiPen Auto-Injector 2-Pak 0.3mg 1:1,000 Solution For Injection use as needed for anaphylactic reaction to allergen at home or school. May repeat in 5 mins if still symptomatic

Nicholas Kilgore.TXT

Clindamycin/Benzoyl Peroxide 1%/5% Topical Gel Apply thin film to affected area daily
Intuniv 3mg Tablets, Extended Release Take 1 tablet(s) by mouth daily
Advil

OBJECTIVE:

Vitals:

Current: 12/19/2013 11:45:08 AM
Wt: 127.9 lbs (81.65%)
T: 98.9 F (temporal); P: 90 bpm; R: 22 bpm
O2 Sat: 99 % (room air)

Exams:

GENERAL: well developed; well nourished; no apparent distress; tired-appearing
HYDRATION STATUS: normal
HEAD: normocephalic
EYES: lids and conjunctiva are normal; pupils and irises are normal;
E/N/T: normal external ears and nose; normal external auditory canals and tympanic membranes; Nasal Septum/Mucosa: partially obscured by clear drainage; Nasal Congestion noted mild; Lips, Teeth and Gums: normal; Oropharynx: normal mucosa, palate, and posterior pharynx;
NECK: Neck is supple with full range of motion;
RESPIRATORY: normal respiratory rate and pattern with no distress; decreased breath sounds;
CARDIOVASCULAR: S1, S2 auscultated with no adventitious sounds. No murmur appreciated on exam today.;
MUSCULOSKELETAL: normal gait;
SKIN: No ulcerations, lesions or rashes are noted.
NEUROLOGIC: Normal for age

ASSESSMENT:

786.2 Cough
787.91 Diarrhea
460 Cold symptoms

ORDERS:

Meds Prescribed:

Prednisone 20mg Tablet Take 1 tablet(s) by mouth bid #6 (Six) tablet(s) Refills: 0
Hycodan (Hydrocodone/Homatropine Methylbromide) Syrup Take 1 teaspoon by mouth q 4 to 6 hr prn #120 (One Hundred and Twenty) ml Refills: 0
Bromfed-DM (Brompheniramine/Dextromethorphan/Pseudoephedrine) Syrup Take 2 teaspoon by mouth q4h prn #8 (Eight) oz Refills: 0
Ondansetron HCl 8mg Tablets, Orally Disintegrating dissolve 1 tab q 12hrs prn nausea or vomiting #12 (Twelve) tablet(s) Refills: 1

Radiology/Test Orders:

Noninvasive ear or pulse oximetry for oxygen saturation; single determination (In-House)

Other orders:

Therapeutic, prophylactic or diagnostic injection; subcutaneous or intramuscular (In-House)
J1094 Injection, dexamethasone acetate, 1mg (x8) decadron 0.8mg to left arm Lot#

6006643 exp. 08/15 SAW

PLAN:

Cough

MEDICATIONS: Advised to take OTC Tylenol, Motrin, and Dosages discussed with parent.
RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Continue current medication regimen, Finish all medications, Signs and symptoms of respiratory distress discussed, reduce fever with acetaminophen or ibuprofen, Saline spray, humidifier, and Sleep position. Steroids Decadron: 8 mg
FOLLOW-UP: Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as Respiratory distress, Persistent uncontrollable fevers or Temp > 104.5, and vomiting.

Prescriptions:

Prednisone 20mg Tablet Take 1 tablet(s) by mouth bid #6 (Six) tablet(s) Refills: 0
Hycodan (Hydrocodone/Homatropine Methylbromide) Syrup Take 1 teaspoon by mouth q 4 to 6 hr prn #120 (One Hundred and Twenty) ml Refills: 0
Bromfed-DM (Brompheniramine/Dextromethorphan/Pseudoephedrine) Syrup Take 2 teaspoon by mouth q4h prn #8 (Eight) oz Refills: 0
Ondansetron HCl 8mg Tablets, Orally Disintegrating dissolve 1 tab q 12hrs prn nausea or vomiting #12 (Twelve) tablet(s) Refills: 1

Orders:

Noninvasive ear or pulse oximetry for oxygen saturation; single determination (In-House)
Therapeutic, prophylactic or diagnostic injection; subcutaneous or intramuscular (In-House)
J1094 Injection, dexamethasone acetate, 1mg (x8)

Diarrhea

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Signs and symptoms of dehydration discussed, increase fluid intake, Bland/BRAT diet if age appropriate, Advance Diet, and begin oral fluid replacement with a glucose and electrolyte containing solution.
FOLLOW-UP: Schedule follow-up appointments on a p.r.n. basis..

Cold symptoms

MEDICATIONS: Advised to take OTC Tylenol and Motrin.
RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Continue current medication regimen, Signs and symptoms of respiratory distress discussed, reduce fever with acetaminophen or ibuprofen, increase fluid intake, Saline spray, humidifier, and Sleep position.
FOLLOW-UP: Advised to call if there is no improvement 5 days. Schedule follow-up appointments on a p.r.n. basis..
Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as Respiratory distress and Persistent uncontrollable fevers or Temp > 104.5.

Nicholas Kilgore.TXT

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Kilgore, Nicholas 06/29/2000

Office/Outpatient Visit

Visit Date: Fri, Dec 13, 2013 03:55 pm

Provider: John Lepore, DO (Supervisor: John Lepore, DO; Assistant: Lorri Taylor, MA)

Location: Kidfixers Pediatrics

Electronically signed by John Lepore, DO on 12/16/2013 06:59:17 AM

Printed on 10/06/2014 at 12:11 pm.

SUBJECTIVE:

CC:

Nicholas is a 13 year old male. He presents with cold symptoms, cough, fever, and sore throat. The history is obtained from the patient and the patient's mother.

HPI:

Nicholas presents with cold symptoms. This has been a problem for the past week. This is an acute problem without chronic or recurrent episodes. His primary symptoms include productive cough, fever to 102.5 degrees, nasal congestion, yellow rhinorrhea and sore throat in am. He has already tried ibuprofen.

ROS:

CONSTITUTIONAL: Negative for fatigue and sleep disturbances.

EYES: Negative for eye drainage.

E/N/T: Positive for nasal congestion. Negative for ear pain.

RESPIRATORY: Negative for dyspnea and wheezing.

GASTROINTESTINAL: Negative for anorexia, diarrhea, nausea and vomiting.

GENITOURINARY: Negative

MUSCULOSKELETAL: Negative

INTEGUMENTARY: Negative for rash.

NEUROLOGICAL: Negative for headaches.

PMH/FMH/SH:

Past Medical History:

Seen and cleared by cardiology June 2008

Attention Deficit Hyperactivity Disorder

Autism: mild;

Social History:

Parents' Marital Status: Divorced. He Divorced. The parents have joint custody and he alternates between their homes.. ,

Father's name: Richard, and Mother's Name: Eleni Parent's Occupations: Mother's

Occupation: Employed at CCSD and

Father's Occupation: Employed at City of Las Vegas

Household: Lives with his sibling(s) (1 sister, 2 brothers). Alexandra 08-22-95,

Richard 06-29-00 Nicholas 6-29-00

Current Problems:

Abscess of face

Acne

ADHD

Attention deficit disorder, without hyperactivity

Attention deficit hyperactivity disorder

Nicholas Kilgore.TXT

Bronchospasm NOS
Constipation
Fever presenting with conditions classified elsewhere
Low back pain
Moderate asthma (exacerbation)
Plantar wart
Undescended testicle

Immunizations:

Pneumococcal 7-valent conjugate vaccine , IM 3/28/2001
Pneumococcal 7-valent conjugate vaccine , IM 5/23/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 9/16/2000
DTaP (Diphtheria-Tetanus-acellular Pertussis) 11/21/2000
DTaP (Diphtheria-Tetanus-acellular Pertussis) 3/7/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 10/4/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 6/7/2005
Haemophilus influenza b (Hib), PRP-D, booster 9/16/2000
Haemophilus influenza b (Hib), PRP-D, booster 11/21/2000
Haemophilus influenza b (Hib), PRP-D, booster 3/7/2001
Haemophilus influenza b (Hib), PRP-D, booster 10/4/2001
Hepatitis B (pedi/adol, 3-dose schedule) 7/13/2000
Hepatitis B (pedi/adol, 3-dose schedule) 8/24/2000
Hepatitis B (pedi/adol, 3-dose schedule) 3/7/2001
Hepatitis A, pedi/adol dose (2-dose schedule) 7/1/2002
Hepatitis A, pedi/adol dose (2-dose schedule) 7/22/2003
IPV Poliovirus, inactivated 9/16/2000
IPV Poliovirus, inactivated 11/21/2000
IPV Poliovirus, inactivated 1/29/2002
IPV Poliovirus, inactivated 6/7/2005
MMR (Measles-Mumps-Rubella), live 7/17/2001
MMR (Measles-Mumps-Rubella), live 6/7/2005
Varicella, live 7/17/2001
Varicella, live 4/13/2007
Influenza, live, intranasal 9/27/2012
Influenza Virus Vaccine 10/4/2006
Influenza Virus Vaccine 10/22/2007
Meningococcal Polysaccharide Diphtheria Toxoid Con 8/11/2011
Tdap (Tetanus toxoid, reduced DTaP adsorbed) 8/11/2011

Allergies:

Sulfas:

Milk & dairy products:

Current Medications:

Adderall XR 30mg Capsules, Extended Release Take 1 cap by mouth qam
Advair Diskus 100mcg/50mcg per 1blister Inhalation Powder Inhale 1 puff(s) bid
Clindamycin/Benzoyl Peroxide 1%/5% Topical Gel Apply thin film to affected area daily
Intuniv 3mg Tablets, Extended Release Take 1 tablet(s) by mouth daily
Advil

OBJECTIVE:

Vitals:

Current: 12/13/2013 3:56:14 PM
Wt: 128 lbs (81.95%)
T: 99.9 F (temporal); P: 82 bpm; R: 20 bpm
O2 Sat: 98 % (room air)

Exams:

GENERAL: well developed; well nourished; no apparent distress; tired-appearing

Nicholas Kilgore.TXT

HYDRATION STATUS: normal

HEAD: normocephalic

EYES: lids and conjunctiva are normal; pupils and irises are normal;

E/N/T: normal external ears and nose; Ears: both TMs are pink and Clear Fluid noted behind TM; Nasal Septum/Mucosa:

partially obscured by clear drainage; Nasal Congestion noted mild; Lips, Teeth and Gums: normal; Oropharynx: normal

mucosa, palate, and posterior pharynx;

NECK: Neck is supple with full range of motion;

RESPIRATORY: normal respiratory rate and pattern with no distress; Bronchospasm and/or a prolonged expiratory phase is noted.

CARDIOVASCULAR: S1, S2 auscultated with no adventitious sounds. No murmur appreciated on exam today.;

MUSCULOSKELETAL: normal gait;

SKIN: No ulcerations, lesions or rashes are noted.

NEUROLOGIC: Normal for age

ASSESSMENT:

460	Cold symptoms
786.2	Cough
780.61	Fever presenting with conditions classified elsewhere
381.01	Serous otitis media, acute
519.11	Bronchospasm NOS
462	Sore Throat

ORDERS:

Meds Prescribed:

Refill of: Advair Diskus (Fluticasone/Salmeterol) 100mcg/50mcg per 1blister Inhalation Powder Inhale 1 puff(s) bid #1

(One) 60 blister package Refills: 3

Refill of: Albuterol HFA 90mcg/lactuation Oral Inhaler 2 puffs q4 h prn cough or wheeze for school #2 (Two) inhaler(s)

Refills: 3

Ceftin (Cefuroxime Axetil) 250mg Tablet Take 1 tablet(s) by mouth bid for 10 days #20 (Twenty) tablet(s) Refills: 0

Concerta (Methylphenidate HCl) 36mg Tablets, Extended Release Take 1 tablet(s) by mouth qam #30 (Thirty) tablet(s)

Refills: 0

Radiology/Test Orders:

Noninvasive ear or pulse oximetry for oxygen saturation; single determination (In-House)

PLAN:

Cold symptoms

MEDICATIONS: Advised to take OTC Tylenol and Motrin.

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Signs and symptoms of respiratory distress discussed, reduce fever with acetaminophen or ibuprofen, , , and Saline spray, humidifier.

FOLLOW-UP: Advised to call if there is no improvement 5 days. Schedule follow-up appointments on a p.r.n. basis..

Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as Respiratory distress and Persistent uncontrollable fevers or Temp > 104.5.

Cough

Orders:

Noninvasive ear or pulse oximetry for oxygen saturation; single determination (In-House)

Serous otitis media, acute

MEDICATIONS: Advised to take OTC Tylenol, Motirn, and Dosages discussed with parent.
RECOMMENDATIONS given include: Observe for signs and symptoms of illness, reduce fever with acetaminophen or ibuprofen, increase fluid intake, and Saline spray, humidifier.
FOLLOW-UP: Advised to call if there is no improvement Follow-up by phone if no improvement in 1 week.. Schedule a follow-up appointment in 2 weeks.. Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as fever, Persistent uncontrollable fevers or Temp > 104.5, and Persistent vomiting, unable to tolerate PO, decreased Urine output, lethargy.

Prescriptions:

Ceftin (Cefuroxime Axetil) 250mg Tablet Take 1 tablet(s) by mouth bid for 10 days
#20 (Twenty) tablet(s) Refills: 0
Concerta (Methylphenidate HCl) 36mg Tablets, Extended Release Take 1 tablet(s) by mouth qam #30 (Thirty) tablet(s)
Refills: 0

Bronchospasm NOS

MEDICATIONS: Advised to take OTC Tylenol and Motirn.
RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Signs and symptoms of respiratory distress discussed, reduce fever with acetaminophen or ibuprofen, , , and Saline spray, humidifier.
FOLLOW-UP: Advised to call if there is no improvement 5 days. Schedule follow-up appointments on a p.r.n. basis..
Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as Respiratory distress and Persistent uncontrollable fevers or Temp > 104.5.

Prescriptions:

Refill of: Advair Diskus (Fluticasone/Salmeterol) 100mcg/50mcg per 1blister
Inhalation Powder Inhale 1 puff(s) bid #1
(One) 60 blister package Refills: 3
Refill of: Albuterol HFA 90mcg/lactuation Oral Inhaler 2 puffs q4 h prn cough or wheeze for school #2 (Two) inhaler(s)
Refills: 3

Sore Throat

MEDICATIONS: Advised to take OTC Tylenol and Motirn.
RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Signs and symptoms of respiratory distress discussed, reduce fever with acetaminophen or ibuprofen, , , and Saline spray, humidifier.
FOLLOW-UP: Advised to call if there is no improvement 5 days. Schedule follow-up appointments on a p.r.n. basis..
Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as Respiratory distress and Persistent uncontrollable fevers or Temp > 104.5.

Nicholas Kilgore.TXT

CPT ® is a registered trademark of the American Medical Association

Kilgore, Nicholas 06/29/2000

Office/Outpatient Visit

Visit Date: Thu, Sep 12, 2013 04:24 pm

Provider: Sonya Aikels, DO (Supervisor: John Lepore, DO; Assistant: Lorri Taylor, MA)

Location: Kidfixers Pediatrics

Electronically signed by Sonya Aikels, DO on 09/27/2013 08:01:33 AM

Printed on 10/06/2014 at 12:11 pm.

SUBJECTIVE:

CC:

Nicholas is a 13 year old male. He presents with a nodule/mass and mole. Medical problems to be addressed today include and ADHD. The history is obtained from the patient and the patient's mother.

HPI:

Nicholas presents with attention deficit hyperactivity disorder. Nicholas is here for follow-up on ADHD treatment. He is currently taking concerta, intuniv. "Drug holidays" are not taken. He has been at the current medication dosage for several months. This dose is very effective. The main problems he is having currently include fidgeting, inability to stay seated in class, interrupting the teacher, disrupting other students, and argumentative temperament with parents.

per mother patient has a mass under his right nipple which is nontender. she is concerned about the possibility of breast mass

with regard to the cough, it has been present for the past 4 weeks. The cough can best be described as persistent, Occasional, and nocturnal Disturbs sleep. He denies shortness of breath and wheezing. Nicholas is still feeding as usual. per mother patient has had cough x 4 weeks, initially he had a much worse cough and was seen twice by dr jerome. he was prescribed azithromycin which he has finished. per patient he thinks he is 80% better, but per mother he continues to have persistent cough which she thinks may be due to wheat, dairy exposure.

ROS:

CONSTITUTIONAL: Negative for fatigue and sleep disturbances.

EYES: Negative for eye drainage.

E/N/T: Positive for nasal congestion. Negative for ear pain.

RESPIRATORY: Positive for persistent cough. Negative for dyspnea or wheezing.

GASTROINTESTINAL: Negative for anorexia, diarrhea, nausea and vomiting.

MUSCULOSKELETAL: Negative

INTEGUMENTARY: Positive for skin mass. Negative for rash.

NEUROLOGICAL: Positive for symptoms of possible ADD/ADHD. Negative for headaches.

PMH/FMH/SH:

Past Medical History:

Seen and cleared by cardiology June 2008

Attention Deficit Hyperactivity Disorder

Autism: mild;

Social History:

Nicholas Kilgore.TXT

Parents' Marital Status: Divorced. He Divorced. The parents have joint custody and he alternates between their homes. ,
Father's name: Richard, and Mother's Name: Eleni Parent's Occupations: Mother's Occupation: Employed at CCSD and
Father's Occupation: Employed at City of Las Vegas
Household: Lives with his sibling(s) (1 sister, 2 brothers). Alexandra 08-22-95, Richard 06-29-00 Nicholas 6-29-00

Current Problems:

Abscess of face
Acute rhinitis
ADHD
Attention deficit disorder, without hyperactivity
Attention deficit hyperactivity disorder
Bronchospasm NOS
Constipation
Cough
Fever presenting with conditions classified elsewhere
Low back pain
Moderate asthma (exacerbation)
Undescended testicle

Immunizations:

Pneumococcal 7-valent conjugate vaccine , IM 3/28/2001
Pneumococcal 7-valent conjugate vaccine , IM 5/23/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 9/16/2000
DTaP (Diphtheria-Tetanus-acellular Pertussis) 11/21/2000
DTaP (Diphtheria-Tetanus-acellular Pertussis) 3/7/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 10/4/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 6/7/2005
Haemophilus influenza b (Hib), PRP-D, booster 9/16/2000
Haemophilus influenza b (Hib), PRP-D, booster 11/21/2000
Haemophilus influenza b (Hib), PRP-D, booster 3/7/2001
Haemophilus influenza b (Hib), PRP-D, booster 10/4/2001
Hepatitis B (pedi/adol, 3-dose schedule) 7/13/2000
Hepatitis B (pedi/adol, 3-dose schedule) 8/24/2000
Hepatitis B (pedi/adol, 3-dose schedule) 3/7/2001
Hepatitis A, pedi/adol dose (2-dose schedule) 7/1/2002
Hepatitis A, pedi/adol dose (2-dose schedule) 7/22/2003
IPV Poliovirus, inactivated 9/16/2000
IPV Poliovirus, inactivated 11/21/2000
IPV Poliovirus, inactivated 1/29/2002
IPV Poliovirus, inactivated 6/7/2005
MMR (Measles-Mumps-Rubella), live 7/17/2001
MMR (Measles-Mumps-Rubella), live 6/7/2005
Varicella, live 7/17/2001
Varicella, live 4/13/2007
Influenza, live, intranasal 9/27/2012
Influenza Virus Vaccine 10/4/2006
Influenza Virus vaccine 10/22/2007
Meningococcal Polysaccharide Diphtheria Toxoid Con 8/11/2011
Tdap (Tetanus toxoid, reduced DTaP adsorbed) 8/11/2011

Allergies:

Sulfas:

Milk & dairy products:

Current Medications:

Adderall XR 30mg Capsules, Extended Release Take 1 cap by mouth qam
Pancof PD 3mg/2mg/7.5mg per 5ml Syrup 1/2 tsp po q 6 hours prn cough
Hycodan 5mg/1.5mg per 5ml Syrup Take 1 teaspoon by mouth q 4 to 6 hr prn

Nicholas Kilgore.TXT

EpiPen Auto-Injector 2-Pak 0.3mg 1:1,000 Solution For Injection as directed
Prednisone 10mg Tablet 4 tabs day #1, 3 tabs day #2, 3 tabs day #3, 2 tabs day #4
Albuterol HFA 90mcg/lactuation Oral Inhaler 2 puffs q4 h prn cough or wheeze for school
Qnasl 80mcg/lactuation Nasal Spray 1 spray bilateral nostrils daily
Advil

OBJECTIVE:

Vitals:

Current: 9/12/2013 4:26:25 PM
Ht: 5 ft, 5 in (82.53%); Wt: 123.2 lbs (80.62%); BMI: 20.5 (74.36%)
T: 98.4 F (temporal); BP: 108/70 mm Hg; P: 84 bpm; R: 20 bpm

Exams:

GENERAL: well developed; well nourished; no apparent distress
HYDRATION STATUS: normal
HEAD: normocephalic
EYES: lids and conjunctiva are normal; pupils and irises are normal;
E/N/T: normal external ears and nose; normal external auditory canals and tympanic membranes; Nasal Septum/Mucosa: partially obscured by clear drainage; Lips, Teeth and Gums: normal; Oropharynx: normal mucosa, palate, and posterior pharynx;
NECK: Neck is supple with full range of motion;
RESPIRATORY: normal respiratory rate and pattern with no distress; normal breath sounds with no rales, rhonchi, wheezes or rubs; right gynecomastia
CARDIOVASCULAR: S1, S2 auscultated with no adventitious sounds. No murmur appreciated on exam today.;
BREASTS: right subareolar mass;
GASTROINTESTINAL: no masses palpated; nontender; no organomegaly
MUSCULOSKELETAL: normal gait; grossly normal tone and muscle strength;
SKIN: wart right preauricular erythematous mass approx 0.25 cm;
NEUROLOGIC: Normal for age

ASSESSMENT:

314.01	Attention deficit hyperactivity disorder
611.1	Gynecomastia
786.2	Cough
078.12	Plantar wart
706.1	Acne

ORDERS:

Meds Prescribed:

Refill of: Concerta (Methylphenidate HCl) 27mg Tablets, Extended Release Take 1 tablet(s) by mouth qam #30 (Thirty)
tablet(s) Refills: 0
Intuniv (Guanfacine HCl) 3mg Tablets, Extended Release Take 1 tablet(s) by mouth daily #30 (Thirty) tablet(s) Refills: 6
Advair Diskus (Fluticasone/Salmeterol) 100mcg/50mcg per 1blister Inhalation Powder Inhale 1 puff(s) bid #1 (One) 60
blister package Refills: 3
Mupirocin 2% Cream Apply small amount to affected area bid #30 (Thirty) gm Refills: 1
Clindamycin/Benzoyl Peroxide 1%/5% Topical Gel Apply thin film to affected area daily #50 (Fifty) gm Refills: 3
Refill of: Hycodan (Hydrocodone/Homatropine Methylbromide) Syrup Take 1 teaspoon by mouth q 4 to 6 hr prn #120

Nicholas Kilgore.TXT

(One Hundred and Twenty) ml Refills: 0

Procedures Ordered:

Destruct benign lesions other than skin tags/cutaneous vascular proliferat
lesions; up to 14 lesions (In-House)

Other Orders:

A4550 Surgical trays (x1)

PLAN:

Attention deficit hyperactivity disorder wrote rx for concerta 27 mg tab dated for
10/10/2013 and 11/7/2013

RECOMMENDATIONS given include: continue medication regimen, discipline at home,
monitor school closely.

Prescriptions:

Refill of: Concerta (Methylphenidate HCl) 27mg Tablets, Extended Release Take 1
tablet(s) by mouth qam #30 (Thirty)
tablet(s) Refills: 0

Intuniv (Guanfacine HCl) 3mg Tablets, Extended Release Take 1 tablet(s) by mouth
daily #30 (Thirty) tablet(s) Refills: 6

Gynecomastia

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Finish all
medications, Diaper rash
cream q change if appropriate, and Use of moisturizing creams, etc discussed.
Advised to use throughout day especially
after bathing..

FOLLOW-UP: Schedule follow-up appointments on a p.r.n. basis..

Cough

MEDICATIONS: Advised to take OTC Tylenol, Motrin, and Dosages discussed with parent.
RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Continue
current medication regimen,
Finish all medications, Signs and symptoms of respiratory distress discussed, reduce
fever with acetaminophen or
ibuprofen, Saline spray, humidifier, and Sleep position.

FOLLOW-UP: Instructed to call immediately or seek care at the ER if he develops
new or worsening symptoms, such as
Respiratory distress, Persistent uncontrollable fevers or Temp > 104.5, and
vomiting.

Prescriptions:

Advair Diskus (Fluticasone/Salmeterol) 100mcg/50mcg per 1blister Inhalation Powder
Inhale 1 puff(s) bid #1 (One) 60
blister package Refills: 3

Refill of: Hycodan (Hydrocodone/Homatropine Methylbromide) Syrup Take 1 teaspoon
by mouth q 4 to 6 hr prn #120
(One Hundred and Twenty) ml Refills: 0

Plantar wart froze plantar wart x 1 on right foot

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Finish all
medications, and Use of
moisturizing creams, etc discussed. Advised to use throughout day especially after
bathing..

FOLLOW-UP: Schedule follow-up appointments on a p.r.n. basis..

Nicholas Kilgore.TXT

Orders:

Destruct benign lesions other than skin tags/cutaneous vascular proliferat
lesions; up to 14 lesions (In-House)
A4550 Surgical trays (x1)

Acne

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Finish all
medications, and Use of
moisturizing creams, etc discussed. Advised to use throughout day especially after
bathing..

FOLLOW-UP: Schedule follow-up appointments on a p.r.n. basis..

Prescriptions:

Clindamycin/Benzoyl Peroxide 1%/5% Topical Gel Apply thin film to affected area
daily #50 (Fifty) gm Refills: 3

Mupirocin 2% Cream Apply small amount to affected area bid #30 (Thirty) gm
Refills: 1

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Kilgore, Nicholas 06/29/2000

Office/Outpatient Visit

Visit Date: Mon, Aug 19, 2013 03:09 pm

Provider: Robert Jerome, MD (Supervisor: John Lepore, DO; Assistant: Sarah Whitney,
MA)

Location: Kidfixers Pediatrics

Electronically signed by Robert Jerome, MD on 08/19/2013 05:55:10 PM

Printed on 10/06/2014 at 12:12 pm.

SUBJECTIVE:

CC:

Nicholas is a 13 year old male. He presents with cold symptoms and cough. The
history is obtained from the patient's
father.

HPI:

Patient complains of cold symptoms. This has been a problem for the past 8 days.
His primary symptoms include cough,
fever, nasal congestion and sl green rhinorrhea.

Cough details; it has been present for the past 8 days. The cough can best be
described as wet. Respiratory symptoms
include shortness of breath and wheezing. Other symptoms include fever to 100
degrees, nasal congestion, nasal
discharge, Decrease in activity, Post tussive emesis and wheezing. Recent exposure
to illness from family members.
Remedies tried thus far include 5 days of zithromax, Albuterol inhaler.

ROS:

CONSTITUTIONAL: Positive for fatigue. Negative for sleep disturbances.

EYES: Negative for eye drainage.

E/N/T: Positive for nasal congestion. Negative for ear pain.

CARDIOVASCULAR: Negative for chest pain.

RESPIRATORY: Positive for dyspnea and wheezing.

GASTROINTESTINAL: Negative for abdominal pain, anorexia, diarrhea, nausea and
vomiting.

Nicholas Kilgore.TXT

MUSCULOSKELETAL: Negative for gait abnormality.

INTEGUMENTARY: Negative for rash.

NEUROLOGICAL: Negative for headaches.

PMH/FMH/SH:

Past Medical History:

Seen and cleared by cardiology June 2008

Attention Deficit Hyperactivity Disorder

Autism: mild;

Social History:

Parents' Marital Status: Divorced. He Divorced. The parents have joint custody and he alternates between their homes.;

Father's name: Richard, and Mother's Name: Eleni Parent's Occupations: Mother's

Occupation: Employed at CCSD and

Father's Occupation: Employed at City of Las Vegas

Household: Lives with his sibling(s) (1 sister, 2 brothers). Alexandra 08-22-95,

Richard 06-29-00 Nicholas 6-29-00

Current Problems:

Abscess of face

Acute bronchitis

ADHD

Attention deficit disorder, without hyperactivity

Attention deficit hyperactivity disorder

Bronchospasm NOS

Constipation

Fever presenting with conditions classified elsewhere

Low back pain

Moderate asthma (exacerbation)

Sore Throat

Undescended testicle

Immunizations:

Pneumococcal 7-valent conjugate vaccine , IM 3/28/2001

Pneumococcal 7-valent conjugate vaccine , IM 5/23/2001

DTaP (Diphtheria-Tetanus-acellular Pertussis) 9/16/2000

DTaP (Diphtheria-Tetanus-acellular Pertussis) 11/21/2000

DTaP (Diphtheria-Tetanus-acellular Pertussis) 3/7/2001

DTaP (Diphtheria-Tetanus-acellular Pertussis) 10/4/2001

DTaP (Diphtheria-Tetanus-acellular Pertussis) 6/7/2005

Haemophilus influenza b (Hib), PRP-D, booster 9/16/2000

Haemophilus influenza b (Hib), PRP-D, booster 11/21/2000

Haemophilus influenza b (Hib), PRP-D, booster 3/7/2001

Haemophilus influenza b (Hib), PRP-D, booster 10/4/2001

Hepatitis B (pedi/adol, 3-dose schedule) 7/13/2000

Hepatitis B (pedi/adol, 3-dose schedule) 8/24/2000

Hepatitis B (pedi/adol, 3-dose schedule) 3/7/2001

Hepatitis A, pedi/adol dose (2-dose schedule) 7/1/2002

Hepatitis A, pedi/adol dose (2-dose schedule) 7/22/2003

IPV Poliovirus, inactivated 9/16/2000

IPV Poliovirus, inactivated 11/21/2000

IPV Poliovirus, inactivated 1/29/2002

IPV Poliovirus, inactivated 6/7/2005

MMR (Measles-Mumps-Rubella), live 7/17/2001

MMR (Measles-Mumps-Rubella), live 6/7/2005

Varicella, live 7/17/2001

Varicella, live 4/13/2007

Influenza, live, intranasal 9/27/2012

Influenza virus Vaccine 10/4/2006

Influenza virus Vaccine 10/22/2007

Nicholas Kilgore.TXT

Meningococcal Polysaccharide Diphtheria Toxoid Con 8/11/2011
Tdap (Tetanus toxoid, reduced DTaP adsorbed) 8/11/2011

Current Medications:

Adderall XR 30mg Capsules, Extended Release Take 1 cap by mouth qam
Albuterol HFA 90mcg/lactuation Oral Inhaler 2 puffs q4 h prn cough or wheeze for school
Azithromycin 250mg Tablet Take 2 tablet(s) by mouth on day 1 then 1 tablet every day for the next 4 days.
Concerta 27mg Tablets, Extended Release Take 1 tablet(s) by mouth qam
Qnasl 80mcg/lactuation Nasal Spray 1 spray bilateral nostrils daily
Advil

OBJECTIVE:

vitals:

Current: 8/19/2013 3:09:45 PM
Wt: 128.4 lbs (85.95%)
T: 98.6 F (temporal); P: 90 bpm; R: 20 bpm
O2 Sat: 97 % (room air)

Exams:

GENERAL: well developed; well nourished; no apparent distress; tired-appearing
HYDRATION STATUS: normal
HEAD: normocephalic
EYES: lids and conjunctiva are normal; pupils and irises are normal;
E/N/T: normal external ears and nose; normal external auditory canals and tympanic membranes; Nasal Septum/Mucosa: partially obscured by clear drainage; Lips, Teeth and Gums: normal; Oropharynx: normal mucosa, palate, and posterior pharynx;
NECK: Neck is supple with full range of motion;
RESPIRATORY: normal respiratory rate and pattern with no distress; normal breath sounds with no rales, rhonchi, wheezes or rubs;
CARDIOVASCULAR: S1, S2 auscultated with no adventitious sounds. No murmur appreciated on exam today;
GASTROINTESTINAL: no masses palpated; nontender; no organomegaly
MUSCULOSKELETAL: normal gait;
SKIN: No ulcerations, lesions or rashes are noted.
NEUROLOGIC: Normal for age

ASSESSMENT:

786.2 Cough
460 Acute rhinitis

ORDERS:

Meds Prescribed:

Prednisone 10mg Tablet 4 tabs day #1, 3 tabs day #2, 3 tabs day #3, 2 tabs day #4 #15 (Fifteen) tablet(s) Refills: 0
EpiPen Auto-Injector 2-Pak 0.3mg (Epinephrine) Solution For Injection as directed #3 (Three) kit(s) Refills: 0

Radiology/Test Orders:

Noninvasive ear or pulse oximetry for oxygen saturation; single determination (In-House)
Radiologic examination, chest, two views, frontal and lateral (Send-Out)

Nicholas Kilgore.TXT

PLAN:

Cough

RADIOLOGY ordered today include: XR chest complete 2 views. Mother: 325-1835

REFERRALS: Referral initiated to a pulmonologist (Dr. Park).

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Signs and symptoms of respiratory distress discussed, and increase fluid intake.

FOLLOW-UP: Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as fever, Respiratory distress, vomiting, and persistent or worsening cough.

Prescriptions:

Prednisone 10mg Tablet 4 tabs day #1, 3 tabs day #2, 3 tabs day #3, 2 tabs day #4 #15 (Fifteen) tablet(s) Refills: 0

Orders:

Noninvasive ear or pulse oximetry for oxygen saturation; single determination (In-House)

Radiologic examination, chest, two views, frontal and lateral (Send-Out)

Acute rhinitis

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Signs and symptoms of respiratory distress discussed, and Saline spray, humidifier.

FOLLOW-UP: Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as fever, Respiratory distress, Unable to Feed, vomiting, and persistent or worsening congestion.

Other Prescriptions:

EpiPen Auto-Injector 2-Pak 0.3mg (Epinephrine) Solution For Injection as directed #3 (Three) kit(s) Refills: 0

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Kilgore, Nicholas 06/29/2000

Office/Outpatient Visit

Visit Date: Mon, Aug 12, 2013 09:59 am

Provider: Robert Jerome, MD (Supervisor: John Lepore, DO; Assistant: Elisabeth Ortega, MA)

Location: Kidfixers Pediatrics

Electronically signed by Robert Jerome, MD on 08/13/2013 04:23:18 PM

Printed on 10/06/2014 at 12:12 pm.

SUBJECTIVE:

CC:

Nicholas is a 13 year old male. He presents with fever and sore throat. The history is obtained from the patient's father.

HPI:

Patient to be evaluated for fever presenting with conditions classified elsewhere. This has been present for since yesterday. The fever pattern includes a maximum elevation to 102 degrees. He also notes hacking cough, Poor appetite or feeding disturbances, vomiting, diarrhea, decreased activity and/or increased

Nicholas Kilgore.TXT

sleep and URI symptoms. Similarly ill
contacts include his father.

He complains of a sore throat. This began yesterday. Associated symptoms include cough, diarrhea, fever, nasal congestion and vomiting. He reports recent exposure to illness from family members.

Concerning cough, the cough has been present since yesterday. The cough can best be described as hacking and phlegmy. He denies shortness of breath and wheezing. Other symptoms include fever, nasal congestion and Decrease in activity. He denies wheezing. Recent exposure to illness from family members.

ROS:

CONSTITUTIONAL: Positive for fatigue. Negative for sleep disturbances.

EYES: Negative for eye drainage.

E/N/T: Positive for nasal congestion. Negative for ear pain.

CARDIOVASCULAR: Negative for chest pain.

RESPIRATORY: Negative for dyspnea and wheezing.

GASTROINTESTINAL: Positive for anorexia, diarrhea and (once) vomiting (twice).

Negative for abdominal pain or
nausea.

MUSCULOSKELETAL: Negative for gait abnormality.

INTEGUMENTARY: Negative for rash.

NEUROLOGICAL: Negative for headaches.

PMH/FMH/SH:

Past Medical History:

Seen and cleared by cardiology June 2008

Attention Deficit Hyperactivity Disorder

Autism: mild;

Social History:

Parents' Marital Status: Divorced. He Divorced. The parents have joint custody and he alternates between their homes.;

Father's name: Richard, and Mother's Name: Eleni Parent's Occupations: Mother's

Occupation: Employed at CCSD and

Father's Occupation: Employed at City of Las Vegas

Household: Lives with his sibling(s) (1 sister, 2 brothers). Alexandra 08-22-95,

Richard 06-29-00 Nicholas 6-29-00

Current Problems:

Abscess of face

ADHD

Attention deficit disorder, without hyperactivity

Attention deficit hyperactivity disorder

Bronchospasm NOS

Constipation

Fever presenting with conditions classified elsewhere

Low back pain

Moderate asthma (exacerbation)

Undescended testicle

Immunizations:

Pneumococcal 7-valent conjugate vaccine , IM 3/28/2001

Pneumococcal 7-valent conjugate vaccine , IM 5/23/2001

DTaP (Diphtheria-Tetanus-acellular Pertussis) 9/16/2000

DTaP (Diphtheria-Tetanus-acellular Pertussis) 11/21/2000

DTaP (Diphtheria-Tetanus-acellular Pertussis) 3/7/2001

Nicholas Kilgore.TXT

DTaP (Diphtheria-Tetanus-acellular Pertussis) 10/4/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 6/7/2005
Haemophilus influenza b (Hib), PRP-D, booster 9/16/2000
Haemophilus influenza b (Hib), PRP-D, booster 11/21/2000
Haemophilus influenza b (Hib), PRP-D, booster 3/7/2001
Haemophilus influenza b (Hib), PRP-D, booster 10/4/2001
Hepatitis B (pedi/adol, 3-dose schedule) 7/13/2000
Hepatitis B (pedi/adol, 3-dose schedule) 8/24/2000
Hepatitis B (pedi/adol, 3-dose schedule) 3/7/2001
Hepatitis A, pedi/adol dose (2-dose schedule) 7/1/2002
Hepatitis A, pedi/adol dose (2-dose schedule) 7/22/2003
IPV Poliovirus, inactivated 9/16/2000
IPV Poliovirus, inactivated 11/21/2000
IPV Poliovirus, inactivated 1/29/2002
IPV Poliovirus, inactivated 6/7/2005
MMR (Measles-Mumps-Rubella), live 7/17/2001
MMR (Measles-Mumps-Rubella), live 6/7/2005
Varicella, live 7/17/2001
Varicella, live 4/13/2007
Influenza, live, intranasal 9/27/2012
Influenza Virus Vaccine 10/4/2006
Influenza Virus Vaccine 10/22/2007
Meningococcal Polysaccharide Diphtheria Toxoid Con 8/11/2011
Tdap (Tetanus toxoid, reduced DTaP adsorbed) 8/11/2011

Current Medications:

Adderall XR 30mg Capsules, Extended Release Take 1 cap by mouth qam
Qnasl 80mcg/lactuation Nasal Spray 1 spray bilateral nostrils daily
Advil

OBJECTIVE:

Vitals:

Current: 8/12/2013 10:00:37 AM
Wt: 126.6 lbs (84.75%)
T: 98.6 F (temporal); P: 112 bpm; R: 24 bpm
O2 Sat: 97 % (room air)

Exams:

GENERAL: well developed; well nourished; no apparent distress
HYDRATION STATUS: normal
HEAD: normocephalic
EYES: lids and conjunctiva are normal; pupils and irises are normal;
E/N/T: normal external ears and nose; normal external auditory canals and tympanic
membranes; Nasal Septum/Mucosa:
partially obscured by clear drainage; Lips, Teeth and Gums: normal; Oropharynx:
erythematous posterior pharynx;
NECK: Neck is supple with full range of motion;
RESPIRATORY: normal respiratory rate and pattern with no distress; normal breath
sounds with no rales, rhonchi,
wheezes or rubs;
CARDIOVASCULAR: S1, S2 auscultated with no adventitious sounds. No murmur appreciated
on exam today.;
GASTROINTESTINAL: no masses palpated; nontender; no organomegaly
MUSCULOSKELETAL: normal gait;
SKIN: No ulcerations, lesions or rashes are noted.
NEUROLOGIC: Normal for age

Lab/Test Results:

LABORATORY RESULTS:

Rapid Strep: negative;

ASSESSMENT:

466.0 Acute bronchitis
780.61 Fever presenting with conditions classified elsewhere
462 Sore Throat

ORDERS:

Meds Prescribed:

Azithromycin 250mg Tablet Take 2 tablet(s) by mouth on day 1 then 1 tablet every day for the next 4 days. #6 (Six)
tablet(s) Refills: 0

Radiology/Test Orders:

Noninvasive ear or pulse oximetry for oxygen saturation; single determination
(In-House)

Lab Orders:

Throat culture (Send-Out)
Group A Streptococcus detection by immunoassay with direct optical observation
(In-House)

Procedures Ordered:

Handling and/or conveyance of specimen for transfer from the physician's office to a laboratory (In-House)

PLAN:

Acute bronchitis

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Signs and symptoms of respiratory distress discussed, and saline spray, humidifier.

FOLLOW-UP: Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as fever, Respiratory distress, Unable to Feed, vomiting, and persistent or worsening cough.

Prescriptions:

Azithromycin 250mg Tablet Take 2 tablet(s) by mouth on day 1 then 1 tablet every day for the next 4 days. #6 (Six)
tablet(s) Refills: 0

Orders:

Noninvasive ear or pulse oximetry for oxygen saturation; single determination
(In-House)

Fever presenting with conditions classified elsewhere

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Continue current medication regimen, Finish all medications, Signs and symptoms of dehydration discussed, reduce fever with acetaminophen or ibuprofen, and increase fluid intake.

FOLLOW-UP: Advised to call if there is no improvement 2 days. Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as Persistent uncontrollable fevers or Temp > 104.5 and vomiting.

Nicholas Kilgore.TXT

Sore Throat

LABORATORY: Labs ordered to be performed today include, throat culture, and Rapid Strep Test.

MEDICATIONS: Advised to take OTC Tylenol, Motrin, and Dosages discussed with parent.

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Continue current medication regimen,

Signs and symptoms of dehydration discussed, Signs and symptoms of respiratory distress discussed, reduce fever with

acetaminophen or ibuprofen, increase fluid intake, Saline spray, humidifier, and maintain a clear liquid diet.

FOLLOW-UP: Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as

Respiratory distress, Persistent uncontrollable fevers or Temp > 104.5, and

Persistent vomiting, unable to tolerate PO, decreased Urine output, lethargy.

Orders:

Handling and/or conveyance of specimen for transfer from the physician's office to a laboratory (In-House)

Throat culture (Send-Out)

Group A Streptococcus detection by immunoassay with direct optical observation (In-House)

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Kilgore, Nicholas 06/29/2000

Office/Outpatient Visit

Visit Date: Fri, Apr 12, 2013 03:42 pm

Provider: Sonya Aikels, DO (Supervisor: John Lepore, DO; Assistant: Sarah Whitney, MA)

Location: Kidfixers Pediatrics

Electronically signed by Sonya Aikels, DO on 04/19/2013 08:01:46 AM

Printed on 10/06/2014 at 12:12 pm.

SUBJECTIVE:

CC:

Nicholas is a 12 year old male. Medical problems to be addressed today include ADHD. The history is obtained from the patient's mother.

HPI:

Nicholas is here for follow-up on ADHD treatment. Most recent grades vary widely, from A's and B's to D's and F's. per patient he is not forced to do his homework at father's home. he often does not complete homework because "he doesn't feel like it" at dad's home. he reports that his brother tries to make him do homework. mother has enrolled patient in football, they are currently in spring camp. he and mother deny knowing what grades he has currently or completed last semester

Current symptoms of ADD include: easily distracted, not following through on instructions, difficulty organizing tasks and activities, loses things, forgetful and difficulty following directions.

patient has missed 30 days of school this year due to asthma exacerbation. he has appointment with pulmonologist next week for medication re-check. mother is completing forms for CCSF for supplemental home services for education. he

Nicholas Kilgore.TXT

denies using inhaler during school, but denies knowing what makes him cough. mother also concerned that patient's diet now monitored at father's home. he is "left unattended all the time" and has been known to drink many cokes on occasion without supervision.

ROS:

CONSTITUTIONAL: Negative for growth problems, fatigue, unexplained fevers, and weight loss.

EYES: Negative for eye drainage and "lazy eye".

E/N/T: Negative for nasal congestion and thrush.

CARDIOVASCULAR: Negative for cyanotic spells.

RESPIRATORY: Negative for apneic episodes and wheezing.

GASTROINTESTINAL: Negative for anorexia, constipation, diarrhea, feeding or food intolerances and vomiting.

INTEGUMENTARY: Negative for atopic dermatitis, eczema, jaundice, rash, seborrhea and skin lesion(s).

NEUROLOGICAL: Positive for symptoms of possible ADD/ADHD. Negative for abnormal tone, developmental delay, involuntary movements, poor suck or seizures.

PMH/FMH/SH:

Past Medical History:

Seen and cleared by cardiology June 2008

Attention Deficit Hyperactivity Disorder

Autism: mild;

Social History:

Parents' Marital Status: Divorced. He Divorced. The parents have joint custody and he alternates between their homes.. ,

Father's name: Richard, and Mother's Name: Eleni Parent's Occupations: Mother's

Occupation: Employed at CCSD and

Father's Occupation: Employed at City of Las Vegas

Household: Lives with his sibling(s) (1 sister, 2 brothers). Alexandra 08-22-95, Richard 06-29-00 Nicholas 6-29-00

Current Problems:

Abscess of face

ADHD

Attention deficit disorder, without hyperactivity

Attention deficit hyperactivity disorder

Bronchospasm NOS

Constipation

Fever presenting with conditions classified elsewhere

Low back pain

Moderate asthma (exacerbation)

Undescended testicle

Immunizations:

Pneumococcal 7-valent conjugate vaccine , IM 3/28/2001

Pneumococcal 7-valent conjugate vaccine , IM 5/23/2001

DTaP (Diphtheria-Tetanus-acellular Pertussis) 9/16/2000

DTaP (Diphtheria-Tetanus-acellular Pertussis) 11/21/2000

DTaP (Diphtheria-Tetanus-acellular Pertussis) 3/7/2001

DTaP (Diphtheria-Tetanus-acellular Pertussis) 10/4/2001

DTaP (Diphtheria-Tetanus-acellular Pertussis) 6/7/2005

Haemophilus influenza b (Hib), PRP-D, booster 9/16/2000

Haemophilus influenza b (Hib), PRP-D, booster 11/21/2000

Haemophilus influenza b (Hib), PRP-D, booster 3/7/2001

Haemophilus influenza b (Hib), PRP-D, booster 10/4/2001

Hepatitis B (pedi/adol, 3-dose schedule) 7/13/2000

Nicholas Kilgore.TXT

Hepatitis B (pedi/adol, 3-dose schedule) 8/24/2000
Hepatitis B (pedi/adol, 3-dose schedule) 3/7/2001
Hepatitis A, pedi/adol dose (2-dose schedule) 7/1/2002
Hepatitis A, pedi/adol dose (2-dose schedule) 7/22/2003
IPV Poliovirus, inactivated 9/16/2000
IPV Poliovirus, inactivated 11/21/2000
IPV Poliovirus, inactivated 1/29/2002
IPV Poliovirus, inactivated 6/7/2005
MMR (Measles-Mumps-Rubella), live 7/17/2001
MMR (Measles-Mumps-Rubella), live 6/7/2005
Varicella, live 7/17/2001
Varicella, live 4/13/2007
Influenza, live, intranasal 9/27/2012
Influenza virus vaccine 10/4/2006
Influenza virus vaccine 10/22/2007
Meningococcal Polysaccharide Diphtheria Toxoid Con 8/11/2011
Tdap (Tetanus toxoid, reduced DTaP adsorbed) 8/11/2011

Allergies:

Sulfas:

Milk & dairy products:

Current Medications:

Adderall XR 30mg Capsules, Extended Release Take 1 cap by mouth qam
Clindamycin/Benzoyl Peroxide 1%/5% Topical Gel Apply thin film to affected area bid
Concerta 27mg Tablets, Extended Release Take 1 tablet(s) by mouth qam
Intuniv 2mg Tablets, Extended Release Take 1 tablet(s) by mouth daily
Prednisone 20mg Tablet 2 tabs by mouth today then 1 tab by mouth per day after
Advil

OBJECTIVE:

Vitals:

Current: 4/12/2013 3:42:56 PM
Ht: 5 ft, 3 in (76.16%); Wt: 112.2 lbs (74.29%); BMI: 19.9 (71.28%)
T: 98.6 F (temporal); BP: 106/64 mm Hg; P: 84 bpm; R: 16 bpm

Exams:

GENERAL: well developed, well nourished, in no apparent distress Head Normocephalic
Atraumatic
EYES: lids and conjunctiva are normal; fundoscopic exam reveals red reflex present
bilaterally;
E/N/T: normal external ears and nose;; normal external auditory canals and tympanic
membranes; Nasal
Septum/Mucosa: partially obscured by clear drainage; Nasal Congestion noted marked;
Lips, Teeth and Gums: normal;
Oropharynx: normal mucosa, palate, and posterior pharynx;
NECK: Neck is supple with full range of motion;
RESPIRATORY: normal respiratory rate and pattern with no distress; Positive air
entry bilaterally with no abnormal sounds
noted
CARDIOVASCULAR: S1 S2. No murmur appreciated on exam today; no murmurs;
GASTROINTESTINAL: normal bowel sounds;
LYMPHATIC: no enlargement of cervical nodes;
MUSCULOSKELETAL: normal gait; No obvious gross or fine motor abnormalities

ASSESSMENT:

314.01 Attention deficit hyperactivity disorder
493.02 Moderate asthma (exacerbation)

ORDERS:

Meds Prescribed:

Refill of: Concerta (Methylphenidate HCl) 27mg Tablets, Extended Release Take 1
tablet(s) by mouth qam #30 (Thirty)
tablet(s) Refills: 0

PLAN:

Attention deficit hyperactivity disorder mother wishes to continue on same dose
meds. she is happy with patient's
progress, sees noticeable improvement when on meds.

RECOMMENDATIONS given include: provide discipline in home, stressed to patient
importance of daily meds, taking
responsibility for homework, not relying on brother/parents for prompting.

Prescriptions:

Refill of: Concerta (Methylphenidate HCl) 27mg Tablets, Extended Release Take 1
tablet(s) by mouth qam #30 (Thirty)
tablet(s) Refills: 0

Moderate asthma (exacerbation)

MEDICATIONS: Advised to take OTC Tylenol and Motrin.

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Signs and
symptoms of respiratory
distress discussed, reduce fever with acetaminophen or ibuprofen, , , and Saline
spray, humidifier.

FOLLOW-UP: Advised to call if there is no improvement 5 days. Schedule follow-up
appointments on a p.r.n. basis..

Instructed to call immediately or seek care at the ER if he develops new or
worsening symptoms, such as Respiratory
distress and Persistent uncontrollable fevers or Temp > 104.5.

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Kilgore, Nicholas 06/29/2000

Office/Outpatient Visit

Visit Date: Fri, Mar 15, 2013 03:01 pm

Provider: Sonya Aikels, DO (Supervisor: John Lepore, DO; Assistant: Sarah Whitney,
MA)

Location: Kidfixers Pediatrics

Electronically signed by Sonya Aikels, DO on 03/26/2013 08:34:15 AM

Printed on 10/06/2014 at 12:12 pm.

SUBJECTIVE:

CC:

Nicholas is a 12 year old male. He presents with low back pain and HIT TO BACK OF
HEAD. Medical problems to be
addressed today include attention deficit disorder and ADHD. The history is
obtained from the patient's mother.

HPI:

patient complains of low back pain since last week when he was pushed down into a
bench during PE. he complains of
intermittent pain due to this

Nicholas Kilgore.TXT

In regard to the attention deficit disorder, without hyperactivity, Nicholas is here for follow-up on ADHD treatment. He is currently taking vyvanse, intuniv. "Drug holidays" are not taken. This dose is moderately effective. The main problems he is having currently include school fight--another child hit patient in the back of head 3 times. parent requesting med change

patient got RPC'd for fighting while in father's custody. per patient he is not sleeping or eating correctly while at father's home. mother states he calls stating "i was up all night". patient states its because he is "hyped up on coke or dr pepper" sometimes but then states that he doesn't sleep even when he doesn't drink caffeine. mother thinks he is scared, or angry and anxious.

patient was dropped off by father last friday night at the movies with twin brother and friend. patient had asthma attack while in the movies, brother did chest physical therapy to help child. per mother patient's father was at a bar drinking at the same time. patient's friend christian called patient's father, who then came to pick up patient after the movie was finished.

per mother patient is doing better in school.

patient states last week he was pushed into a bench striking his back during PE. patient states his back hurt from this. he did not receive any medical attention for this.

per mother, one day his father left him from 12am - 3 am in the middle of the night stating he 'was called into work'.

ROS:

CONSTITUTIONAL: Negative for failure to thrive, fatigue, unexplained fevers and weight change.

EYES: Negative for apparent vision problems and eye drainage.

E/N/T: Negative for apparent hearing problems, ear pain, mouth-breathing and persistent sore throat.

CARDIOVASCULAR: Negative for chest pain and cyanotic spells.

RESPIRATORY: Negative for persistent cough and exposure to tobacco smoke.

GASTROINTESTINAL: Negative for abdominal pain, anorexia and diarrhea.

MUSCULOSKELETAL: Negative for joint pain, joint swelling and gait abnormality.

INTEGUMENTARY: Negative for rash.

NEUROLOGICAL: Positive for symptoms of possible ADD/ADHD. Negative for dizziness, fainting or seizures.

PMH/FMH/SH:

Past Medical History:

Seen and cleared by cardiology June 2008

Attention Deficit Hyperactivity Disorder

Autism: mild;

Social History:

Parents' Marital Status: Divorced. He Divorced. The parents have joint custody and he alternates between their homes.

Father's name: Richard, and Mother's Name: Eleni Parent's Occupations: Mother's

Occupation: Employed at CCSD and

Father's Occupation: Employed at City of Las Vegas

Household: Lives with his sibling(s) (1 sister, 2 brothers). Alexandra 08-22-95, Richard 06-29-00 Nicholas 6-29-00

Nicholas Kilgore.TXT

Current Problems:

Abscess of face

ADHD

Attention deficit disorder, without hyperactivity

Attention deficit hyperactivity disorder

Bronchospasm NOS

Constipation

Fever presenting with conditions classified elsewhere

Moderate asthma (exacerbation)

Undescended testicle

Immunizations:

Pneumococcal 7-valent conjugate vaccine , IM 3/28/2001

Pneumococcal 7-valent conjugate vaccine , IM 5/23/2001

DTaP (Diphtheria-Tetanus-acellular Pertussis) 9/16/2000

DTaP (Diphtheria-Tetanus-acellular Pertussis) 11/21/2000

DTaP (Diphtheria-Tetanus-acellular Pertussis) 3/7/2001

DTaP (Diphtheria-Tetanus-acellular Pertussis) 10/4/2001

DTaP (Diphtheria-Tetanus-acellular Pertussis) 6/7/2005

Haemophilus influenza b (Hib), PRP-D, booster 9/16/2000

Haemophilus influenza b (Hib), PRP-D, booster 11/21/2000

Haemophilus influenza b (Hib), PRP-D, booster 3/7/2001

Haemophilus influenza b (Hib), PRP-D, booster 10/4/2001

Hepatitis B (pedi/adol, 3-dose schedule) 7/13/2000

Hepatitis B (pedi/adol, 3-dose schedule) 8/24/2000

Hepatitis B (pedi/adol, 3-dose schedule) 3/7/2001

Hepatitis A, pedi/adol dose (2-dose schedule) 7/1/2002

Hepatitis A, pedi/adol dose (2-dose schedule) 7/22/2003

IPV Poliovirus, inactivated 9/16/2000

IPV Poliovirus, inactivated 11/21/2000

IPV Poliovirus, inactivated 1/29/2002

IPV Poliovirus, inactivated 6/7/2005

MMR (Measles-Mumps-Rubella), live 7/17/2001

MMR (Measles-Mumps-Rubella), live 6/7/2005

Varicella, live 7/17/2001

Varicella, live 4/13/2007

Influenza, live, intranasal 9/27/2012

Influenza Virus vaccine 10/4/2006

Influenza Virus vaccine 10/22/2007

Meningococcal Polysaccharide Diphtheria Toxoid Con 8/11/2011

Tdap (Tetanus toxoid, reduced DTaP adsorbed) 8/11/2011

Allergies:

Sulfas:

Milk & dairy products:

Current Medications:

Adderall XR 30mg Capsules, Extended Release Take 1 cap by mouth qam

Intuniv 2mg Tablets, Extended Release Take 1 tablet(s) by mouth daily

Prednisone 20mg Tablet 2 tabs by mouth today then 1 tab by mouth per day after

Advil

OBJECTIVE:

vitals:

Current: 3/15/2013 3:02:28 PM

Ht: 5 ft, 3 in (78.37%); Wt: 108 lbs (69.71%); BMI: 19.1 (63.09%)

T: 99.4 F (temporal); BP: 118/70 mm Hg; P: 96 bpm; R: 20 bpm

Exams:

Nicholas Kilgore.TXT

GENERAL: well developed, well nourished, in no apparent distress Head Normocephalic Atraumatic
EYES: lids and conjunctiva are normal; fundoscopic exam reveals red reflex present bilaterally;
E/N/T: normal external ears and nose;; normal external auditory canals and tympanic membranes; Nasal
Septum/Mucosa: partially obscured by clear drainage; Nasal Congestion noted marked;
Lips, Teeth and Gums: normal;
Oropharynx: normal mucosa, palate, and posterior pharynx;
NECK: Neck is supple with full range of motion;
RESPIRATORY: normal respiratory rate and pattern with no distress; Positive air entry bilaterally with no abnormal sounds noted
CARDIOVASCULAR: S1 S2. No murmur appreciated on exam today; no murmurs;
GASTROINTESTINAL: normal bowel sounds;
LYMPHATIC: no enlargement of cervical nodes;
MUSCULOSKELETAL: normal gait; No obvious gross or fine motor abnormalities

ASSESSMENT:

314.00 Attention deficit disorder, without hyperactivity
724.2 Low back pain

ORDERS:

Meds Prescribed:

Refill of: Intuniv (Guanfacine HCl) 2mg Tablets, Extended Release Take 1 tablet(s) by mouth daily #30 (Thirty) tablet(s)

Refills: 3

Concerta (Methylphenidate HCl) 27mg Tablets, Extended Release Take 1 tablet(s) by mouth qam #30 (Thirty) tablet(s)

Refills: 0

PLAN:

Attention deficit disorder, without hyperactivity

RECOMMENDATIONS given include: discussed discipline, school problems, successful learning techniques.

Prescriptions:

Refill of: Intuniv (Guanfacine HCl) 2mg Tablets, Extended Release Take 1 tablet(s) by mouth daily #30 (Thirty) tablet(s)

Refills: 3

Concerta (Methylphenidate HCl) 27mg Tablets, Extended Release Take 1 tablet(s) by mouth qam #30 (Thirty) tablet(s)

Refills: 0

Low back pain

RECOMMENDATIONS given include: bed rest, alternating cold packs and moist heat, and home back strengthening exercises.

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Kilgore, Nicholas 06/29/2000

Office/Outpatient Visit

Visit Date: Wed, Feb 13, 2013 11:37 am

Nicholas Kilgore.TXT

Provider: Sonya Aikels, DO (Supervisor: John Lepore, DO; Assistant: Veronica Castillo, MA)
Location: Kidfixers Pediatrics

Electronically signed by Sonya Aikels, DO on 02/25/2013 08:01:32 AM
Printed on 10/06/2014 at 12:12 pm.
SUBJECTIVE:

CC:

Nicholas is a 12 year old male. He presents with cold symptoms. The history is obtained from the patient's mother.

HPI:

Patient complains of cold symptoms. These have been present for the past 3 weeks. Symptoms include cough, nasal congestion, nasal discharge and wheezing. He has not had fever, poor appetite, reduced activity or sore throat. He has not been exposed to ill contacts.

patient's mother picked him up from father on monday 2/10. per per mother father again refused to take him to the physician while in his care. he "took him out during a blizzard". he continues to throw up mucus. patient reported this to his father who stated "he was fine". now patient is coughing so much that he could not catch his breath. he is throwing up mucus. he is having wheezing and shortness of breath. mother reports a hum during breaths. per patient his throat feels "scratchy" or "itchy" but he denies that this sensation is making him cough.

per mother it is possible that his eating wheat and dairy at father's house is exacerbating his cough. per patient he tells father that he cannot eat these foods but father says "you can eat it, you're fine". at father's home he eats tostino's pizza rolls, hot pockets, sandwiches, nachos, tacos.

mother wonders if patient should have a pulmonary referral for evaluation of chronic cough. per mother she "gets him better" then he goes to father's home and he returns in worse physical condition. per mother father and patient went to cold creek and went target shooting in the blizzard. the cold weather made him cough more but patient states he said "whatever" because it was shooting. he takes nebulizer tid ad father's home.

while in mother's custody he takes advair bid, proair q 3-4 hours when home from school, when he attends school proair tid, vyvanse, saline mist, zyrtec D for extreme mucus, intuniv

at father's house he takes only albuterol when mother texts him to remind the meds.

Concerning cough, it has been present for the past 3 weeks. The cough can best be described as recent, Deep, "In the chest", and nocturnal. Disturbs sleep. Respiratory symptoms include shortness of breath and wheezing. Other symptoms include nasal congestion, nasal discharge, Poor or disturbed sleep and wheezing. He denies fever. Nicholas is still feeding as usual.

ROS:

CONSTITUTIONAL: Negative for fatigue and sleep disturbances.
EYES: Negative for eye drainage.

Nicholas Kilgore.TXT

E/N/T: Positive for nasal congestion. Negative for ear pain.
CARDIOVASCULAR: Negative for chest pain, cyanotic spells, edema, and poor exercise tolerance.
RESPIRATORY: Positive for persistent cough and wheezing. Negative for dyspnea.
GASTROINTESTINAL: Negative for anorexia, diarrhea, nausea and vomiting.
MUSCULOSKELETAL: Negative

INTEGUMENTARY: Negative for rash.
NEUROLOGICAL: Negative for headaches.

PMH/FMH/SH:

Past Medical History:

Seen and cleared by cardiology June 2008

Attention Deficit Hyperactivity Disorder

Autism: mild;

Social History:

Parents' Marital Status: Divorced. He Divorced. The parents have joint custody and he alternates between their homes.;

Father's name: Richard, and Mother's Name: Eleni Parent's Occupations: Mother's

Occupation: Employed at CCSD and

Father's Occupation: Employed at City of Las Vegas

Household: Lives with his sibling(s) (1 sister, 2 brothers). Alexandra 08-22-95,
Richard 06-29-00 Nicholas 6-29-00

Current Problems:

Abscess of face

Acute bronchitis

ADHD

Attention deficit disorder, without hyperactivity

Attention deficit hyperactivity disorder

Bronchospasm NOS

Cold symptoms

Constipation

Cough

Fever presenting with conditions classified elsewhere

Moderate asthma (exacerbation)

Neck pain

Undescended testicle

Immunizations:

Pneumococcal 7-valent conjugate vaccine , IM 3/28/2001

Pneumococcal 7-valent conjugate vaccine , IM 5/23/2001

DTaP (Diphtheria-Tetanus-acellular Pertussis) 9/16/2000

DTaP (Diphtheria-Tetanus-acellular Pertussis) 11/21/2000

DTaP (Diphtheria-Tetanus-acellular Pertussis) 3/7/2001

DTaP (Diphtheria-Tetanus-acellular Pertussis) 10/4/2001

DTaP (Diphtheria-Tetanus-acellular Pertussis) 6/7/2005

Haemophilus influenza b (Hib), PRP-D, booster 9/16/2000

Haemophilus influenza b (Hib), PRP-D, booster 11/21/2000

Haemophilus influenza b (Hib), PRP-D, booster 3/7/2001

Haemophilus influenza b (Hib), PRP-D, booster 10/4/2001

Hepatitis B (pedi/adol, 3-dose schedule) 7/13/2000

Hepatitis B (pedi/adol, 3-dose schedule) 8/24/2000

Hepatitis B (pedi/adol, 3-dose schedule) 3/7/2001

Hepatitis A, pedi/adol dose (2-dose schedule) 7/1/2002

Hepatitis A, pedi/adol dose (2-dose schedule) 7/22/2003

IPV Poliovirus, inactivated 9/16/2000

IPV Poliovirus, inactivated 11/21/2000

IPV Poliovirus, inactivated 1/29/2002

IPV Poliovirus, inactivated 6/7/2005

Nicholas Kilgore.TXT

MMR (Measles-Mumps-Rubella), live 7/17/2001
MMR (Measles-Mumps-Rubella), live 6/7/2005
Varicella, live 7/17/2001
Varicella, live 4/13/2007
Influenza, live, intranasal 9/27/2012
Influenza Virus Vaccine 10/4/2006
Influenza Virus Vaccine 10/22/2007
Meningococcal Polysaccharide Diphtheria Toxoid Con 8/11/2011
Tdap (Tetanus toxoid, reduced DTaP adsorbed) 8/11/2011

Allergies:

Sulfas:

Milk & dairy products:

Current Medications:

Adderall XR 30mg Capsules, Extended Release Take 1 cap by mouth qam
Advair Diskus 100mcg/50mcg per 1blister Inhalation Powder Inhale 1 puff(s) bid
Albuterol HFA 90mcg/lactuation Oral Inhaler 2-4 puffs every 4 hours as needed.
Azithromycin 250mg Tablet Take 2 tablet(s) by mouth on day 1 then 1 tablet every day
for the next 4 days.
Intuniv 2mg Tablets, Extended Release Take 1 tablet(s) by mouth daily
Prednisone 20mg Tablet 2 tabs by mouth today then 1 tab by mouth per day after
Vyvanse 60mg Capsules Take 1 capsule(s) by mouth-qam

OBJECTIVE:

Vitals:

Current: 2/13/2013 11:38:25 AM
Wt: 111.2 lbs (75.71%)
T: 97.9 F (temporal); P: 85 bpm; R: 16 bpm
O2 Sat: 98 % (room air)

Exams:

GENERAL: well developed, well nourished, in no apparent distress Head Normocephalic
Atraumatic
EYES: lids and conjunctiva are normal; fundoscopic exam reveals red reflex present
bilaterally;
E/N/T: normal external ears and nose;; normal external auditory canals and tympanic
membranes; Nasal
Septum/Mucosa: partially obscured by clear drainage; Nasal Congestion noted marked;
Lips, Teeth and Gums: normal;
Oropharynx: normal mucosa, palate, and posterior pharynx;
NECK: Neck is supple with full range of motion;
RESPIRATORY: normal respiratory rate and pattern with no distress; Positive air
entry bilaterally with no abnormal sounds
noted
CARDIOVASCULAR: S1 S2. No murmur appreciated on exam today; no murmurs;
GASTROINTESTINAL: normal bowel sounds;
LYMPHATIC: no enlargement of cervical nodes;
MUSCULOSKELETAL: normal gait; No obvious gross or fine motor abnormalities

ASSESSMENT:

786.2 Cough
460 Cold symptoms

ORDERS:

Meds Prescribed:

Bromfed-DM (Brompheniramine/Dextromethorphan/Pseudoephedrine) Syrup Take 1
teaspoon by mouth q4h prn #4

Nicholas Kilgore.TXT

(Four) oz Refills: 0

Acetaminophen/Codeine 120mg/12mg per 5ml Oral Suspension 2 tsp po qhs prn cough
#1 (One) 480 ml bottle Refills: 0

Radiology/Test Orders:

Noninvasive ear or pulse oximetry for oxygen saturation; single determination
(In-House)

PLAN:

Cough

MEDICATIONS: Advised to take OTC Tylenol, Motrin, and Dosages discussed with parent.
REFERRALS: Referral initiated to a pulmonologist (for evaluation of chronic cough).

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Continue current medication regimen, Finish all medications, Signs and symptoms of respiratory distress discussed, reduce fever with acetaminophen or ibuprofen, Saline spray, humidifier, and sleep position.

FOLLOW-UP: Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as Respiratory distress, Persistent uncontrollable fevers or Temp > 104.5, and vomiting.

Prescriptions:

Acetaminophen/Codeine 120mg/12mg per 5ml Oral Suspension 2 tsp po qhs prn cough
#1 (One) 480 ml bottle Refills: 0
given at mother's request for sleep aid during weekend

Cold symptoms

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Continue current medication regimen, Signs and symptoms of respiratory distress discussed, reduce fever with acetaminophen or ibuprofen, and Saline spray, humidifier.

FOLLOW-UP: Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as Respiratory distress, Persistent uncontrollable fevers or Temp > 104.5, Persistent vomiting, unable to tolerate PO, decreased Urine output, lethargy, and vomiting.

Prescriptions:

Bromfed-DM (Brompheniramine/Dextromethorphan/Pseudoephedrine) Syrup Take 1
teaspoon by mouth q4h prn #4
(Four) oz Refills: 0

Orders:

Noninvasive ear or pulse oximetry for oxygen saturation; single determination
(In-House)

CPT ® is a registered trademark of the American Medical Association

Kilgore, Nicholas 06/29/2000

Office/Outpatient Visit

Visit Date: Wed, Jan 30, 2013 03:34 pm

Provider: Sonya Aikels, DO (Supervisor: John Lepore, DO; Assistant: Sarah Whitney,

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Nicholas Kilgore.TXT

MA)

Location: Kidfixers Pediatrics

Electronically signed by Sonya Aikels, DO on 02/08/2013 08:19:33 AM

Printed on 10/06/2014 at 12:12 pm.

SUBJECTIVE:

CC:

Nicholas is a 12 year old male. He presents with cold symptoms and cough. The history is obtained from the patient's mother.

HPI:

Patient complains of cold symptoms. this is the 2nd week in a row that mother picked up patient from father's house with illness. patient states he asked father to bring him to the dr's office. per patient father told him "suck it up, be a man". per patient he vomited 20-30 times on thursday and 10-15 times on friday. in addition he was coughing and felt as if he was wheezing in his chest. he also felt that his chest was tight both days. he was instructed on thursday 1/23 per father to take albuterol inhaler "2 puffs every 2 hours from 8 am til 6 'm" when his father returned from work. he admits to speaking with father by phone approx 5 times on that same day with status updates. he did as instructed.

the next day father was off from work but spend much of the day "running errands". he did albuterol q 2 hours as instructed by father again that day. patient states he felt "a little better" after performing albuterol from approx 7 am until his father returned home several hours later. he was then home from 20 mins and then "went back out". father returned home approx 3-4 pm per patient.

patient was returned to mother's home at approx 7 pm at which time he was ill.

Dx with cough; it has been present for the past 7 days. The cough can best be described as persistent, dry, and nocturnal. Disturbs sleep. Respiratory symptoms include shortness of breath and wheezing. Nicholas is still feeding as usual.

ROS:

CONSTITUTIONAL: Negative for growth problems, fatigue, unexplained fevers, and weight loss.

EYES: Negative for eye drainage and "lazy eye".

E/N/T: Negative for nasal congestion and thrush.

CARDIOVASCULAR: Negative for cyanotic spells.

RESPIRATORY: Positive for persistent cough, dyspnea and wheezing. Negative for apneic episodes.

GASTROINTESTINAL: Negative for anorexia, constipation, diarrhea, feeding or food intolerances and vomiting.

MUSCULOSKELETAL: Negative for joint swelling.

INTEGUMENTARY: Negative for atopic dermatitis, eczema, jaundice, rash, seborrhea and skin lesion(s).

NEUROLOGICAL: Negative for abnormal tone, developmental delay, involuntary movements, poor suck and seizures.

PMH/FMH/SH:

Past Medical History:

Seen and cleared by cardiology June 2008

Attention Deficit Hyperactivity Disorder

Page 42

Nicholas Kilgore.TXT

Autism: mild;

Social History:

Parents' Marital Status: Divorced. He Divorced. The parents have joint custody and he alternates between their homes.; ,
Father's name: Richard, and Mother's Name: Eleni Parent's Occupations: Mother's Occupation: Employed at CCSD and
Father's Occupation: Employed at City of Las Vegas
Household: Lives with his sibling(s) (1 sister, 2 brothers). Alexandra 08-22-95, Richard 06-29-00 Nicholas 6-29-00

Current Problems:

Abscess of face
ADHD
Attention deficit hyperactivity disorder
Bronchospasm NOS
Cold symptoms
Constipation
Cough
Fever presenting with conditions classified elsewhere
Moderate asthma (exacerbation)
Neck pain
Undescended testicle

Immunizations:

Pneumococcal 7-valent conjugate vaccine , IM 3/28/2001
Pneumococcal 7-valent conjugate vaccine , IM 5/23/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 9/16/2000
DTaP (Diphtheria-Tetanus-acellular Pertussis) 11/21/2000
DTaP (Diphtheria-Tetanus-acellular Pertussis) 3/7/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 10/4/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 6/7/2005
Haemophilus influenza b (Hib), PRP-D, booster 9/16/2000
Haemophilus influenza b (Hib), PRP-D, booster 11/21/2000
Haemophilus influenza b (Hib), PRP-D, booster 3/7/2001
Haemophilus influenza b (Hib), PRP-D, booster 10/4/2001
Hepatitis B (pedi/adol, 3-dose schedule) 7/13/2000
Hepatitis B (pedi/adol, 3-dose schedule) 8/24/2000
Hepatitis B (pedi/adol, 3-dose schedule) 3/7/2001
Hepatitis A, pedi/adol dose (2-dose schedule) 7/1/2002
Hepatitis A, pedi/adol dose (2-dose schedule) 7/22/2003
IPV Poliovirus, inactivated 9/16/2000
IPV Poliovirus, inactivated 11/21/2000
IPV Poliovirus, inactivated 1/29/2002
IPV Poliovirus, inactivated 6/7/2005
MMR (Measles-Mumps-Rubella), live 7/17/2001
MMR (Measles-Mumps-Rubella), live 6/7/2005
Varicella, live 7/17/2001
Varicella, live 4/13/2007
Influenza, live, intranasal 9/27/2012
Influenza Virus Vaccine 10/4/2006
Influenza Virus Vaccine 10/22/2007
Meningococcal Polysaccharide Diphtheria Toxoid Con 8/11/2011
Tdap (Tetanus toxoid, reduced DTaP adsorbed) 8/11/2011

Allergies:

Sulfas:
Milk & dairy products:

Current Medications:

Adderall XR 30mg Capsules, Extended Release Take 1 cap by mouth qam

Nicholas Kilgore.TXT

Intuniv 2mg Tablets, Extended Release Take 1 tablet(s) by mouth daily
Advair HFA 115/21 115mcg/21mcg per lactuation Oral Inhaler one puff bid
EpiPen Auto-Injector 1:1,000 Solution For Injection Use as directed
Xopenex HFA 45mcg/lactuation Oral Inhaler Inhale 2 puff(s) by mouth q 4 to 6 hr
please include aero chamber c Mask

OBJECTIVE:

Vitals:

Current: 1/30/2013 3:35:02 PM
Ht: 5 ft, 2.5 in (77.14%); Wt: 108 lbs (72.05%); BMI: 19.4 (68.05%)
T: 98.9 F (temporal); P: 98 bpm; R: 20 bpm
O2 Sat: 98 % (room air)

Exams:

GENERAL: well developed, well nourished, in no apparent distress Head NC/AT
EYES: lids and conjunctiva are normal; pupils and irises are normal; fundoscopic
exam reveals red reflex present
bilaterally;
E/N/T: normal external ears and nose;; normal external auditory canals and tympanic
membranes; Nose: normal nasal
mucosa, septum, turbinates, and sinuses; Oropharynx: normal mucosa, palate, and
posterior pharynx;
NECK: Neck is supple with full range of motion;
RESPIRATORY: decreased breath sounds in the bases;
CARDIOVASCULAR: normal rate and rhythm without murmurs; normal S1 and S2 heart
sounds with no S3, S4, rubs, or
clicks;; femoral pulses: 2+ amplitude, no bruits;
GASTROINTESTINAL: normal bowel sounds; no masses or tenderness; no organomegaly no
abdominal or inguinal
hernia;
LYMPHATIC: no enlargement of cervical nodes;
MUSCULOSKELETAL: Grossly normal motor exam
SKIN: no ulcerations, lesions or rashes
NEUROLOGIC: Age appropriate neuro exam

ASSESSMENT:

466.0 Acute bronchitis
786.2 Cough
460 Cold symptoms
314.00 Attention deficit disorder, without hyperactivity

ORDERS:

Meds Prescribed:

Albuterol HFA 90mcg/lactuation Oral Inhaler 2-4 puffs every 4 hours as needed. #2
(Two) 18 gm inhaler Refills: 0
Advair Diskus (Fluticasone/Salmeterol) 100mcg/50mcg per 1blister Inhalation Powder
Inhale 1 puff(s) bid #1 (One) 60
blister package Refills: 0
Prednisone (Prednisone) 20mg Tablet 2 tabs by mouth today then 1 tab by mouth per
day after #20 (Twenty) tablet(s)
Refills: 2
Azithromycin 250mg Tablet Take 2 tablet(s) by mouth on day 1 then 1 tablet every
day for the next 4 days. #6 (Six)
tablet(s) Refills: 0
Vyvanse (Lisdexamfetamine Dimesylate) 60mg Capsules Take 1 capsule(s) by mouth qam
#30 (Thirty) capsule(s)
Refills: 0
Refill of: Intuniv (Guanfacine HCl) 2mg Tablets, Extended Release Take 1 tablet(s)

Nicholas Kilgore.TXT

by mouth daily #30 (Thirty) tablet(s)
Refills: 3

Radiology/Test Orders:

Noninvasive ear or pulse oximetry for oxygen saturation; single determination
(In-House)
Radiologic exam, chest; 1 view, frontal (Send-Out)

PLAN:

Acute bronchitis

MEDICATIONS: Advised to take OTC Tylenol and Motrin.

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Signs and symptoms of respiratory distress discussed, reduce fever with acetaminophen or ibuprofen, , , and Saline spray, humidifier.

FOLLOW-UP: Advised to call if there is no improvement 5 days. Schedule follow-up appointments on a p.r.n. basis..

Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as Respiratory distress and Persistent uncontrollable fevers or Temp > 104.5.

Prescriptions:

Albuterol HFA 90mcg/lactuation Oral Inhaler 2-4 puffs every 4 hours as needed. #2 (Two) 18 gm inhaler Refills: 0

Advair Diskus (Fluticasone/Salmeterol) 100mcg/50mcg per 1blister Inhalation Powder Inhale 1 puff(s) bid #1 (One) 60 blister package Refills: 0

Prednisone (Prednisone) 20mg Tablet 2 tabs by mouth today then 1 tab by mouth per day after #20 (Twenty) tablet(s) Refills: 2

Azithromycin 250mg Tablet Take 2 tablet(s) by mouth on day 1 then 1 tablet every day for the next 4 days. #6 (Six) tablet(s) Refills: 0

Cough

RADIOLOGY ordered today include: XR chest limited 1 view.

MEDICATIONS: Advised to take OTC Tylenol, Motrin, and Dosages discussed with parent. RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Continue current medication regimen,

Finish all medications, Signs and symptoms of respiratory distress discussed, reduce fever with acetaminophen or ibuprofen, Saline spray, humidifier, and Sleep position.

FOLLOW-UP:.. Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as Respiratory distress, Persistent uncontrollable fevers or Temp > 104.5, and vomiting.

Orders:

Noninvasive ear or pulse oximetry for oxygen saturation; single determination
(In-House)
Radiologic exam, chest; 1 view, frontal (Send-Out)

Cold symptoms

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Continue current medication regimen, Signs and symptoms of respiratory distress discussed, reduce fever with acetaminophen or ibuprofen, and Saline spray,

Nicholas Kilgore.TXT

humidifier.

FOLLOW-UP: Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as Respiratory distress, Persistent uncontrollable fevers or Temp > 104.5, Persistent vomiting, unable to tolerate PO, decreased Urine output, lethargy, and vomiting.

Attention deficit disorder, without hyperactivity

Prescriptions:

Vyvanse (Lisdexamfetamine Dimesylate) 60mg Capsules Take 1 capsule(s) by mouth qam #30 (Thirty) capsule(s)

Refills: 0

Refill of: Intuniv (Guanfacine HCl) 2mg Tablets, Extended Release Take 1 tablet(s) by mouth daily #30 (Thirty) tablet(s)

Refills: 3

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Kilgore, Nicholas 06/29/2000

Office/Outpatient Visit

Visit Date: Tue, Jan 15, 2013 04:19 pm

Provider: Sonya Aikels, DO (Supervisor: John Lepore, DO; Assistant: Sarah Whitney, MA)

Location: Kidfixers Pediatrics

Electronically signed by Sonya Aikels, DO on 01/23/2013 10:43:16 AM

Printed on 10/06/2014 at 12:13 pm.

SUBJECTIVE:

CC:

Nicholas is a 12 year old male. He presents with cold symptoms and cough and arm and neck pain. The history is obtained from the patient's mother and Step-Father.

HPI:

Cold symptoms noted. These have been present since yesterday. Symptoms include cough, fever, nasal congestion and nasal discharge. He has not had wheezing. He has had recent exposure to illness from brother with similar illness. No medications have been tried for symptomatic relief.

Dx with cough; the cough has been present since yesterday. The cough can best be described as recent, dry, and nocturnal Disturbs sleep. He denies shortness of breath and wheezing. Nicholas is still feeding as usual.

patient slipped and fell on a step yesterday at approx 830 am landing on his neck. he denies any loss of consciousness, lethargy, altered mental status or other concerning symptoms. he went to school and performed as normal. he has not taken any meds for illness

ROS:

CONSTITUTIONAL: Positive for unexplained fevers.

EYES: Negative for apparent vision problems, eye drainage, and "lazy" eye.

E/N/T: Positive for nasal congestion and frequent rhinorrhea. Negative for ear pain.

CARDIOVASCULAR: Negative for cyanotic spells.

Nicholas Kilgore.TXT

RESPIRATORY: Positive for persistent cough. Negative for wheezing.
GASTROINTESTINAL: Negative for abdominal pain, constipation, diarrhea, nausea and vomiting.
GENITOURINARY: Negative for dysuria.
MUSCULOSKELETAL: Positive for muscle aches. Negative for weakness.
INTEGUMENTARY: Negative for eczema and rash.

PMH/FMH/SH:

Past Medical History:

Seen and cleared by cardiology June 2008
Attention Deficit Hyperactivity Disorder
Autism: mild;

Social History:

Parents' Marital Status: Divorced. He Divorced. The parents have joint custody and he alternates between their homes..
Father's name: Richard, and Mother's Name: Eleni Parent's Occupations: Mother's Occupation: Employed at CCSD and
Father's Occupation: Employed at City of Las Vegas
Household: Lives with his sibling(s) (1 sister, 2 brothers). Alexandra 08-22-95, Richard 06-29-00 Nicholas 6-29-00

Current Problems:

Abscess of face

ADHD

Attention deficit hyperactivity disorder

Bronchospasm NOS

Constipation

Fever presenting with conditions classified elsewhere

Moderate asthma (exacerbation)

Undescended testicle

Immunizations:

Pneumococcal 7-valent conjugate vaccine , IM 3/28/2001

Pneumococcal 7-valent conjugate vaccine , IM 5/23/2001

DTaP (Diphtheria-Tetanus-acellular Pertussis) 9/16/2000

DTaP (Diphtheria-Tetanus-acellular Pertussis) 11/21/2000

DTaP (Diphtheria-Tetanus-acellular Pertussis) 3/7/2001

DTaP (Diphtheria-Tetanus-acellular Pertussis) 10/4/2001

DTaP (Diphtheria-Tetanus-acellular Pertussis) 6/7/2005

Haemophilus influenza b (Hib), PRP-D, booster 9/16/2000

Haemophilus influenza b (Hib), PRP-D, booster 11/21/2000

Haemophilus influenza b (Hib), PRP-D, booster 3/7/2001

Haemophilus influenza b (Hib), PRP-D, booster 10/4/2001

Hepatitis B (pedi/adol, 3-dose schedule) 7/13/2000

Hepatitis B (pedi/adol, 3-dose schedule) 8/24/2000

Hepatitis B (pedi/adol, 3-dose schedule) 3/7/2001

Hepatitis A, pedi/adol dose (2-dose schedule) 7/1/2002

Hepatitis A, pedi/adol dose (2-dose schedule) 7/22/2003

IPV Poliovirus, inactivated 9/16/2000

IPV Poliovirus, inactivated 11/21/2000

IPV Poliovirus, inactivated 1/29/2002

IPV Poliovirus, inactivated 6/7/2005

MMR (Measles-Mumps-Rubella), live 7/17/2001

MMR (Measles-Mumps-Rubella), live 6/7/2005

Varicella, live 7/17/2001

Varicella, live 4/13/2007

Influenza, live, intranasal 9/27/2012

Influenza Virus Vaccine 10/4/2006

Influenza Virus Vaccine 10/22/2007

Meningococcal Polysaccharide Diphtheria Toxoid Con 8/11/2011

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Tdap (Tetanus toxoid, reduced DTaP adsorbed) 8/11/2011

Allergies:

Sulfas:

Milk & dairy products:

Current Medications:

Adderall XR 30mg Capsules, Extended Release Take 1 cap by mouth qam
Intuniv 2mg Tablets, Extended Release Take 1 tablet(s) by mouth daily
Advair HFA 115/21 115mcg/21mcg per lactuation Oral Inhaler one puff bid
EpiPen Auto-Injector 1:1,000 Solution For Injection Use as directed
Xopenex HFA 45mcg/lactuation Oral Inhaler Inhale 2 puff(s) by mouth q 4 to 6 hr
please include aero chamber c Mask

OBJECTIVE:

Vitals:

Current: 1/15/2013 4:20:20 PM

Wt: 110.1 lbs (75.65%)

T: 98.5 F (temporal); P: 88 bpm; R: 16 bpm

O2 Sat: 99 % (room air)

Exams:

GENERAL: well developed, well nourished, in no apparent distress Head NC/AT

EYES: lids and conjunctiva are normal; pupils and irises are normal; fundoscopic exam reveals red reflex present bilaterally;

E/N/T: normal external ears and nose;; normal external auditory canals and tympanic membranes; Nose: normal nasal

mucosa, septum, turbinates, and sinuses; Oropharynx: normal mucosa, palate, and posterior pharynx;

NECK: Neck is supple with full range of motion;

RESPIRATORY: normal breath sounds with no rales, rhonchi, wheezes or rubs;

CARDIOVASCULAR: normal rate and rhythm without murmurs; normal S1 and S2 heart sounds with no S3, S4, rubs, or

clicks;; femoral pulses: 2+ amplitude, no bruits;

GASTROINTESTINAL: normal bowel sounds; no masses or tenderness; no organomegaly no abdominal or inguinal hernia;

LYMPHATIC: no enlargement of cervical nodes;

MUSCULOSKELETAL: Grossly normal motor exam

SKIN: 2cm area of erythema and exposed fat on the anterior aspect of the left forearm. slight area of erythema around

area of puncture wound. site obvious where nail came in and out of the skin. no purulence.;;

NEUROLOGIC: Age appropriate neuro exam

ASSESSMENT:

460 Cold symptoms

786.2 Cough

723.1 Neck pain

780.61 Fever presenting with conditions classified elsewhere

ORDERS:

Radiology/Test Orders:

Noninvasive ear or pulse oximetry for oxygen saturation; single determination (In-House)

Lab Orders:

Nicholas Kilgore.TXT

Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, (Send-Out)

Procedures Ordered:

Handling and/or conveyance of specimen for transfer from the physician's office to a laboratory (In-House)

PLAN:

Cold symptoms

LABORATORY: Labs ordered to be performed today include and Rapid Influenza.

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Continue current medication regimen, Signs and symptoms of respiratory distress discussed, reduce fever with acetaminophen or ibuprofen, and Saline spray, humidifier.

FOLLOW-UP: Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as Respiratory distress, Persistent uncontrollable fevers or Temp > 104.5, Persistent vomiting, unable to tolerate PO, decreased Urine output, lethargy, and vomiting.

Orders:

Handling and/or conveyance of specimen for transfer from the physician's office to a laboratory (In-House)

Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, (Send-Out)

Cough

MEDICATIONS: Advised to take OTC Tylenol, Motrin, and Dosages discussed with parent. RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Continue current medication regimen, Finish all medications, Signs and symptoms of respiratory distress discussed, reduce fever with acetaminophen or ibuprofen, Saline spray, humidifier, and Sleep position.

FOLLOW-UP: Instructed to call immediately or seek care at the ER if he develops new or worsening symptoms, such as Respiratory distress, Persistent uncontrollable fevers or Temp > 104.5, and vomiting.

Orders:

Noninvasive ear or pulse oximetry for oxygen saturation; single determination (In-House)

Neck pain recommend ibuprofen for symptom relief

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Finish all medications, and Moisturizer
Ad lib.

FOLLOW-UP: schedule follow-up appointments on a p.r.n. basis..

Fever presenting with conditions classified elsewhere

RECOMMENDATIONS given include: Observe for signs and symptoms of illness, Continue current medication regimen, Finish all medications, Signs and symptoms of dehydration discussed, reduce fever with acetaminophen or ibuprofen, and increase fluid intake.

FOLLOW-UP: Advised to call if there is no improvement 2 days. . Instructed to call immediately or seek care at the ER if

Nicholas Kilgore.TXT

he develops new or worsening symptoms, such as Persistent uncontrollable fevers or Temp > 104.5, vomiting, and hematuria.

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Kilgore, Nicholas 06/29/2000

Office/Outpatient Visit

Visit Date: Wed, Nov 28, 2012 04:23 pm

Provider: Sonya Aikels, DO (Supervisor: John Lepore, DO; Assistant: Veronica Castillo, MA)

Location: Kidfixers Pediatrics

Electronically signed by Sonya Aikels, DO on 12/06/2012 08:28:26 AM

Printed on 10/06/2014 at 12:13 pm.

SUBJECTIVE:

CC:

Nicholas is a 12 year old male. Medical problems to be addressed today include ADHD. The history is obtained from the patient's mother.

HPI:

patient good on vyvanse 60 mg and intuniv 2 mg

In regard to the attention deficit hyperactivity disorder, Nicholas is here for follow-up on ADD treatment. He is currently taking vyvanse, intuniv. He has been at the current medication dosage for 2 months.

This dose is very effective. The most recent grade report showed primarily A's and B's. Neither parents nor teachers are requesting any medication changes. Side effects from the medication include anorexia. mother is very happy because patient still has his personality, but is doing much better in school. mother is unsure if he takes all med dosages as dad's house. she is concerned about anorexia and has had some weight loss over the psat 2 months

ROS:

CONSTITUTIONAL: Negative for growth problems, fatigue, unexplained fevers, and weight loss.

EYES: Negative for eye drainage and "lazy eye".

E/N/T: Negative for nasal congestion and thrush.

CARDIOVASCULAR: Negative for cyanotic spells.

RESPIRATORY: Negative for apneic episodes and wheezing.

GASTROINTESTINAL: Negative for anorexia, constipation, diarrhea, feeding or food intolerances and vomiting.

MUSCULOSKELETAL: Negative for joint swelling.

INTEGUMENTARY: Negative for atopic dermatitis, eczema, jaundice, rash, seborrhea and skin lesion(s).

NEUROLOGICAL: Positive for symptoms of possible ADD/ADHD. Negative for abnormal tone, developmental delay, involuntary movements or seizures.

PMH/FMH/SH:

Past Medical History:

Seen and cleared by cardiology June 2008

Attention Deficit Hyperactivity Disorder

Autism: mild;

Social History:

Parents' Marital Status: Divorced. He Divorced. The parents have joint custody and he alternates between their homes.. ,

Page 50

Nicholas Kilgore.TXT

Father's name: Richard, and Mother's Name: Eleni Parent's Occupations: Mother's Occupation: Employed at CCSD and
Father's Occupation: Employed at City of Las Vegas
Household: Lives with his sibling(s) (1 sister, 2 brothers). Alexandra 08-22-95, Richard 06-29-00 Nicholas 6-29-00

Current Problems:

Abscess of face
ADHD
Attention deficit hyperactivity disorder
Bronchospasm NOS
Fever presenting with conditions classified elsewhere
Moderate asthma (exacerbation)
Undescended testicle

Immunizations:

Pneumococcal 7-valent conjugate vaccine , IM 3/28/2001
Pneumococcal 7-valent conjugate vaccine , IM 5/23/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 9/16/2000
DTaP (Diphtheria-Tetanus-acellular Pertussis) 11/21/2000
DTaP (Diphtheria-Tetanus-acellular Pertussis) 3/7/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 10/4/2001
DTaP (Diphtheria-Tetanus-acellular Pertussis) 6/7/2005
Haemophilus influenza b (Hib), PRP-D, booster 9/16/2000
Haemophilus influenza b (Hib), PRP-D, booster 11/21/2000
Haemophilus influenza b (Hib), PRP-D, booster 3/7/2001
Haemophilus influenza b (Hib), PRP-D, booster 10/4/2001
Hepatitis B (pedi/adol, 3-dose schedule) 7/13/2000
Hepatitis B (pedi/adol, 3-dose schedule) 8/24/2000
Hepatitis B (pedi/adol, 3-dose schedule) 3/7/2001
Hepatitis A, pedi/adol dose (2-dose schedule) 7/1/2002
Hepatitis A, pedi/adol dose (2-dose schedule) 7/22/2003
IPV Poliovirus, inactivated 9/16/2000
IPV Poliovirus, inactivated 11/21/2000
IPV Poliovirus, inactivated 1/29/2002
IPV Poliovirus, inactivated 6/7/2005
MMR (Measles-Mumps-Rubella), live 7/17/2001
MMR (Measles-Mumps-Rubella), live 6/7/2005
Varicella, live 7/17/2001
Varicella, live 4/13/2007
Influenza, live, intranasal 9/27/2012
Influenza virus vaccine 10/4/2006
Influenza Virus Vaccine 10/22/2007
Meningococcal Polysaccharide Diphtheria Toxoid Con 8/11/2011
Tdap (Tetanus toxoid, reduced DTaP adsorbed) 8/11/2011

Allergies:

Sulfas:
Milk & dairy products:

Current Medications:

Adderall XR 30mg Capsules, Extended Release Take 1 cap by mouth qam
Clindamycin HCl 300mg Capsules 1 tab po tid x 7 days
Intuniv 2mg Tablets, Extended Release Take 1 tablet(s) by mouth daily
Advair HFA 115/21 115mcg/21mcg per lactuation Oral Inhaler one puff bid
EpiPen Auto-Injector 1:1,000 Solution For Injection Use as directed
Xopenex HFA 45mcg/lactuation Oral Inhaler Inhale 2 puff(s) by mouth q 4 to 6 hr
please include aero chamber c Mask

OBJECTIVE:

EXHIBIT 'B'

Print Selected Expenses

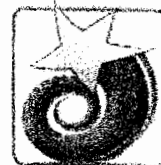
The OurFamilyWizard® website

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Minneapolis, MN 55413

<http://www.OurFamilyWizard.com>

Info@OurFamilyWizard.com



Eleni Kilgore generated this report on 11/02/14 at 09:15 PM containing 1 expenses with the following filters applied:

Date: 11/02/2009-12/02/2014

Creator: All Creators

Expense Categories: All Categories

Status: All Statuses

Expense For: All Children

All times are listed in America/Los_Angeles

timezone

Selected Expense: 1 of 1

Nico quick care

Purchase Date: 06/26/2014

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Nicholas Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 11/02/2014 9:14:41 PM

Print Selected Expenses

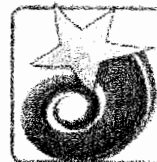
The OurFamilyWizard® website

1302 2nd St NE Suite 200

Minneapolis, MN 55413

<http://www.OurFamilyWizard.com>

Info@OurFamilyWizard.com



Eleni Kilgore generated this report on 11/02/14 at 08:57 PM containing 69 expenses with the following filters applied:

Date: 11/02/2009-12/02/2014

Creator: All Creators

Expense Categories: All Categories

Status: All Statuses

Expense For: All Children

All times are listed in America/Los_Angeles

timezone

Selected Expense: 1 of 69

Alex Kilgore Dr. Nielson

Purchase Date: 03/05/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Alexandra Kilgore

Receipt File: 0021.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/05/2013 7:13:33 PM

Selected Expense: 2 of 69

Nico presc

Purchase Date: 12/20/2013

Category: Medical / Dental

Amount: \$10.00

To Be Paid: \$5.00

Children: Nicholas Kilgore

Receipt File: 0023.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:03:36 PM

Selected Expense: 3 of 69

Alex eye X-ray

Purchase Date: 07/10/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Richard Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 11/02/2014 8:36:22 PM

Selected Expense: 4 of 69

Nicholas Kidfixers

Purchase Date: 01/30/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Nicholas Kilgore

Receipt File: 0092.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/04/2013 9:51:51 PM

Selected Expense: 5 of 69

Nico glasses

Purchase Date: 07/10/2013

Category: Medical / Dental

Amount: \$166.00

To Be Paid: \$83.00

Children: Nicholas Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 11/02/2014 8:38:27 PM

Selected Expense: 6 of 69

Alexandra Kidfixers

Purchase Date: 04/26/2013

Category: Medical / Dental

Amount: \$10.00

To Be Paid: \$5.00

Children: Alexandra Kilgore

Receipt File: 0053.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 05/15/2013 5:57:46 PM

Selected Expense: 7 of 69

Alex glasses

Purchase Date: 07/10/2013

Category: Medical / Dental

Amount: \$84.00

To Be Paid: \$42.00

Children: Richard Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 11/02/2014 8:35:22 PM

Football

Purchase Date: 08/18/2012

Category: General

Amount: \$290.00

To Be Paid: \$0.00

Children: Richard Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 08/21/2012 10:45:33 PM

Refused by Richard Kilgore 08/22/2012 6:32:17 AM

Nico tooth extr

Purchase Date: 07/18/2013

Category: Medical / Dental

Amount: \$126.00

To Be Paid: \$63.00

Children: Nicholas Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 11/02/2014 8:44:50 PM

Selected Expense: 10 of 69

Richie Tamiflu Prescr

Purchase Date: 01/16/2013

Category: Medical / Dental

Amount: \$25.00

To Be Paid: \$12.50

Children: Richard Kilgore

Receipt File: [0071.jpg](#)

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 01/23/2013 5:46:22 PM

Selected Expense: 11 of 69

Alexandra Rizatriptan

Purchase Date: 04/11/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Alexandra Kilgore

Receipt File: [0012.jpg](#)

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 05/15/2013 5:51:40 PM

alex dentist

Purchase Date: 05/24/2012

Category: Medical / Dental

Amount: \$145.80

To Be Paid: \$72.90

Children: Alexandra Kilgore

Receipt File: 013.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:31:51 PM

Richie Pro Air Prescr

Purchase Date: 01/15/2013

Category: Medical / Dental

Amount: \$25.00

To Be Paid: \$12.50

Children: Richard Kilgore

Receipt File: 0051.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 01/23/2013 5:43:43 PM

Selected Expense: 14 of 69

Nicholas Intuniv

Purchase Date: 01/30/2013

Category: Medical / Dental

Amount: \$15.00

To Be Paid: \$7.50

Children: Nicholas Kilgore

Receipt File: 002.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/04/2013 9:42:29 PM

Selected Expense: 15 of 69

nico copay

Purchase Date: 10/14/2013

Category: Medical / Dental

Amount: \$10.00

To Be Paid: \$5.00

Children: Richard Kilgore

Receipt File: 0101.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:27:07 PM

Selected Expense: 16 of 69

Nicholas Kidfixers

Purchase Date: 02/13/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Nicholas Kilgore

Receipt File: 0062.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/04/2013 9:47:21 PM

Selected Expense: 17 of 69

alex presc

Purchase Date: 08/22/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Alexandra Kilgore

Receipt File: 021.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:43:27 PM

Selected Expense: 18 of 69

nico copay

Purchase Date: 12/13/2013

Category: Medical / Dental

Amount: \$25.00

To Be Paid: \$12.50

Children: Nicholas Kilgore

Receipt File: 0065.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:14:53 PM

Selected Expense: 19 of 69

Nicholas Dr. Appt

Purchase Date: 01/15/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Nicholas Kilgore

Receipt File: Nico Copay.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 01/23/2013 5:39:07 PM

Selected Expense: 20 of 69

Alex Kilgore Dr. Nielson

Purchase Date: 03/05/2013

Category: Medical / Dental

Amount: \$10.00

To Be Paid: \$5.00

Children: Alexandra Kilgore

Receipt File: 0011.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/05/2013 7:12:45 PM

Selected Expense: 21 of 69

nico copay

Purchase Date: 12/13/2013

Category: Medical / Dental

Amount: \$10.00

To Be Paid: \$5.00

Children: Nicholas Kilgore

Receipt File: 0054.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:07:20 PM

Selected Expense: 22 of 69

Advair Nico Prescr

Purchase Date: 01/19/2013

Category: Medical / Dental

Amount: \$50.00

To Be Paid: \$25.00

Children: Nicholas Kilgore

Receipt File: 0061.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 01/23/2013 5:45:08 PM

Selected Expense: 23 of 69

Nicholas Vyvanse

Purchase Date: 01/30/2013

Category: Medical / Dental

Amount: \$30.00

To Be Paid: \$15.00

Children: Nicholas Kilgore

Receipt File: 0032.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/04/2013 9:43:16 PM

Selected Expense: 24 of 69

nico orthodics

Purchase Date: 11/01/2013

Category: Medical / Dental

Amount: \$83.00

To Be Paid: \$41.50

Children: Nicholas Kilgore

Receipt File: 026.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 8:08:54 PM

Selected Expense: 25 of 69

alex copay

Purchase Date: 02/25/2013

Category: Medical / Dental

Amount: \$40.00

To Be Paid: \$20.00

Children: Alexandra Kilgore

Receipt File: 012.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:30:03 PM

Selected Expense: 26 of 69

Alex-eye doctor

Purchase Date: 07/19/2014

Category: Medical / Dental

Amount: \$153.80

To Be Paid: \$76.90

Children: Richard Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 11/02/2014 8:32:46 PM

Selected Expense: 27 of 69

alex copay

Purchase Date: 11/14/2013

Category: Medical / Dental

Amount: \$10.00

To Be Paid: \$5.00

Children: Alexandra Kilgore

Receipt File: 023.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:45:17 PM

Selected Expense: 28 of 69

alex copay

Purchase Date: 04/08/2013

Category: Medical / Dental

Amount: \$100.00

To Be Paid: \$50.00

Children: Alexandra Kilgore

Receipt File: 011.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:28:49 PM

Selected Expense: 29 of 69

Nico methylphenidate

Purchase Date: 09/19/2014

Category: Medical / Dental

Amount: \$25.00

To Be Paid: \$12.50

Children: Nicholas Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 11/02/2014 8:29:19 PM

Selected Expense: 30 of 69

Richie-dentist

Purchase Date: 07/11/2014

Category: Medical / Dental

Amount: \$30.80

To Be Paid: \$15.40

Children: Richard Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 11/02/2014 8:34:05 PM

Selected Expense: 31 of 69

nico presc

Purchase Date: 11/12/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Nicholas Kilgore

Receipt File: 016.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:37:24 PM

Alex Desert Oasis Clinic

Purchase Date: 02/12/2013

Category: Medical / Dental

Amount: \$256.00

To Be Paid: \$128.00

Children: Alexandra Kilgore

Receipt File: 0052.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/04/2013 9:46:14 PM

Nicholas Intuniv

Purchase Date: 04/02/2013

Category: Medical / Dental

Amount: \$15.00

To Be Paid: \$7.50

Children: Nicholas Kilgore

Receipt File: 0073.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 05/15/2013 6:00:16 PM

Selected Expense: 34 of 69

Alexandra meds

Purchase Date: 02/25/2013

Category: Medical / Dental

Amount: \$18.00

To Be Paid: \$9.00

Children: Nicholas Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 11/02/2014 8:21:52 PM

Selected Expense: 35 of 69

Nico-methylphenidate

Purchase Date: 08/19/2014

Category: Medical / Dental

Amount: \$35.00

To Be Paid: \$17.50

Children: Nicholas Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 11/02/2014 8:30:09 PM

Selected Expense: 36 of 69

Nico proair med

Purchase Date: 07/17/2014

Category: Medical / Dental

Amount: \$25.00

To Be Paid: \$12.50

Children: Nicholas Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 11/02/2014 8:27:06 PM

Selected Expense: 37 of 69

Alexandra Ibuprofen

Purchase Date: 05/11/2013

Category: Medical / Dental

Amount: \$2.61

To Be Paid: \$1.30

Children: Alexandra Kilgore

Receipt File: 0022.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 05/15/2013 5:53:02 PM

Selected Expense: 38 of 69

nico foot dr copay

Purchase Date: 10/28/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Nicholas Kilgore

Receipt File: 025.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 8:07:35 PM

Selected Expense: 39 of 69

Richie Azithromycin Presc

Purchase Date: 01/15/2013

Category: Medical / Dental

Amount: \$0.00

To Be Paid: \$0.00

Children: Richard Kilgore

Receipt File: 0041.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 01/23/2013 5:42:23 PM

Selected Expense: 40 of 69

alex copay

Purchase Date: 05/29/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Alexandra Kilgore

Receipt File: 020.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:42:23 PM

Selected Expense: 41 of 69

Nicholas Clindamycin

Purchase Date: 04/01/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Nicholas Kilgore

Receipt File: 0063.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 05/15/2013 5:59:15 PM

Selected Expense: 42 of 69

Alexandra Kidfixers

Purchase Date: 04/26/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Alexandra Kilgore

Receipt File: 0043.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 05/15/2013 5:56:17 PM

Selected Expense: 43 of 69

Nico Intunive

Purchase Date: 09/22/2014

Category: Medical / Dental

Amount: \$15.00

To Be Paid: \$7.50

Children: Nicholas Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 11/02/2014 8:26:11 PM

Purchase Date: 07/17/2014

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Nicholas Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 11/02/2014 8:28:22 PM

Selected Expense: 45 of 69

Nicholas Kidfixers Balance Owed

Purchase Date: 01/30/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Nicholas Kilgore

Receipt File: 0072.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/04/2013 9:50:02 PM

Selected Expense: 46 of 69

richie dentist

Purchase Date: 10/02/2013

Category: Medical / Dental

Amount: \$50.40

To Be Paid: \$25.20

Children: Richard Kilgore

Receipt File: 015.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:35:56 PM

Selected Expense: 47 of 69

Nico Tamiflu Prescr

Purchase Date: 01/16/2013

Category: Medical / Dental

Amount: \$25.00

To Be Paid: \$12.50

Children: Nicholas Kilgore

Receipt File: 0091.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 01/23/2013 5:50:29 PM

Nico eye copay

Purchase Date: 07/10/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Nicholas Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 11/02/2014 8:37:40 PM

nico presc

Purchase Date: 11/10/2013

Category: Medical / Dental

Amount: \$15.00

To Be Paid: \$7.50

Children: Nicholas Kilgore

Receipt File: 014.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:33:25 PM

Selected Expense: 50 of 69

Football

Purchase Date: 08/18/2012

Category: General

Amount: \$290.00

To Be Paid: \$0.00

Children: Nicholas Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 08/21/2012 10:45:04 PM

Refused by Richard Kilgore 08/22/2012 6:31:53 AM

Selected Expense: 51 of 69

Nico methylphenidate

Purchase Date: 07/17/2014

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Nicholas Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 11/02/2014 8:31:13 PM

Selected Expense: 52 of 69

nico xray

Purchase Date: 08/20/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Nicholas Kilgore

Receipt File: 017.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:38:32 PM

Selected Expense: 53 of 69

richie presc

Purchase Date: 12/13/2013

Category: Medical / Dental

Amount: \$25.00

To Be Paid: \$12.50

Children: Richard Kilgore

Receipt File: 0074.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:15:41 PM

Nico Bone/Spine Dr

Purchase Date: 09/16/2014

Category: Medical / Dental

Amount: \$10.00

To Be Paid: \$5.00

Children: Nicholas Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 11/02/2014 8:23:19 PM

Alex Kilgore Nystatin

Purchase Date: 02/14/2013

Category: Medical / Dental

Amount: \$14.58

To Be Paid: \$7.29

Children: Alexandra Kilgore

Receipt File: 001.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/04/2013 9:41:12 PM

Selected Expense: 56 of 69

Nicholas Kidfixers

Purchase Date: 03/15/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Nicholas Kilgore

Receipt File: 010.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 05/15/2013 6:05:24 PM

Selected Expense: 57 of 69

nico presc

Purchase Date: 12/13/2013

Category: Medical / Dental

Amount: \$50.00

To Be Paid: \$25.00

Children: Nicholas Kilgore

Receipt File: 0066.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:25:15 PM

Selected Expense: 58 of 69

nico - bone dr.

Purchase Date: 10/14/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Nicholas Kilgore

Receipt File: 024.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 8:06:34 PM

Selected Expense: 59 of 69

Prescription

Purchase Date: 12/13/2013

Category: Medical / Dental

Amount: \$100.00

To Be Paid: \$50.00

Children: Nicholas Kilgore

Receipt File: 0013.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:02:08 PM

Selected Expense: 60 of 69

Nico xray

Purchase Date: 09/24/2014

Category: Medical / Dental

Amount: \$10.00

To Be Paid: \$5.00

Children: Nicholas Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 11/02/2014 8:45:33 PM

Selected Expense: 61 of 69

Doctor Appt. Richie

Purchase Date: 01/15/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Richard Kilgore

Receipt File: Richie Copay.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 01/23/2013 5:38:30 PM

Selected Expense: 62 of 69

nico copay

Purchase Date: 09/12/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Nicholas Kilgore

Receipt File: 019.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:41:14 PM

Selected Expense: 63 of 69

Nicholas Methyphenidate

Purchase Date: 03/17/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Nicholas Kilgore

Receipt File: 0082.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 05/15/2013 6:01:30 PM

Selected Expense: 64 of 69

Alexandra Tamiflu Prescr

Purchase Date: 01/16/2013

Category: Medical / Dental

Amount: \$25.00

To Be Paid: \$12.50

Children: Alexandra Kilgore

Receipt File: 0081.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 01/23/2013 5:47:50 PM

Selected Expense: 65 of 69

nico presc

Purchase Date: 10/14/2013

Category: Medical / Dental

Amount: \$15.00

To Be Paid: \$7.50

Children: Nicholas Kilgore

Receipt File: 018.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:40:10 PM

Selected Expense: 66 of 69

Richie copay

Purchase Date: 12/13/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Richard Kilgore

Receipt File: 0044.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:05:55 PM

Selected Expense: 67 of 69

Nicholas Proair

Purchase Date: 01/30/2013

Category: Medical / Dental

Amount: \$25.00

To Be Paid: \$12.50

Children: Nicholas Kilgore

Receipt File: 0042.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/04/2013 9:44:32 PM

Selected Expense: 68 of 69

nico copay bone/spine

Purchase Date: 09/29/2014

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Nicholas Kilgore

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 11/02/2014 8:25:05 PM

Selected Expense: 69 of 69

alex copay

Purchase Date: 11/14/2013

Category: Medical / Dental

Amount: \$20.00

To Be Paid: \$10.00

Children: Alexandra Kilgore

Receipt File: 022.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Eleni Kilgore 03/03/2014 7:44:17 PM

EXHIBIT 'C'

1 **ORDR**

2 ELENI KILGORE

3 10151 Dorrell Ln., #1152

4 Las Vegas, Nevada 89166

(702) 325-1835

kilgoex@interact.ccsd.net

Defendant in PROPER PERSON

6 **DISTRICT COURT**
7 **FAMILY DIVISION**
8 **CLARK COUNTY, NEVADA**

9 RICHARD SCOTT KILGORE,

10 Plaintiff,

11 vs.

12 ELENI KILGORE,

13 Defendant.

CASE NO: D-12-459171-D

DEPT. NO: I

DATE OF HEARING: N/A

TIME OF HEARING: N/A

14 **QUALIFIED DOMESTIC RELATIONS ORDER**

15 This *Order* is intended to be a Qualified Domestic Relations Order ("QDRO"),¹ as it
16 pertains to "Participant" and "Alternate Payee" under the provisions of the Public Employees'
17 Retirement Act codified at Chapter 286 of the Nevada Revised Statutes (the "Act") and the policies
18 enacted pursuant thereto, effective on or after October 1, 1993.

19 This *Order* creates or recognizes the existence of an Alternate Payee's right to, or assigns
20 to an Alternate Payee the right to receive a portion of the benefits payable to a plan Participant.
21 It also serves as authorization for the Public Employees' Retirement System (the "System") to
22 provide specific information concerning the account to the Alternate Payee at any time.

23 This *Order* does not require the System to provide any type or form of benefit, or any
24

25 ¹ QDRO MASTERS was hired by Ms. Eleni Kilgore to draft this *Order*. We received all direction, facts,
26 and figures from this client. No advice or comment on the terms of the *Order* or any agreements were made or
27 implied by QDRO MASTERS. Though legal questions may have been posed to our attorney staff by Ms. Kilgore,
legal advice was limited to providing options for terms to be included in the DRO. No independent investigation
as to the correctness of any facts or figures was undertaken by QDRO MASTERS in this case. Our services were
strictly as scriveners in this case.

1 option, not otherwise provided under the Act and policies or require the System to provide
2 increased benefits.

3 This *Order* is intended to be a Qualified Domestic Relations Order ("QDRO") valid for
4 distribution of a Nevada Public Employees' Retirement, as it pertains to "Participant or Member,"
5 Richard Scott Kilgore, and "Alternate Payee," Eleni Kilgore, under the provisions of the Act and
6 the policies enacted pursuant thereto. Good cause appearing therefor;

7
8 **THIS COURT FINDS** as follows:

9 1. It is the intent of this *Order* to qualify as a Qualified Domestic Relations Order under
10 the Act and policies and the provisions herein shall be administered and interpreted in conformity
11 with the provisions of the Act and policies.

12 2. Eleni Kilgore ("Eleni"), and Richard Scott Kilgore ("Richard"), were married on
13 December 15, 1992.

14 3. The parties' *Decree of Divorce* was entered March 13, 2013, in Clark County,
15 Nevada.

16 4. To avoid violation of the governing Nevada statutes (NRS 603A.040 and NRS
17 239B.030), the Code of Federal Regulations (5 U.S.C. § 552a, Privacy Act of 1974), and court
18 rules concerning privacy, the parties' dates of birth, and Social Security Numbers are to be provided
19 to the State of Nevada Public Employees' Retirement System ("PERS") in a separate cover letter
20 simultaneously submitted with this *Order*.

21
22 **IT IS HEREBY ORDERED** that the following definitions apply to this *Order*:

23 **A. PARTICIPANT.** Participant is defined as the member of the Public
24 Employees' Retirement System of Nevada.

25 **B. ALTERNATE PAYEE.** Alternate Payee is defined as a spouse, former
26 spouse, child or other dependent of a Participant who is recognized by this *Order* as having a right
27 to receive a portion of the benefits payable under the Act with respect to such Participant.

C. DOMESTIC RELATIONS ORDER. Domestic Relations Order

1 means any judgment, decree or order (including approval of a property settlement agreement)
2 which relates to the provision of child support, alimony payments, or marital property rights to a
3 spouse, former spouse, child or other dependent, and is made pursuant to Chapter 125 of the
4 Nevada Revised Statutes.

5 **D. PLAN ADMINISTRATOR.** The Plan Administrator is the Executive
6 Officer, whose address is 693 West Nye Lane, Carson City, NV 89703.

7 **E. OTHER DEFINITIONS.** Any other definitions necessary to effectuate
8 this *Order* shall be adopted from the Act and the policies adopted pursuant thereto, as may from
9 time to time be amended. These definitions shall include any and all definitions, terms or conditions
10 required by statute to qualify this *Order* as a QDRO.

11 **IT IS FURTHER ORDERED** that the Court recognizes, and assigns to Eleni, the right
12 to receive a portion of the benefits payable to a plan Participant. Eleni is awarded an interest in the
13 pension and retirement interests with the State of Nevada Public Employees' Retirement System
14 ("PERS"), accrued through employment, in the name of Richard Scott Kilgore, as follows:

15 1. The name of the Participant is Richard Scott Kilgore, his address is 6509 Columbia
16 Falls Ct., Las Vegas, Nevada 89149; the name of the Alternate Payee is Eleni Kilgore, her address
17 is 10151 Dorrell Ln., #1152, Las Vegas, Nevada 89166. The Alternate Payee is the former spouse
of the Member and is recognized by a Domestic Relations Court as having a right to receive a
portion of the allowance or benefit of a member or retired employee from the system.

18 2. The retirement system is specifically directed to pay the benefits as determined
19 herein directly to the Alternate Payee at the first possible date. The retirement system is not
20 required by this Order to provide an allowance or benefit not otherwise provided under the statutes
governing the Public Employees' Retirement System of Nevada.

21 3. This Order does not require the retirement system to make payments to an Alternate
22 Payee prior to the retirement of a Participant or the distribution to or withdrawal of contributions
by a Participant.

23 4. The Participant shall make payments directly to the Alternate Payee, of the sum
24 required by this Order, no later than the fifth day of each month until payments from the retirement
system to the Alternate Payee commence under this Order.

25 5. The benefit to be payable to the Alternate Payee shall be calculated by means of a
26 formula as follows, using Option 1 to calculate the Alternate Payee's benefit: All service credits
27 accrued by the Participant during the parties' marriage from December 15, 1992, through and
including March 13, 2013, as the numerator, and all service credits accrued as the denominator,
multiplied by one-half.

6. The Participant is required to select Option 1. The Alternate Payee shall be entitled
to the benefit as represented above, during the lifetime of the Participant or until the death of the

1 Alternate Payee, whichever occurs first.

2 **IT IS FURTHER ORDERED** that Richard has waived any right to privacy or other rights
3 as may be required for Eleni to obtain information relating to Richard's date of retirement, final
4 grade and step, and pay, present or past retired pay, or other such information as may be required
5 to enforce the award made herein, or required to revise this *Order* so as to make it enforceable.
6 PERS is hereby authorized to provide specific information to Eleni from the retirement file of
7 Richard for purposes of issues related to this *Order*.

8 **IT IS FURTHER ORDERED** that if Richard takes any steps to merge the retirement
9 divided herein with another retirement program of any kind, or takes any action that prevents,
10 decreases, or limits the collection by Eleni of the sums to be paid hereunder; Richard shall make
11 payments to Eleni directly in an amount sufficient to neutralize, as to Eleni, the effects of the action
12 taken by Richard.

13 **IT IS FURTHER ORDERED** that a certified copy of the *Order* shall be served upon the
14 Plan Administrator. Said *Order* is subject to review by the Administrator and if approved by the
15 Administrator, is effective on the date set forth herein. If this *Order* is determined by the
16 Administrator to be a QDRO, then the Plan Administrator shall, within a reasonable period of time
17 after delivery of this *Order*, notify the Participant and the Alternate Payee of such determination.
18 If the Administrator determines that the *Order* does not qualify as a QDRO, the Administrator shall,
19 within a reasonable period of time, notify the Participant and the Alternate Payee of the reasons for
20 such determination to allow modification of this *Order* for qualification.

21 *****

22 *****

23 *****

24 *****

25 *****

26 *****

27 *****

IT IS SO ORDERED this _____ day of _____, 201__.

1 MOFI
2 ELENi KILGORE
3 10151 Dorrell Lane
4 Las Vegas, NV 89166
5 (702) 325-1835
6 Defendant in Proper Person

7 **DISTRICT COURT**
8 **FAMILY DIVISION**
9 **CLARK COUNTY, NEVADA**

10 RICHARD KILGORE,
11 Plaintiff,

Case No. D-12-459171-D
Dept. No: I

12 vs.

13 ELENi KILGORE,
14 Defendant.

15 **FAMILY COURT MOTION/OPPOSITION FEE INFORMATION SHEET (NRS 19.0312)**

16 Check the Statement that Describes the Motion or Opposition you are Filing:

17 **X** I am filing one of the three following types of excluded Motion/Opposition and am not
18 subject to the \$25.00 filing fee:

- 19 1. A Motion for/Opposition to temporary relief;
- 20 2. A Motion for/Opposition to the modification of child support *only*; or
- 21 3. A Motion for/Opposition to reconsideration or a new trial, which is being filed
22 within ten (10) days after the final decree or judgment, was issued.

23 ☐ I am not filing an excluded Motion/Opposition (listed above) and am subject to the \$25.00
24 filing fee.

25 DATED this 4th day of November, 2014.

Respectfully Submitted,

26 /s/ Eleni Kilgore
27 ELENi KILGORE
28 10151 Dorrell Lane
Las Vegas, NV 89166
(702) 325-1835
Defendant in Proper Person


CLERK OF THE COURT

1 OPP
2 Bonnie Lonardo, Esq.
3 Nevada Bar No. 8548
4 Janice Jacovino, Esq.
5 Nevada Bar No. 11612
6 LONARDO & JACOVINO LLC
7 7465 W. Lake Mead Blvd., Suite 100
8 Las Vegas, Nevada 89128
9 Telephone: (702) 562-8125
10 Facsimile: (702) 562-8177
11 Email: info@ljlawlv.com
12 *Attorneys for Plaintiff*

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DISTRICT COURT
CLARK COUNTY, NEVADA

10 RICHARD KILGORE,) CASE NO.: D-12-459171-D
11)
12 Plaintiff,) DEPT. NO.: I
13 vs.)
14 ELENI KILGORE,)
15 Defendant.)

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**PLAINTIFF'S REPLY IN SUPPORT OF MOTION AND
OPPOSITION TO DEFENDANT'S ORDER TO SHOW CAUSE**

18 COMES NOW, Plaintiff, RICHARD KILGORE, ("Plaintiff") by and through his counsel,
19 Janice Jacovino, Esq., of the law office of Lonardo & Jacovino and hereby files this Reply in support
20 of Plaintiff's Motion to Modify the Child Support and Opposition to Defendant's, ELENI KILGORE,
21 ("Defendant") Countermotion.

23 This Reply is based upon this Notice, the attached Memorandum of Points and Authorities,
24 and upon all pleadings and documents herein and related, as well as any argument that may be
25 presented at the hearing of this, or any other motions/matters; the Court is requested to take judicial
26 notice as appropriate.

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MEMORANDUM OF POINTS AND AUTHORITIES

FACTS

The parties were married in Las Vegas, Nevada on December 15, 1992. The parties have three children from this marriage. Alexandra Kilgore, born August 22, 1995, and the two minor twin boys; Nicholas Kilgore and Richard Kilgore born June 29, 2000. Plaintiff also has a daughter, Camille prior to this marriage.

Plaintiff filed for divorce on February 17, 2012. The Divorce Decree was filed with the court on March 13, 2013. The current custody schedule for the minor boys is 1 week on /1 week off rotation. Plaintiff and the boys would like the schedule to continue in this fashion.

The decree also included a child support payment of \$1,275.00, for the three children which was later reduced to \$686.00 once Alexandra Kilgore became of age.

The decree also included provision for three QDROs, one related to Defendant's benefits, one related to Plaintiff's city-municipal court benefits and a possible QDRO related to Plaintiff's military-reserve benefits. Defendant was to sign a quit claim deed for the property which Plaintiff is currently residing in. The decree also addressed splitting the IRS debt, the un-reimbursed medical bills and the boys' football expenses.

Recently, due to incidents caused by Defendant and her boyfriend, Plaintiff was terminated from his position with the municipal court. Due to the termination Plaintiff has no source of income and filed a Motion To Modify The Child Support. Defendant then filed the Opposition and Countermotion. Plaintiff now files this Reply In Support Of His Motion To Modify The Child Support And Opposition The Defendant's Countermotion.

I. Plaintiff's Reply To Defendant's Opposition To Plaintiff's Motion To Modify The Child Support

Plaintiff's request to modify the child support is statutorily and factually supported.

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Reply and Opposition

1 Defendant does not dispute that Plaintiff losing his job constitutes a change in circumstance and in
2 Plaintiff's ability to pay, instead Defendant argues that Plaintiff's action caused him to lose his
3 career of 15 years and thus he voluntarily lost his job. Therefore, he should have to continue to
4 make the court's prior ordered payments from 2012, not the more recent ordered amount from 2014.
5 Defendant's argument is illogical. The law supports Plaintiff's request to modify the child support
6 payment due to this change in circumstances and Plaintiff's inability to pay the current child support
7 amount due on the loss of income.

8
9 With requests to modify the child support order, the court looks to NRS 125B.145. NRS
10 125B.145 allows a party to request a modification when there has been a change of circumstances. A
11 change of 20% or more in a party's gross monthly income is sufficient grounds for requesting the
12 modification review. Plaintiff recently lost his job with the Las Vegas Municipal Court. He held this
13 career of over 15 years. As of October 14, 2014, Plaintiff has been without income. Plaintiff is
14 currently not receiving unemployment, though he has filed.

15 Plaintiff has appealed his termination and his next employment hearing is November 24,
16 2014. These are not the actions of someone who is willfully unemployed or under-employed. While
17 Plaintiff is not receiving income he paying his living expenses and taking care of his children by
18 using his savings. Soon he may have to ask for help from his family. Plaintiff is trying to fulfill his
19 obligation to the children and is only in arrears because the payments were coming directly from his
20 municipal court check, which he is no longer receiving. However, Plaintiff has remained cognizant
21 of his responsibility and has made payments to the DA.

22 At this time Plaintiff is requesting a reduction in his child support payments because he is
23 currently without income and even with unemployment he would be unable to pay the ordered child
24 support amount of \$686.00 for his two boys. With no income available to Plaintiff, joint physical
25 custody of the 2 minor children, the home lifestyles being similar and Defendant earning
26 approximately \$5,600.00 monthly, Plaintiff is a candidate for a modification in his payments.

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Reply and Opposition

1 Plaintiff is unable to pay the current child support obligations. If Plaintiff were successful in
2 obtaining unemployment, the maximum unemployment benefit would be approximately \$1,600.00
3 per month. This amount is not enough to pay his monthly bills. As such any child support payment
4 would be unduly burdensome and would not be appropriate. Following *Wright v. Osburn*, 114 Nev.
5 1367, 970 P.2d 1071 (1998), when the parties share 50/50 joint custody cases, the child support
6 obligation offsets, with the parent earning the higher income paying child support to the parent with
7 the lower income. In this case, with Plaintiff being unemployed, Defendant should make child
8 support payments to Plaintiff. *Wesley v. Foster*, 119 Nev. 110, 65 P.3d 251 (2003) slightly modified
9 the *Wright* formula by stating the offset should take place before, the application of the statutory
10 presumptive maximums. In addition the rule was further expanded by making the offset calculation
11 applicable to all "joint custody" or share custody case of 60/40 or closer. Using the formula from
12 *Wright*, and *Wesley* the court should compare the two incomes before the maximum cap and issue an
13 order for child support to Plaintiff, thus ensuring that the minor children will continue to have and
14 receive the same benefits at each parents' house.

15
16 If this court determines that under these circumstances, Plaintiff is still obligated to pay the
17 child support, the payment should only be NRS 125B.080's statutory minimum of \$100.00 per child.
18 Plaintiff provides for his minor children and shares joint physical custody, of the two minor boys.
19 The current custody schedule is 1week on/ 1week off rotation. Plaintiff is without income and even
20 with unemployment he will not make enough to support his household. Further, Plaintiff's situation
21 is temporary and when his job status changes the child support obligations will change accordingly.
22 Therefore, the court should not require Plaintiff to make child support to payments until his earning
23 situation improves. Instead, Defendant should be required to pay support Plaintiff to ensure that the
24 children are provided for and that their home lifestyles remain similar at both residences.

25 **II. Opposition To Defendant's Requested Order To Show Cause**

26 Plaintiff filed a motion to modify the current child support order. Defendant filed and an
27

1 Opposition and Countermotion requesting a modification of the current custody, changing joint
2 primary custody to just every other weekend to Plaintiff. Plaintiff opposes this change in the custody
3 arrangement. Joint primary custody is favored by the court. This is also the custody arrangement the
4 children and Plaintiff desire. This visitation has worked well for all parties and especially the
5 children. This joint custody schedule of 1week on/ 1week off rotation was agreed upon by the parties
6 at the time of the divorce. This custody arrangement should remain intact.
7

8 Defendant's countermotion requests an Order to Show Cause for failure to execute the
9 QDRO's, however, Defendant has not produced the QDRO for her retirement as required. In
10 addition, Defendant also has not signed the quick claim deed for the house as ordered. In addition,
11 Defendant argues that Plaintiff did not to pay half the unreimbursed medical bills and football bills
12 for the boys, when she also owes Plaintiff half of his unreimbursed medical bills for the boys and half
13 of his expense for the boys' extra curricular activities. Finally, both Plaintiff and Defendant were
14 ordered to split the tax obligation, unless either could prove that the other individually owed the debt,
15 however, Plaintiff has paid the lion share of this tax debt and has not received any refund from the
16 IRS since the divorce and has not received any off set from Plaintiff for paying most of the IRS debt.
17 Thus, Plaintiff should not be held in contempt as his alleged inactions are due to Defendant's failure
18 to follow this Court's order and Plaintiff's fear that since Defendant not complied with this Court's
19 order and will continue to not preform her duties as prescribed by the court.
20
21

22 **A. Custody Should Stay As Joint Physical Custody**

23 Like most matters concerning the children the court looks to the best interest of the children.
24 When attempting to determine the children's best interest the court uses the factors set out NRS
25 125.480. While the requirements for custody modification can be found in NRS 125.510. See also
26
27

1 *Truax v. Truax*, 110 Nev. 437, 874 P.2d 10 (1994) & *Mosley v Figliuzzi*, 1143 Nev. 51; 930 P.2d
2 1110 (1997). Case law is also used to determine when a change of custody is warranted. Pursuant to
3 *Murphy v. Murphy*, 84 Nev. 710, 447 P.2d 664 (1968), A change of custody is warranted only when
4 the circumstances of the parents have been materially altered and the child's welfare would be
5 substantially enhanced by the change. See also *Gepford v. Gepford*, 116 Nev. 1033, 13 P.3d 47
6 (2000).
7

8 Under the statutes and cases the custody agreement should stay the same. The family has
9 benefitted and enjoyed joint physical custody, giving each parent 7 days with the boys, every other
10 week. This schedule was agreed upon by the parties during the divorce proceedings. With this week
11 on week of schedule the children and the both parents get the benefits of weekends and school days
12 with the children. Plaintiff is very active in children's lives. He attends school functions, and sports
13 and other extra circular events. Plaintiff provides for his children and they often spend time together
14 enjoying outdoor activities. In addition to the children from this marriage Plaintiff has a daughter
15 Camille. The children like to spend time with each other and Plaintiff and his daughter, Camille are
16 concerned that if this custody arrangement was changed then she would not be able to spend as much
17 time with her siblings. Further, Plaintiff being terminated from his job will not materially alter the
18 children's current home situation and will not negatively impact the children's welfare, since Plaintiff
19 is likely to regain his job. While changing this custody arraignment will harm the children's
20 relationship with their father.
21
22

23 Defendant mentions in the countermotion and a reason for the change in custody is that the
24 home was in foreclosure. The home has not been foreclosed upon. Plaintiff is working on a home
25 modification to save the home. This modification has not been completed because Defendant has not
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Reply and Opposition

1 signed the quick claim deed. Another reason given for need the custody change was the computer and
2 internet. Plaintiff has internet. What he does not have is the children's laptops because the children
3 are not allowed to bring them to the house. Plaintiff requests this court to order that the children's
4 laptops may be brought to his house.

5
6 Other allegations include a CPS visit, taking the children to Twin Peaks Restaurant and
7 Plaintiff not taking the children to the doctor. First, Twin Peaks is a restaurant and did not cause his
8 son's medical issue. Second, Plaintiff does take the children to doctor when and pays for the doctors
9 bills. See **Exhibit "2"**, A true and correct copy of the medical bills, invoices and receipts paid by
10 Plaintiff. Finally, the anonymous CPS tip came from Defendant and her boyfriend. The CPS worker
11 did not find any issues at Plaintiff's house or with Plaintiff. Thus no CPS report was filed and if
12 needed the CPS worker can be subpoenaed to testify.

13
14 Defendant is always quick to find fault with Plaintiff, however Defendant's punishments are
15 severe, including spankings, she is overly strict and threatens the children. Defendant also disparages
16 Plaintiff to the children. She also disparages Plaintiff in front of others and to others in the children's
17 life, including family, friends and the staff and parents in the school, sports and extra circular
18 activities.

19
20 Defendant attempts to alienate the children from Plaintiff and their stepsister by not allowing
21 the boys to talk to them while they are at their mom's house. Plaintiff would request the court
22 admonish Defendant and her boyfriend from speaking ill about dad to the children, the friends and
23 family and at the school, sports and extra circular activities. Also, Plaintiff would like the court to
24 order Defendant to allow the boys to use their cell phones to speak to their dad and step- sister while
25 at Plaintiff's house.

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Reply and Opposition

1 Finally, Plaintiff does not and never had anger or impulse control issues. Instead, Defendant
2 and her boyfriend purposely incite, goad and create the drama. Defendant and her boyfriend instigate
3 all confrontations. To illustrate, Defendant brings her boyfriend to the children's open house, school
4 functions and the boys sporting events. At these events the Defendant and her boyfriend give dirty
5 looks, identify the boyfriend as the children's father to others, name calling, derogatory remarks and
6 raising voices in these public arenas. It appears that Defendant and her boyfriend attend these
7 functions and sit near and linger near Plaintiff on purpose. Then conversely loudly to each other and
8 others around them about how "bad" Plaintiff is. Worst at the football game, the incident listed in the
9 report, Defendant and her boyfriend harassed Plaintiff's girlfriend on her way to the restroom. They
10 embarrassed her, harassed her, verbally abused her and threatened her. Plaintiff's girlfriend was
11 shaking, crying and afraid that Defendant and her boyfriend physically harm her. These types of
12 actions must stop.
13

14
15 In addition to causing these disturbances in public and at school functions, these occurrences,
16 may have been orchestrated as they were started by and incited by Defendant and her boyfriend and
17 later used in the Complaint filed with human resources at Plaintiff job, which led to Plaintiff's
18 termination. Plaintiff would like the Court to admonish Defendant and her boyfriend to behave, and
19 prohibiting the boyfriend from stating that he children's father, disparaging Plaintiff or causing
20 incidents in public, at the children's school and extra curricular activities.
21

22 Finally, Plaintiff believes his sons want to be with him and would want keep the same custody
23 arrangement. Along with best interest of the children and changes in circumstance Nevada looks to
24 children for their custody preferences. See NRS 124.480, *Ormachea v. Ormachea*, 67 Nev. 273, 217
25 P.2d 355 (1950); *Murphy v. Murphy*, 84 Nev. 710, 447 P.2d 664 (1968) & *Kern v Kern*, 96 Nev. 20,
26

1 604 P.2d 354 (1980). Plaintiff believes his sons deserve a say in their custody, however he believes
2 that Defendant has been filling the children's minds with false information against him. However, for
3 his children's benefit and if the court believes that a child interview is in the children's best interest
4 he will consent.

5
6 **B. Defendant's Amount Of Requested Child Support Is Not Supported By The Law, Facts
7 Or The Most Recent Child Support Order**

8 The Hearing Master Recommendation, case number R-13-180572-R was filed on March 19,
9 2014. With this order Plaintiff was required to pay a total of \$686.00. This amount included \$365.00
10 for child support, following *Wright v Osborn, 114 Nev. 1367, 970 P.2d (1998)*. \$193 for medical
11 support, and \$128.00 for arrears. **See Exhibit "1"**, a true and correct copy of the Hearing Master's
12 Recommendation. Therefore, the current total amount required from Plaintiff is \$686.00 not
13 \$1,275.00. Plaintiff will be unable to pay any amount of child support while he is unemployed

14
15 The child support amount changed from the Decree, filed on March 13, 2013, which ordered
16 child support in the amount \$1,275.00 (this amount included the insurance payment) At that time
17 there were 3 minor children and Defendant had primary custody of their daughter. Now the daughter
18 is an adult. Therefore, the recent Hearing Master's order was for two minor children with joint
19 custody for both parents. In addition the parties' incomes have changed since the date of the Decree.

20
21 Plaintiff is not sure why Defendant believes she is entitled to the prior amount of support. The
22 incomes have changed, one of the children has reached maturity and the Hearing Masters order from
23 March 2014 provide for the \$686.00 payment. That Defendant states Plaintiff should pay this old
24 amount, which is almost double the Hearing Master's order amount, because his action caused his
25 termination, this is illogical. Further, since Plaintiff is currently without income and if/ when Plaintiff
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Reply and Opposition

1 receives unemployment he will not be able to pay the \$686.00 payment since unemployment only
2 offers a maximum of \$1,600.00 per month.

3 Plaintiff is not willfully unemployed or underemployed. As pointed out in Defendant's motion
4 and discussed above, the termination came from interactions with Defendant and her boyfriend.
5 Defendant's boyfriend filed a complaint with human resources; which led to Plaintiff's termination.
6 These actions include berating Plaintiff at school functions and football games and other activities,
7 harassing Plaintiff's girlfriend and illustrates that Defendant and her boyfriend were attempting to
8 have Plaintiff fired.

9
10 Custody should remain the same but the child support should be modified. Plaintiff is not
11 willfully unemployed or underemployed and is actively attempting to regain his old position with the
12 Municipal Court. Plaintiff has an upcoming appeal hearing and he has applied for unemployment.
13 Based on these circumstances the court should reassess the child support obligations but the current
14 custody schedule.

15
16 **C. Defendant Has Not Produced Her School District QDRO**

17 In the Decree, the parties were order to have 3 QDROs completed. These QDRO's include
18 one QDRO for Defendant's School District benefits. The second QDRO for Plaintiff's City of Las
19 Vegas- Municipal Court benefits and the third QDRO for questionable benefits from Plaintiff's
20 military-reserve time. Since these benefits were questionable and Plaintiff does not believe there were
21 any benefits to divide, Defendant was to pay the entire expense for the preparation of this QDRO;
22 however, if the preparer found value to divide then Plaintiff would be responsible the entire
23 preparation expense.

24
25 Defendant asserts that QDROs were not completed 90 days after the divorce and she attached
26

1 Exhibit C, one of the three required QDROs. This attached QDRO attempted to divide Plaintiff's
2 Municipal Court-City of Las Vegas benefits. Defendant did not make this QDRO available to
3 Plaintiff prior to this time. Therefore, it was not possible for Plaintiff to sign this QDRO within the 90
4 days. In addition, the footer to page one of the proposed QDRO specifically states that QDRO
5 Master's services "were strictly as scrivener in this case" and "QDRO Master's received all direction,
6 facts and figures from this client." In addition it reads "No independent investigation as to the
7 correctness of any facts or figures was undertaken by QDRO Master's in this case." Therefore, the
8 proposed QDRO is one sided and factually unsupported. Plaintiff does not feel comfortable signing
9 this proposed QDRO at this time.
10

11
12 Conveniently, Defendant does not attach the QDRO that would divide her school district
13 benefits, nor has she made this QDRO available to Plaintiff. In addition, Defendant's motion does not
14 state this QDRO was prepared. Therefore, Defendant is asking the court to enforce the order against
15 Plaintiff, ensuring that she receives her part of the community property interest in his retirement, but
16 has not provided Plaintiff with his share of the community interest in her retirement.
17

18 Finally, Plaintiff does not believe that his military-reserve benefits have any community
19 value, but has agree to have the QDRO researched and prepared incase any community interest value
20 could be obtained from the time Plaintiff was with the military. In regards to this QDRO there is
21 caveat in the Decree, which states that if no community interest value is found then Defendant must
22 pay the entire fee but if community interest value is found, then Plaintiff would pay for the QDRO
23 preparation cost. This QDRO was also not provided nor was there any mention of this QDRO being
24 prepared. Thus, Plaintiff assumed that Defendant had decided not to pursue the preparation and did
25 not want to pay her portion of the questionable QDRO.
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27 - 11 -

28 Reply and Opposition

1 The Decree ordered both parties to share the expense for preparing QDROs and that these
2 QDROs were to be completed in 90 days. Neither party completed this obligation. Further only one
3 QDRO was identified and attached to the motion, leaving the Plaintiff to believe that Defendant does
4 did not want to share the expense of the questionable QDRO. Further, the provided QDRO was
5 unsupported and one sided. Finally, while Defendant is interested in her share of the benefits, she
6 does not seem willing to share her benefits as required in the decree as Defendant has provided her
7 QDRO. Defendant appears to want Plaintiff's benefits and to punish Plaintiff with contempt, when
8 she also is in contempt for not providing Plaintiff or this Court the QDRO with the community
9 interest share of her benefits.
10

11 **D. Defendant Was Required To Sign A Quit Claim Deed For The Property**

12 According to the agreement, Plaintiff was to remain in possession of the residence commonly
13 known as 6509 Columbia Fall Ct., located in Las Vegas, Nevada. Defendant agreed to sign a quit
14 claim deed to relinquish her interest in the property. Plaintiff prepared the deed and he is ready to
15 have it filed once Defendant signs the quit claim deed. However, Plaintiff has refused to sign the quit
16 claim deed. Without this deed, Defendant's name remains on the title and she continues to be an
17 obligator on the note and Plaintiff cannot modify the home. Further when this house was awarded to
18 Plaintiff and Defendant was ordered to sign the quit claim deed. Plaintiff request that this Court order
19 Defendant to abide by the decree and sign the quit claim deed.
20
21

22 **E. Defendant Has Not Contributed Her Required Half Of The Unreimbursed Medical**
23 **Bills Or The Boys' Extra Circular Activities**

24 Defendant's countermotion asks for contempt and judgment against Plaintiff for the un-
25 reimbursed half of the minor children's medical and football expenses. Again, while Defendant
26

1 enjoys illustrating that Plaintiff has not paid half of the medical bills, Defendant has not provided
2 Plaintiff with her half of the medical bills that he incurred for the boys. **See Exhibit "2"**.

3 In addition, prior to the motion Defendant has not provided many of these requests, bills, receipts, or
4 proof that she paid her half of the bills. In addition, Alexandria Kilgore, one of the three children,
5 turned 18 on August 22 2013. According to the agreement, Plaintiff was not required to provide child
6 support for Alexandria past her 18th birthday, yet he continued to make child support payments for
7 Alexandria for the next 6 months. **See Exhibit "1"** Hearing Masters Recommendations. These child
8 support payments far exceed the unreimbursed half that Defendant is claiming to be owed. Further,
9 Plaintiff has taken the children to the doctors and has numerous unreimbursed medical payments
10 totaling \$835.82. None of these payments have been shared by the Defendant. **See Exhibit "2"**.

11
12 In addition, some of the requested half payments for Alexandria's co-pays we on or after her
13 18th birthday. See Defendants Exhibit B, pages 9, 14 & 35. Therefore, Plaintiff was not required to
14 pay these expenses.
15

16 Further, when reviewing the attached invoices from Our Family Wizard many of the
17 procedure dates were from 2013, while Defendant's creation dates were from 2014, causing question
18 to when and if these events or medical visits actually occurred.
19

20 Plaintiff has supported his son's football and extra-circular activates. Like the medical
21 expenses Plaintiff has paid for football and other activities without receiving his half of the expense
22 from the Defendant. While researching Defendant's Exhibit B, Plaintiff was only able to locate 2
23 expenses, which were labeled Football and General instead of Medical. These 2 expenses are found
24 on Defendant's Exhibit B's pages 5 and 26 and only total \$290.00, therefore Plaintiff is unsure why
25 Defendant requested the amount of \$825.00. The requested expenses are not supported by the
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Reply and Opposition

1 invoices. In addition, Plaintiff has unreimbursed football and school expenses of \$200.00 See
2 **Exhibit "3"**, A true and correct copy of Plaintiff's unreimbursed expenses.

3 With both the medical bills and the football expenses Plaintiff has supported his children.
4 Defendant's amounts are questionable, unsupported, and many times have not been provided to the
5 Plaintiff. In addition, while Defendant is quick to accuse Plaintiff of not paying his half, Defendant
6 has not paid her half when Plaintiff has paid out of pocket for medical and extra circular activities.
7

8 **F. Plaintiff Deserves An Off Set For Paying The Majority Of The IRS Debt**

9 The decree states that the parties shall equally divide the money owed to the IRS prior to and
10 including the 2011 tax year. Each party shall file their own return and will file separately in 2012.
11 The only exception was a debt of \$2,500.00. That specific debt would be paid by the party found to
12 be responsible for this debt, unless both parties are both equally responsible, then it would be split
13 like the rest of the IRS debt. In addition, the decree states that any party entitled to a refund will be
14 able to retain that refund. However, since 2011, Plaintiff has not gotten a refund as the IRS keeps the
15 refunds until the entire IRS debt is paid in full. For this community debt, since 2012, Plaintiff paid a
16 total of \$5,429.00, this included what he would have received with a refund. Plaintiff believes that
17 Defendant has only paid \$200.00 towards this debt. See **Exhibit "4"**, a true and correct copy of the
18 IRS statements.
19
20

21 Had it not been for the prior community debt, Plaintiff would have received a refund and per
22 the decree Plaintiff is entitled to this refund. In addition to losing his refund, Plaintiff has paid the
23 majority of the IRS debt, even though the Decree states it is to be split equally and the party entitled
24 to the refund may keep the refund. Defendant has not paid an equal amount of the debt. Therefore,
25 Plaintiff request that Defendant pay to Plaintiff the overage amount that he has contributed to
26

1 repaying the IRS. Alternatively, if the court finds that Plaintiff does owe some of the medical or extra
2 curricular amounts, then the amount owed by Plaintiff should be subtracted for the overage that
3 Plaintiff has been forced to pay the IRS. Plaintiff request that this Court order Defendant to pay her
4 share of the IRS debt.

5
6 **G. Attorney's Fees Should Be Provided To Plaintiff, Not Defendant**

7 Plaintiff was terminated from his job because of the incidents created by Defendant and her
8 boyfriend. These incidents were incited by them and then used to filed a complaint against Plaintiff
9 with his employer. Due to his termination, Plaintiff filed for a modification of the current child
10 support order. Defendant opposed this motion and filed a counter motion. This counter motion
11 included false allegations, which Plaintiff must now defend against. Since Plaintiff is currently
12 unemployed and was only attempting to do the right thing by requesting the modification with the
13 court, Defendant should be required to pay Plaintiff's attorneys fees to ensure that Plaintiff has the
14 same opportunities as the Defendant.

15
16 NRS 125.150(3) vests the court with the power to award attorney fees in divorce proceedings.
17 NRS 18.010 allows court to award attorney's fee to the prevailing party. These statutes are supported
18 and expanded upon by case law. See *Sargeant v. Sargeant*, 88 Nev. 223, 495 P.2d 618 (1972);
19 *Fletcher v. Fletcher*, 89 Nev. 540, 516 P.2d 103 (1973); *Levy v. Levy*, 96 Nev. 902, 620 P.2d 860
20 (1980). *Dimick v. Dimick*, 112 Nev. 402, 915 P.2d 254 (1996). Attorney fees and cost may be
21 awarded in post divorce proceedings. See *Leeming v. Leeming*, 87 Nev. 530, 490 P.2d 342 (1971);
22 *Korbel v. Korbel*, 101 Nev. 140, 696 P.2d 993 (1985); *Halbrook v. Halbrook*, 114 Nev. 1455, 971
23 P.2d 1262 (1998) & *Wright v. Osborn*, 114 Nev. 1367, 970 P.2d 1071 (1998); *Love v. Love*, 114 Nev.
24 572, 959 P.2d 523 (1998). The court can also award attorney fees based on the discrepancy of
25
26

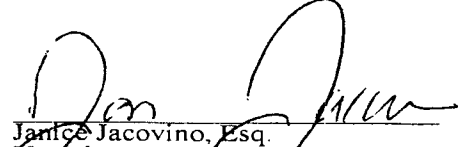
1 income. See *Wright v. Osborn*, 114 Nev. 1367, 970 P.2d 1071 (1998).

2 As discussed above, Plaintiff's motion was only to ask the court to modify the support based
3 on his current financial situation. This situation was caused in large part by the Defendant and her
4 boyfriend actions. Further, the law is clear on when a child support modification is appropriate and
5 Plaintiff's and the children's situation meets these standards. Defendant's objection and
6 countermotion allege inaccurate and unsupported allegations when Plaintiff only addressed the child
7 support modification. In addition, Plaintiff's reason for requesting the modification was due to the
8 loss of his income. Plaintiff is likely to be the prevailing party with the child support modification. In
9 addition, Plaintiff is financially unable to afford his attorney fees and cannot possibly pay
10 Defendant's attorney fees. Thus, Plaintiff should be awarded his attorney fees and court costs.

13 CONCLUSION

14 For the forgoing reason, Plaintiff respectfully requests that the court grant his motion to
15 modify the child support and order Defendant to sign the quit claim deed, and pay her half of the IRS
16 debt. Plaintiff also requests that this court deny Defendant's countermotion in its entirety.

19 DATED this 19 day of November, 2014.

21 
22 Janice Jacovino, Esq.
23 Nevada Bar No. 11612
24 7465 W. Lake Mead Blvd., Suite 100
25 Las Vegas, Nevada 89128
26 (702) 562-8125
27 *Attorneys for Plaintiff*

CERTIFICATE OF SERVICE

I, the undersigned, declare under penalty of perjury, that I am over the age of eighteen (18) years, and I am not a party to, nor interested in, this action. On November 20, 2014, I caused to be served a true and correct copy of the foregoing **REPLY AND OPPOSITION** by the method indicated:

☐ **BY FAX:** by transmitting via facsimile the document (s) listed above to the fax number (s) set forth below on this date before 5:00p.m. pursuant to EDCR Rule 7.26(a). A printed transmission record is attached to the file copy of the document(s).

☒ **BY MAIL:** by placing the document(s) listed above in sealed envelope(s) with postage thereon fully prepaid, in the United States mail at Las Vegas, Nevada addressed as set forth below.

☐ **BY OVERNIGHT MAIL:** by causing document(s) to be picked up by an overnight delivery service company for delivery to the addressee(s) on the next business day.

☐ **BY EMAIL:** by emailing a PDF of the document(s) listed above to the email address(es) of the individual(s) listed below.

☐ **BY ELECTRONIC SUBMISSION:** submitted to the above-entitled Court for electronic filing and service upon the Eighth Judicial District Court's Service List for the above-referenced case.

Eleni Kilgore
10151 Dorrell Lane
Las Vegas, NV 89166
Defendant

Eleni Kilgore
9149 Dorrell Lane
Las Vegas, NV 89166
Defendant

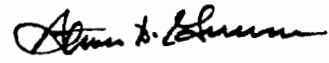
/s/ Danilyn Rubio
Receptionist

Reply and Opposition

Exhibit 1

Exhibit 1

MRAO
STEVEN B. WOLFSON
DISTRICT ATTORNEY
Nevada Bar No. 001565
FAMILY SUPPORT DIVISION
1900 East Flamingo Road, Suite 100
Las Vegas, Nevada 89119-5168
(702) 671-9200
TDD (702) 385-7486 (for the hearing impaired)
895769000B


CLERK OF THE COURT

District Court
CLARK COUNTY, NEVADA

Eleni Kilgore,

Petitioner,

Case No. R-13-180572-R

vs.

Department No. CHILD SUPPORT

Richard Kilgore,

Respondent.

MASTER'S RECOMMENDATION

This matter having been heard on FEBRUARY 25, 2014 before the undersigned Hearing Master, having considered all the evidence and having been fully advised in the premises, hereby makes the following Findings and Recommendations:

Parties present: ☒ Respondent ☒ Respondent's attorney ☐ Petitioner ☐ Petitioner's attorney

☐ PATERNITY ☒ PATERNITY PREVIOUSLY DECIDED

☒ FINANCIALS: ☐ CONTINUE PRIOR ORDERS (NO CHANGE TO PRIOR FINANCIAL ORDERS).

Respondent's gross monthly income (GMI) : ; formula amount 25% of GMI= \$ 0.25

Basis for deviation from state formula: Wright vs Osborn. NCP's GMI \$6,972 x 0.25 = \$1,774. CST's GMI \$5,510 x 0.25 = \$1,378. Difference in parties' obligations is \$365/month.

Respondent is to pay current support for the child(ren), Nicholas Kilgore AND Richard Kilgore.

CHILD SUPPORT

Respondent is to pay monthly:

\$365.00

child support

\$193.00

medical support (in lieu of health insurance)

spousal support

\$128.00

arrearage payment

☒ ARREARAGES ☐ ARREARAGES NOT ADDRESSED AT THIS HEARING

Arrears/Obligation period is audited through 10/31/13.

Arrears, interest and penalty calculated through 10/31/13 by audit. For accounting purposes the next payment falls due 11/01/13.

child support arrearage of \$3,428.09 plus interest of \$113.78 penalty of \$173.33

medical support arrearage of plus interest of penalty of

spousal support arrearage of plus interest of

medical expense arrearage of \$1,496.24

genetic test costs of

total arrearages of \$4,924.33 total interest \$ 113.78 total penalty \$ 173.33

GRAND TOTAL (arrearages + interest + penalty) = **\$5,211.44**

FINDING 1.2

- ☐ The total arrears are hereby confirmed.
- ☒ The total arrears, interest and penalties are reduced to judgment. This supersedes prior Nevada judgments, if any, awarded under this case number. Interest will be assessed on all unpaid child support balances for cases with a Nevada controlling order pursuant to NRS 99.040. A 10% penalty will be assessed on each unpaid installment, or portion thereof, of an obligation to pay support for a child, pursuant to NRS 125B.095.
- ☐ Arrears of \$_____ subject to modification until _____, and arrears of \$_____ reduced to judgment.
- ☒ Arrears listed above are reduced to judgment. This supersedes prior Nevada judgments, if any, awarded under this case number.
- ☐

\$ 686.00

TOTAL monthly payment is due on the 1st day of each month, and continues thereafter until said child(ren) reach majority, become emancipated or further order of the Court.

Respondent's **INCOME SHALL BE WITHHELD** for the payment of support.

- ☐ Good cause to stay income withholding is based on:_____. Said withholding shall be postponed until Respondent becomes delinquent in an amount equal to 30 days support.
- ☐ **ENFORCEMENT OF CONTROLLING ORDER:** The registered order from _____, dated _____, #_____, is hereby confirmed and is the controlling order for the following reasons: ☐ only order _____.
- ☐ **ESTABLISHMENT OF CONTROLLING ORDER:** This is the first order establishing a child support obligation for this noncustodial parent for the child(ren) listed in this order who reside(s) with this custodian.
- ☐ Respondent is referred to Employment Services for an appointment on _____ at _____ AM.
- ☒ Health insurance coverage for the minor child(ren) herein:
- ☐ Respondent to provide: ☒ Petitioner to provide, excluding Medicaid: ☐ Both Parties to provide:
- ☐ if available through employer. ☒ shall provide per court order.
- ☒ Ordered Party(ies) to provide proof of said insurance to the District Attorney's Office, Family Support Division within 90 days of today's date.

☐ CONTEMPT OF COURT ☒ NOT A SHOW CAUSE HEARING

☒ MODIFICATION OF PRIOR ORDER:

☒ Modification effective: 2/1/14.

☒ This order modifies a previously existing, previously controlling support order. By this modification, this tribunal assumes or retains continuing, exclusive jurisdiction of the child support obligation for the child(ren) and parties identified in this order. Modification is proper for the following reason(s):

☒ The previously controlling order is from Clark County, Nevada, dated March 13, 2013, #D-12-459171-D.

☒ An individual party, Richard Scott Kilgore, has requested modification of the previously controlling Nevada support order.

☐ An individual party, _____, has requested modification; this tribunal has personal jurisdiction over the non-movant and the issuing state (the state whose order controlled prior to this modification) is no longer the residence of any individual party/contestant or child(ren).

☐ An individual party, _____, has requested modification; all individual parties and children now reside in Nevada.

☐ All parties have filed written consent with the tribunal whose order controlled prior to this modification for this tribunal to modify the support obligation and assume continuing, exclusive jurisdiction.

☐ SUSPENSION OF LICENSES:

PAYMENTS

Steven B. Wallace, District Attorney, Nevada Bar No. 001565
Family Support Division
1900 East Flamingo Road #100
Las Vegas, Nevada 89119-5168

*02 671-9206 - TDD-702 365 Telen for the hearing (impaired)

1 All mailed payments **MUST** be made in the form of a cashier's check, money order or business check **ONLY**, made
2 payable to State Collection and Disbursement Unit (SCaDU). If payments are made in person, cash or debit card are
also accepted.

3 Payments can be mailed to:

State Collection and Disbursement Unit (SCaDU)
P.O. Box 98950
Las Vegas, Nevada 89193-8950

6 Payments can be made in person at:

State Collection and Disbursement Unit (SCaDU)
1900 East Flamingo Road
Las Vegas, Nevada 89119-5168

8 Additionally, the following information must be included with each payment: name (first, middle, last) of person
9 responsible for paying child support, social security number of person responsible for paying child support, child
support case number, and name of petitioner (first and last name of person receiving child support).

10 **NOTICE: NO CREDIT WILL BE GIVEN FOR PAYMENTS PAID DIRECTLY TO THE PETITIONER.**

11 **NOTICE: PRIOR ORDERS NOT SPECIFICALLY MODIFIED HEREIN REMAIN IN FULL FORCE AND EFFECT.**

12 **NOTICE:** Interest will be assessed on all unpaid child support balances for cases with a Nevada controlling order pursuant
13 to NRS 99.040. A 10% penalty will be assessed on each unpaid installment, or portion thereof, of an obligation to pay
support for a child, pursuant to NRS 125B.095. If the Respondent pays support through income withholding and the full
14 obligation is not met by the amount withheld by the employer, the Respondent is responsible to pay the difference between
the court ordered obligation and the amount withheld by the employer directly to the state disbursement unit. If the
Respondent fails to do so, he/she may be subject to assessment of penalties and interest. The Respondent may avoid these
15 additional costs by making current support payments each month. If another state takes jurisdiction and obtains a new order,
Nevada interest and penalties will only be calculated to the date of the new order and will be enforced.

16 **NOTICE:** Pursuant to NRS 125B.145 and federal law, EITHER parent, the legal guardian, and the Division of Welfare and
17 Supportive Services, where there is an assignment of support rights to the State, has the right to request a review of the
support provision of this order at least every three (3) years to determine if modification is appropriate; an application for this
purpose may be obtained from D.A. Family Support at 1900 E. Flamingo Rd., Suite 100, Las Vegas, Nevada 89119-5168.

18 **NOTICE:** Objections/Appeals are governed by EDCR1.40(e) and (f). You have ten (10) days from receipt of this Master's
19 Recommendation to serve and file written objections to it. A failure to file and serve written objections will result in a final
Order/Judgment being ordered by District Court. However, the Master's Recommendation is not an Order/Judgment unless
20 signed and filed by a Judge.

21 **NOTICE:** Appeal from a Final Judgment by the Court is governed by NRAP 4 and must be filed within 30 days of written
Notice of Entry of Judgment.

22 **NOTICE:** Respondent is responsible for notifying the District Attorney, Family Support Division, of any change of address,
23 change of employment, health insurance coverage, change of custody, or any order relative to child support within ten (10)
days of such change.

24 Respondent to bring new financial statement and proof of income next date.

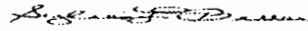
25 This order does not stay collection of support arrears by execution or any other means allowed by law.

26 *****
MISCELLANEOUS FINDINGS OF FACT, CONCLUSIONS OF LAW, AND RECOMMENDATIONS:

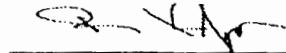
27 A wage withholding is in place. The parties agree to \$193 as medical support (which includes the emancipated child).
28

NEXT HEARING DATE IS O/C in Courtroom 2 in Child Support Court at Child Support Center of Southern Nevada, 1900 East Flamingo Road, Las Vegas, Nevada, for further proceedings.

DATED: FEBRUARY 25, 2014



MASTER



Respondent/Respondent's Attorney
Receipt of this document is
acknowledged by my signature.

ORDER/JUDGMENT

☒ The Clerk of the Court having reviewed the District Court's file and having determined that no objection has been filed within the ten day objection period, the Master's Recommendation is hereby deemed approved by the District Court pursuant to NRS 425.3844. The affixing of the Clerk of the Court's file stamp to this Master's Recommendation signifies that the ten-day objection period has expired without an objection having been filed and that the District Court deems the Master's Recommendation to be approved as an ORDER/JUDGMENT of the District Court, effective with the file stamp date, without need of a District Court Judge's signature affixed hereto. The parties are ordered to comply with this Order/Judgment.

☐ The District Court, having reviewed the above and foregoing Master's Recommendation, and having received and considered the objection thereto, as well as any other papers, testimony and argument related thereto and good cause appearing,

☐ IT IS HEREBY ORDERED that the Master's Recommendation IS affirmed and adopted as an ORDER/JUDGMENT of the District Court this _____ day of _____, 20____.

☐ IT IS HEREBY ORDERED that the Master's Recommendation IS NOT affirmed and adopted this _____ day of _____, 20____ and this matter is remanded to Child Support Court on _____, 20____ at _____M.

District Court Judge, Family Division

STEVEN B. WOLFSON, Clark County District Attorney
Nevada Bar No. 001565

By: 

DEPUTY DISTRICT ATTORNEY
FAMILY SUPPORT DIVISION
1900 East Flamingo Road, Suite 100
Las Vegas, Nevada 89119-5168

Steven B. Wolfson, District Attorney, Nevada Bar No. 001565
Family Support Division
1900 East Flamingo Road #100
Las Vegas, Nevada 89119-5168

(702) 671-9200 - TDD (702) 345-7466 for the hearing impaired

Exhibit 2

Exhibit 2

**Richard Kilgore
IRS Bill**

Of the IRS Debt Paid 2012 :

Richard Kilgore Paid:

\$200.00, April 15, 2012
\$200.00, May 15, 2012
\$100.00 June 15, 2012
\$100.00 July 15, 2012
\$200.00 Aug 15, 2012
\$200.00 Sept 15, 2012
\$200.00 Oct 15, 2012
\$200.00 Nov 15, 2012
\$200.00 Dec 15, 2012

\$1,600.00 total Paid 2012

Eleni Kilgore Paid

\$0 April 15, 2012
\$0 Mar 15, 2012
\$100.00 Jun 15, 2012
\$100.00 Jul 15, 2012
\$0 Aug 15, 2012
\$0 Sept 15, 2012
\$0 Oct 15, 2012
\$0 Nov 15, 2012
\$0 Dec 15, 2012

\$200.00 Total Paid 2012

IRS Debt Paid 2013

<\$146.93> **Penalty for non Payment**

January Payment was given to Eleni

Atty in open court in January

\$0 Jan 15, 2013

\$3,629.00 Jan 30, 2013(Tax Return)

\$ 200.00 Feb 15, 2013

\$0 Jan 15, 2013

\$0 Feb 15, 2013

\$200.00

Total: \$5,429.00

Remaining IRS Debt \$4,647.32

Medical Paid by Richard Kilgore:

\$84.00 Dr Malinger Alexandra
\$20.00 Co Pay Kid Fixer Richie
\$20.00 Co pay Kid Fixer Richie
\$20.00 Co Pay Kid Fixer Nicholas
\$60.00 Prescriptions Wal-Greens Richie/
Nicholas
\$60.00 Prescriptions Wal- Greens Richie
/ Nicholas
\$60.00 Prescriptions CVS Nicholas
\$90.43 Prescriptions CVS Nicholas
\$295.00 Traffic Ticket Alexandra

MEDICAL
2012
\$474.43

Total \$709.43

Kidfixers Pediatrics
10105 Banbury Cross Dr., Ste. 170
Las Vegas, NV 89144-6647

STATEMENT

ACCOUNT NUMBER: KILELE0002
STATEMENT DATE: 10/31/2012
AMOUNT DUE: \$10.00

Eleni Kilgore
6509 Columbia Falls Ct
Las Vegas, NV 89149-

AMOUNT
ENCLOSED:

\$

Inv #	Patient	Balance
75820	KILALE0001	\$10.00

☐ Please mark box and indicate any change in address on reverse side

(PLEASE DETACH AND RETURN TOP PORTION WITH PAYMENT)

Kidfixers Pediatrics

Statement Inquiries Number: (702)765-5437

SERVICE DATE	DESCRIPTION OF TRANSACTION	CHARGES	INSURANCE PAYMENTS	INSURANCE ADJUSTMENTS	PATIENT PAYMENTS	BALANCE
03/02/12	Alexandra Kilgore (KILALE0001) Sonya Aikels					
03/02/12	Inv # 75820 (THT)					
03/02/12	99214	\$180.00				
03/02/12	99000	\$25.00				
03/02/12	87880	\$40.00				
03/02/12	Patient Copayment - VISA				\$20.00	
05/01/12	Insurance Filed - Teachers Health Trust					
06/06/12	Insurance Payment - Teachers Health Trust		\$52.39			
06/06/12	Insurance Adjustment - Teachers Health Trust			\$162.61		
06/06/12	PDF					
06/06/12	Patient Due					\$10.00

STATEMENT DATE	LAST PAYMENT DATE	ACCOUNT NO.
10/31/2012	03/26/2012	KILELE0002

Please make checks payable to Kidfixers Pediatrics

PLEASE PAY THIS AMOUNT	\$10.00
PENDING INSURANCE	\$0.00
ACCOUNT BALANCE	\$10.00

HCI #	1	I
TYPE OF BILL	DATE OF BILL	DATE OF PRV. BILL
CYCLE	03/01/12	
INS.		

CENTENNIAL HILLS HOSPITAL MED CTR
6900 N DURANGO DR
LAS VEGAS, NV
866 823-4250
FEI # 20-4993360

89149-0689
BIRTH-DATE
06/29/00

PAGE NO.	1
HOSP. NO.	

H	T	PATIENT NAME	PATIENT NUMBER	SEX	AGE	ADMISSION DATE	DISCHARGE DATE	DAYS	OUT PATIENT
KILGORE		NICHOLAS	8002058066	M	11	02/24/12			

GUARANTOR NAME AND ADDRESS	C.O.B.	INSURANCE COMPANY NAME	GROUP NUMBER	POLICY NUMBER
ELENI KILGORE 6509 COLUMBIA FALLS CT LAS VEGAS NV 89149-4522	1	TEACHERS HEALTH		000014906

AMOUNT OF PAYMENT	6
-------------------	---

DATE OF SERVICE	DESCRIPTION OF HOSPITAL SERVICES	SERVICE CODE	TOTAL CHARGES	EST. COVERAGE INS.CO. NO. 1	EST. COVERAGE INS.CO. NO. 2	EST. COVERAGE INS.CO. NO. 3	EST. COVERAGE INS.CO. NO. 4	PATIENT AMOUNT
DETAIL OF CURRENT CHARGES, PAYMENTS AND ADJUSTMENTS								
02/24	54319215 002		6.00	6.00				
02/24	54320817 002		4.00	4.00				
02/24	54320817 002		4.00	4.00				
02/24	53203055 001 71020		681.00	681.00				
02/24	55000269 001 94640		220.00	220.00				
02/24	55000350 001 94664		211.00	211.00				
02/24	43022359 001 99283		1125.00	1125.00				
02/24	43034958 001	450						
02/24	54000252 002		6.00	6.00				
02/24	63190003 004							
02/27	99800096 001		150.00					150.00-
UPFRONT ER PAYMENT CODE								
SUMMARY OF CURRENT PAY/ADJ			150.00					150.00-
SUMMARY OF CURRENT CHARGES								
	PHARMACY		6.00	6.00				
	RADIOLOGY		681.00	681.00				
	RESPIRATORY		431.00	431.00				
	EMERGENCY ROOM		1125.00	1125.00				
	PHARM OTHER		6.00	6.00				
ADDITIONAL PATIENT BILLING MAY BE NECESSARY FOR ANY CHARGES NOT POSTED WHEN THIS STATEMENT WAS PREPARED. OR IF INSURANCE CARRIERS DO NOT PAY ANY PART OF THE AMOUNTS SHOWN UNDER ESTIMATED INSURANCE COVERAGE.								

HCI # 1 I

CENTENNIAL HILLS HOSPITAL MED CTR
6900 N DURANGO DR
LAS VEGAS, NV
866 823-4250
FEI # 20-4993360

PAGE NO.
2

TYPE OF BILL	DATE OF BILL	DATE OF PREV. BILL
CYCLE	03/01/12	
INS.		

89149-0689

BIRTH-DATE
06/29/00

HOSP. NO.

H	T	PATIENT NAME	PATIENT NUMBER	SEX	AGE	ADMISSION DATE	DISCHARGE DATE	DAYS	OUT PATIENT
		KILGORE, NICHOLAS	8002058066	M	11	02/24/12			

GUARANTOR NAME AND ADDRESS	C.D.B.	INSURANCE COMPANY NAME	GROUP NUMBER	POLICY NUMBER
ELENI KILGORE 6509 COLUMBIA FALLS CT LAS VEGAS NV 89149-4522	1	TEACHERS HEALTH		000014906

AMOUNT OF PAYMENT \$

DATE OF SERVICE	DESCRIPTION OF HOSPITAL SERVICES	SERVICE CODE	TOTAL CHARGES	EST. COVERAGE INS.CO. NO. 1	EST. COVERAGE INS.CO. NO. 2	EST. COVERAGE INS.CO. NO. 3	EST. COVERAGE INS.CO. NO. 4	PATIENT AMOUNT
	SUB-TOTAL OF CURR. CHARGES		2249.00	2249.00				
	EMPLOYER INFORMATION: CCSD							
	DIAGNOSIS:	473.9 780.60						
	AMOUNTS DUE HEREUNDER HAVE BEEN ASSIGNED TO UHS RECEIVABLES CORP. & US BANK, N.A. AS TRUSTEE							
T O T A L S			2099.00	2249.00				150.00-
PATIENT NUMBER	PLEASE REFER TO PATIENT NUMBER ON ALL INQUIRIES AND CORRESPONDENCE.			ADDITIONAL PATIENT BILLING MAY BE NECESSARY FOR ANY CHARGES NOT POSTED WHEN THIS STATEMENT WAS PREPARED, OR IF INSURANCE CARRIERS				
8002058066								

ADDITIONAL PATIENT BILLING MAY BE NECESSARY FOR ANY CHARGES NOT POSTED WHEN THIS STATEMENT WAS PREPARED. OR IF INSURANCE CARRIERS DO NOT PAY ANY PART OF THE AMOUNTS SHOWN UNDER ESTIMATED INSURANCE COVERAGE.

KI
04/17/2013

PROMISED: 08:00p
04-17-2013
Scripts: 01

KI
05/25/2013

PROMISED: 03:00
ReadyFill™ 05-25-2013
Scripts: 0

#2929 Ph: 702.645-4382

#2929 Ph: 702.645-4382

7190 W. CRAIG RD.
LAS VEGAS, NV
89129

7190 W. CRAIG RD.
LAS VEGAS, NV
89129



KILGORE, NICHOLAS
10151 DORELL LANE, LAS VEGAS, NV 89166
Ph: 702.325-1835 DOB: 06-00
METHYLPHENIDATE ER 27 MG TAB
WATSON LABS
TAKE 1 TABLET BY MOUTH EVERY MORNING

Date: 04/17/2013 DAW: 0
Rx: N 0653256 00

KILGORE, NICHOLAS
10151 DORELL LANE, LAS VEGAS, NV 89166
Ph: 702.325-1835 DOB: 06-00
INTUNIV ER 2 MG TABLET
SHIRE LAB INC
TAKE 1 TABLET(S) BY MOUTH DAILY

Date: 05/25/2013 DAW: 0
Rx: 0635137 03

NDC:00591-2716-01 Days Supply: 30 Refills: 0 Qty:30 EA
Prescr: SONYA LENAY AIKELS
TP: 2619 GR: RX1122
AUTH: 131077139443098999 CAREMARK BIN 004338

PAY: \$20.00

Caps: Y

NDC:54092-0515-02 Days Supply: 30 Refills: 0 Qty:30 EA

Prescr: SONYA LENAY AIKELS
TP: 2619 GR: RX1122
AUTH: 131455579070067999 CAREMARK BIN 004338
TP: 22395 GR: EC31005023
THERAPY FIRST

PAY: \$15.00

Caps:

Itchy eyes? Stuffy nose?
Scratchy throat?

Feel better faster!

- Open 7 days a week, evenings and weekends
- Most insurance accepted
- No appointment necessary
- Find a clinic at minuteclinic.com

 **minute clinic**

01180213_Summed

OUCH!

We treat bug bites, sunburn,
poison ivy and more!

 **minute clinic**

Find a clinic at minuteclinic.com

See minuteclinic.com/summer for details and limitations.

01180213_Summed

**Order Refills
Online**

Create your account at
CVS.com/pharmacy



**Save \$10* on
Camp and
Sports Physicals**

Limited time only. Find a
clinic at minuteclinic.com



*See minuteclinic.com/save
for details and limitations.
Offer expires 9/30/13.

 **minute
clinic**

KI ACUTE
08/12/2013

PROMISED: 11:05a
08-12-2013
Scripts: 01

#2929 Ph: 702.645-4382

CUSTOMER RECEIPT

7190 W. CRAIG RD
LAS VEGAS, NV
89129



27 0677388 000 000 00 0900000

KILGORE, NICHOLAS
10151 DORELL LANE, LAS VEGAS, NV 89166
Ph: 702.325-1835 CDB 06-00
AZITHROMYCIN 250 MG DOSE PACK

Date: 08/12/2013 DAW: 0
Rx: 0677388 00

TAKE 2 TABLETS BY MOUTH TODAY THEN TAKE 1 TABLET DAILY FOR 4 DAYS

NDC: 50111-0787-22 Days Supply: 30 Refills: 0 Qty: 6 EA

Prscr: ROBERT SCOTT JEROME

TP: 2619 AUTH: 132746504586148909

CAREMARK BIN 004338

PAY: \$0.00

Caps: Y

KI ACUTE
08/12/2013

PROMISED: 04:16p
08-12-2013
Scripts: 01

#2929 Ph: 702.645-4382

CUSTOMER RECEIPT

7190 W. CRAIG RD
LAS VEGAS, NV
89129

COUNSEL
New Drug Dosage



27 0677495 000 000 00 0002500

KILGORE, NICHOLAS
10151 DORELL LANE, LAS VEGAS, NV 89166
Ph: 702.325-1835 CDB 06-00
PROAIR HFA 90 MCG INHALER

Date: 08/12/2013 DAW: 0
Rx: 0677495 00

TEVA SPECIALTY
INHALE 2 PUFFS BY MOUTH EVERY 4 HOURS A DAY AS NEEDED FOR COUGH OR WHEEZE (FOR SCHOOL)

NDC: 59310-0579-22 Days Supply: 30 Refills: 0 Qty: 8.5 GM

Prscr: ROBERT SCOTT JEROME

TP: 2619 AUTH: 132746504586148909

GR: RX1122

CAREMARK BIN 004338

PAY: \$25.00

Caps: Y

002384

*Your CVS Pharmacist can
answer questions about
your medications*

- Knowledgeable
- Caring
- Committed
- Confidential

CVS/pharmacy

002384

*Your CVS Pharmacist can
answer questions about
your medications*

- Knowledgeable
- Caring
- Committed
- Confidential

CVS/pharmacy

001538

**CVS
RapidRefill™**

Avoid waiting for your prescription refills
Order your refills 24 hours per day/7 days per week

1. Call your CVS/pharmacy.
2. Enter your CVS prescription number.
3. Enter the time you'd like to pick up your prescription.

Or online at www.CVS.com/pharmacy

Don't Wait, Order a Day Ahead

001538

**CVS
RapidRefill™**

Avoid waiting for your prescription refills
Order your refills 24 hours per day/7 days per week

1. Call your CVS/pharmacy.
2. Enter your CVS prescription number.
3. Enter the time you'd like to pick up your prescription.

Or online at www.CVS.com/pharmacy

Don't Wait, Order a Day Ahead

CVS/pharmacy

7190 W. CRAIG RD, LAS VEGAS, NV
PHARMACY: 645-7495 STORE: 396 1682

REG#10 TRN#2032 CSHR#1112181 STR#2929

Helped by: LORIEN

F 1 RX #: ****7570000 .00N
F 1 RX #: ****4460000 20.00N

2 ITEMS
TOTAL 20.00
VISA 20.00
*****0106 MS
CHANGE .00



2502 9293 2312 1511 4
RETURNS WITH RECEIPT THRU 12/31/13

AUGUST 19 2013

F-FLEXIBLE SPENDING ACCT SUMMER 2013
Prescription Eligible Items

FSA summary above includes items
(and tax) that may be eligible for plan
reimbursement. Restrictions may apply.

GET YOUR CVS EXTRACARE CARD

THANK YOU. SHOP 24 HOURS AT CVS.COM

KI
08/14/2013

7190 W. CRAIG RD
LAS VEGAS, NV
89129

KILGORE, NICHOLAS

10151 DORELL LANE, LAS VEGAS, NV 89166
Ph: 702.325.1835 008: 06-00

METHYLPHENIDATE ER 27 MG TAB

WATSON LABS

TAKE 1 TABLET BY MOUTH EVERY MORNING

NDC:00591-2716-01 Days Supply: 30 Refills: 0 Qty:30 EA

Prescriber: ROBERT SCOTT JEROME

TP: 2013

AUTH: 132263680400120889

GR: RX1122

CAREMARK BIN 004336

PAY: \$20.00

Caps: Y

PROMISED: 12:00p

08-14-2013

Scripts: 01

CUSTOMER RECEIPT

#2929 Ph: 702.645-4382



27 0677446 800 000 00 0002000

Date: 08/14/2013 DAW: 0

Rx: N 0677446 00

002364

*Your CVS Pharmacist can
answer questions about
your medications*

- Knowledgeable
- Caring
- Committed
- Confidential

• **CVS/pharmacy**

001538

CVS
RapidRefill™

Avoid waiting for your prescription refills
Order your refills 24 hours per day/7 days per week

1. Call your CVS/pharmacy.
2. Enter your CVS prescription number.
3. Enter the time you'd like to pick up your prescription.

Or online at www.CVS.com/pharmacy

Don't Wait, Order a Day Ahead

Kidfixers Pediatrics

10105 Banbury Cross Drive Ste 170 Las Vegas, NV 89144-6647, Las Vegas NV 89144-6647 Phone: (702)765-5437 Fax: (702)240-7268

Receipt

Patient Name: Kilgore, Nicholas

Account No: KILNIC0001

Guarantor Balance: \$0.00

Date: 08/19/2013

Co-Payment Paid: \$20.00

Patient Paid: \$0.00

Patient Deposit: \$0.00

Payment Type: CASH

Check/Credit Card No:

Payment Date: 08/19/2013

10105 Banbury Cross Drive Ste 170 Las Vegas, NV 89144-6647, Las Vegas NV 89144-6647 Phone: (702)765-5437 Fax: (702)240-7268

JA-000177

08/19/2013

ACUTE

PROMISED: 03:57p
08-19-2013
Scripts: 01

7190 W. CRAIG RD.
LAS VEGAS, NV
89129

COUNSEL
New Drug

#2929 Ph: 702.645-4382



27 0678757 000 006 00 0000000
Date: 08/19/2013 DAW: 0
Rx: 0678757 00

KILGORE, NICHOLAS
10151 DORELL LANE, LAS VEGAS, NV 89166
Ph: 702.325-1835 DOB: 06-00
PREDNISONE 10 MG TABLET
4 TABS DAY #1, 3 TABS DAY #2, 3 TABS DAY #3, 2 TABS DAY #4

NDC: 00054-0017-25 Days Supply: 4 Refills: 0 Qty: 15 EA
Prescriber: ROBERT SCOTT JEROME
TP: 2619 GR RX1122
AUTH: 132313387512144369 CAREMARK BIN 004338

PAY: \$0.00

Caps: Y

08/19/2013

PROMISED: 08:57p
08-19-2013
Scripts: 01

Partial Fill 2 of 6

#2929 Ph: 702.645-4382

COUNSEL
New Drug



KILGORE, NICHOLAS
10151 DORELL LANE, LAS VEGAS, NV 89166
Ph: 702.325-1835 DOB: 06-00
EPIPEN 0.3 MG AUTO-INJ 2-PAK
MYLAN SPECIALTY
USE AS DIRECTED

CUSTOMER RECEIPT
Balance In: 08-20-2013

Date: 08/19/2013 DAW: 0
Rx: 0678817 00

PRICE: \$0.00

NDC: 49502-0500-02 Days Supply: 30 Refills: 3 Qty: 2 EA
Prescriber: ROBERT SCOTT JEROME
TP: 1

PAY: \$0.00

Caps: Y

002364

1044521

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CVS/pharmacy

001538

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CVS/pharmacy

Name: KILGORE, NICHOLAS

Preferred Contact: (702)325-1835

Rx#: 0678817

Drug Name: EPIPEN 0.3 MG AUTO-INJ 2-PAK

Action Note

Unfortunately we do not have enough of the medication to fill the entire prescription for you at this time.

Gave 2 + Due 4

Date Promised: 08/21/2013

We spoke with you on 08/19/2013 08:41 PM Questions?
Please ask a Pharmacy Team Member

Message Center

Employee: Noel S.

19/12/2013

180 W. CRAIG RD
LAS VEGAS, NV
89129

#2929 Ph 702.645-4382

COUNSEL
New Drug



Date: 09/12/2013 DAW: 0
Rx: 0682990 00

KILGORE, NICHOLAS

10151 DORELL LANE, LAS VEGAS, NV 89166
Ph: 702.325-1835 DOB: 08-00

ADVAIR 100-50 DISKUS

INHALE 1 PUFF(S) BY MOUTH TWICE A DAY

NDC: 00173-0695-00 Days Supply: 30 Refills: 3 Qty: 60 EA

Prscr: SONYA LENAY AIKELS

TP: 2619 AUTH: 132557017959135999

GR: RX1122

CAREMARK BIN 004338

PAY: \$50.00

Caps: Y

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09/12/2013

7150 W. CRAIG RD
LAS VEGAS, NV
89125

#292 702.645-4382

COUNSEL
New Drug



Date: 09/12/2013 DAW: 0
Rx: 0682993 00

KILGORE, NICHOLAS

10151 DORELL LANE, LAS VEGAS, NV 89166
Ph: 702.325-1835 DOB: 08-00

INTUNIV ER 3 MG TABLET

TAKE 1 TABLET BY MOUTH DAILY

NDC: 54092-0517-02 Days Supply: 30 Refills: 6 Qty: 30 EA

Prscr: SONYA LENAY AIKELS

TP: 2619 AUTH: 132557035705115998

TP: 22395 AUTH: U1325544512800

GR: RX1122

CAREMARK BIN 004338

GR: EC31005026 THERAPY FIRST

PAY: \$15.00

Caps: Y

INS2: \$35.00

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Or online at www.CVS.com/pharmacy

Don't Wait, Order a Day Ahead

NI
09/12/2013

7190 W. CRAIG RD
LAS VEGAS, NV
89129

KILGORE, NICHOLAS
10151 DORELL LANE, LAS VEGAS, NV 89166
Ph: 702.325-1835 008 06-00
METHYLPHENIDATE ER 27 MG TAB
ACTAVIS PHARMA
TAKE 1 TABLET BY MOUTH IN THE MORNING

NDC:00591-2716-01 Days Supply: 30 Refills: 0 Qty:30 EA
Prschr: SONYA LENAY AIKELS
TP: 2619
AUTH: 132557292291118999 GR: RX1127
CAREMARK BIN 004338

PAY: \$20.00

Caps: Y

FROM: 09-12-2013
Scripts: 01

#2929 Ph: 702.645-4382



27 0683011 000 000 00 0002000
Date: 09/12/2013 DAW: 0
Rx: N 0683011 00

NI ACUTE
09/12/2013

7190 W. CRAIG RD
LAS VEGAS, NV
89129

KILGORE, NICHOLAS
10151 DORELL LANE, LAS VEGAS, NV 89166
Ph: 702.325-1835 008 06-00
MUPIROCIN 2% CREAM
COUNSEL
New Drug
APPLY SMALL AMOUNT TO AFFECTED AREA TWICE A DAY

NDC:68462-0564-17 Days Supply: 30 Refills: 1 Qty:30 GM
Prschr: SONYA LENAY AIKELS
TP: 2619
AUTH: 132557166357139998 GR: RX1127
CAREMARK BIN 004338

PAY: \$20.00

Caps: Y

09-12-2013
Scripts: 01

Ph: 702.645-4382



27 0682992 000 001 00 0002000
Date: 09/12/2013 DAW: 0
Rx: 0682992 00

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Or online at www.CVS.com/pharmacy

Don't Wait, Order a Day Ahead

09/12/2013

Scripts: 01

7190 W. CRAIG RD.
LAS VEGAS, NV
89129

#2929 Ph: 702.645-4

COUNCIL

27 0682991 000 000 00 0002000
Date: 09/12/2013 DAW: 0
Rx: 0682991 00**KILGORE, NICHOLAS**
10151 DORELL LANE, LAS VEGAS, NV 89166
Ph: 702.325-1835 DOB: 06-00
CLINDAMYCIN-BENZOYL PEROX GEL

APPLY THIN FILM TO AFFECTED AREA DAILY

NDC: 00378-8688-54 Days Supply: 30 Refills: 3 Qty: 50 GM
Prscr: SONYA LENAY AIKELS
TP: 2619 GR: RX1122
AUTH: 13255702922119909 CAREMARK BIN 004338

PAY: \$20.00

Caps: Y

08/12/2013

Ph: 702.645-4382

CUSTOMER RECEIPT

7190 W. CRAIG RD.
LAS VEGAS, NV
89129COUNCIL
New Drug Dosage27 0677495 000 000 00 0002500
Date: 08/12/2013 DAW: 0
Rx: 0677495 00**KILGORE, NICHOLAS**
10151 DORELL LANE, LAS VEGAS, NV 89166
Ph: 702.325-1835 DOB: 06-00
PROAIR HFA 90 MCG INHALERTEVA SPECIALTY
INHALE 2 PUFFS BY MOUTH EVERY 4 HOURS A DAY AS NEEDED FOR
COUGH OR WHEEZE (FOR SCHOOL)NDC: 50210-0579-22 Days Supply: 30 Refills: 0 Qty: 8.5 GM
Prscr: ROBERT SCOTT JEROME
TP: 2619 GR: RX1122
AUTH: 132746504568143999 CAREMARK BIN 004338

PAY: \$25.00

Caps: Y

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KI ACUTE

PROMISED: 11:05
08-12-2013
Scripts

7190 W CRAIG RD
LAS VEGAS, NV
89129

#2929 Ph 702.645-4382

CUSTOMER RECEIPT



KILGORE NICHOLAS

10151 DORELL LANE, LAS VEGAS, NV 89166

Ph: 702.325-1835 DOB: 06-00

AZITHROMYCIN 250 MG DOSE PACK

TAKE 2 TABLETS BY MOUTH TODAY, THEN TAKE 1 TABLET DAILY FOR 4 DAYS

Date: 08/12/2013 DAW: 0

Rx: 0677388 00

NDC: 00111-0787-66 Days Supply: 5 Refills: 0 Qty: 6 EA

Prescriber: ROBERT SCOTT JEROME

PAY: \$0.00

JUTHEP: 122214541050033895

GR: 04-100

CAREMARK BIN 004335

Caps: Y

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JA-000183

CVS/pharmacy

7190 W. CRAIG RD., FARMINGTON, CT 06031
PHARMACY: 645-7495 STORE: 0001

REG#10 TRN#3967 CSHR#0000000000000000

F 1 RX #:	****9930000	15.00N
F 1 RX #:	****0110000	20.00N
F 1 RX #:	****9920000	20.00N
F 1 RX #:	****9910000	20.00N
F 1 RX #:	****9900000	50.00N

5 ITEMS

TOTAL	125.00
VISA	125.00
*****0106	MS
CHANGE	.00



2502 9293 2553 9641 00
RETURNS WITH RECEIPT THRU 11/31/03

SEPTEMBER 12, 2013 8:01 PM

F-FLEXIBLE SPENDING ACCT SUMMARY
Prescription Eligible Total: 125.00

FSA summary above includes items
(and tax) that may be eligible for your
reimbursement. Restrictions may apply.

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THANK YOU. SHOP 24 HOURS AT CVS.COM

CHILDREN'S BONE AND SPINE SURGERY LLP

1525 E. Windmill Lane Ste. 201 , Las Vegas NV 89123-1903 Phone: (702)434-6920 F (702)434-1524

Receipt

Patient Name: KILGORE, RICHARD BOYD
Account No: KILRIC0001
Guarantor Balance: \$0.00

Date: 11/22/2013

Co-Payment Paid: \$20.00
Patient Paid: \$0.00
Patient Deposit: \$0.00
Payment Type: CASH
Check/Credit Card No:
Payment Date: 11/22/2013

CHILDREN'S BONE & SPINE SURGERY
1525 E WINDMILL LANE #101
LAS VEGAS, NV 89123
702-434-6920
KNEE BRACE
Merchant ID: 192114217
Term ID: 7113

Sale

DEBIT
XXXXXXXXXX3317
Entry Method: Swiped
Approved: Online Batch#: 000000
11/22/13 17:27:33
Debit Ref #: 570
Inv#: 00000006 Appr Code: 044310
Total: \$ 31.00

CUSTOMER COPY
THANK YOU

12/15/2013

7190 W CRAIG RD
LAS VEGAS, NV
89129

KILGORE, NICHOLAS
10151 DORELL LANE, LAS VEGAS, NV 89166
Ph: 702.325-1835 DOB: 06-00
INTUNIV ER 3 MG TABLET
SHIRI US INC
TAKE 1 TABLET BY MOUTH DAILY

NDC:54092-0517-02 Days Supply: 30 Refills: 3 Qty:30 EA
Prescriber: SONYA LENAY AIKELS
TP: 2619 GR: RX1122
AUTH#: 133490742502140989 CAREMARK BIN 004336
TP: 22395 GR: EC31005026
AUTH#: U1334900E22800 THERAPY FIRST

PROMISED: 06:00p
ReadyFill™ 12-15-2013
Scripts: 01

#2929 Ph: 702.645-4382



Date: 12/15/2013 DAW: 0
Rx: 0682993 03

PAY: \$15.00

Caps: Y

12/13/2013

7190 W CRAIG RD
LAS VEGAS, NV
89129

KILGORE, NICHOLAS
10151 DORELL LANE, LAS VEGAS, NV 89166
Ph: 702.325-1835 DOB: 06-00
METHYLPHENIDATE ER 36 MG TAB
COUNSEL
New Drug
TAKE 1 TABLET BY MOUTH EVERY MORNING

NDC:62175-0312-37 Days Supply: 30 Refills: 0 Qty:30 EA
Prescriber: JOHN LEPORE
TP: 2619 GR: RX1122
AUTH#: 133477971589134998 CAREMARK BIN 004336

PROMISED: 10:00a
12-14-2013
Scripts: 01

#2929 Ph: 702.645-4382



Date: 12/13/2013 DAW: 0
Rx: N 0699972 00

PAY: \$20.00

Caps: Y

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KI
12/13/2013

PROMISED: 12:00a
12-14-2013
Scripts: 01
CUSTOMER RECEIPT

#2929 Ph: 702.645-4382

7100 W CRAIG RD.
LAS VEGAS, NV
89129

COUNSEL
New Drug



KILGORE, NICHOLAS
10151 DORELL LANE, LAS VEGAS, NV 89166
Ph: 702.325-1835 DOB: 05-00
METHYLPHENIDATE ER 36 MG TAB
EREMERS URSAN
TAKE 1 TABLET BY MOUTH EVERY MORNING

Date: 12/13/2013 OAW: 0
Rx: N 0699972 00

NDC: 62175-0312-37 Days Supply: 30 Refills: 0 Qty: 30 EA
Prescriber: JOHN LEPORE
TP: 2019 AUTH: 1334779/1580134998
GR: RX1122 CAREMARK BIN 804338

PAY: \$20.00

Caps: Y

• Headache
• dry mouth

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1/12/14
CHILDRENS BONE & SPINE SURGERY
1525 F WINDMILL LANE #201
LAS VEGAS NV 89123
702-434-6920

Merchant ID: 162109292
Term ID: 7118

Sale

DEBIT

XXXXXXXXXXXX0106

Entry Method: Swiped

Apprvd: Online Batch#: 000005

10/17/14 09:09:36

Debit Ref ID: 999

Inv#: 00000004 Appr Code: 101586

Total: \$ 20.00

Customer Copy

THANK YOU

NICHOLAS K. V. 608
CHILDRENS BONE & SPINE SURGERY
1525 F WINDMILL LANE #201
LAS VEGAS NV 89123
702-434-6920

Merchant ID: 162109292
Term ID: 7118

Sale

DEBIT

XXXXXXXXXXXX0106

Entry Method: Swiped

Apprvd: Online Batch#: 000005

10/17/14 09:09:00

Debit Ref ID: 999

Inv#: 00000007 Appr Code: 134039

Total: \$ 10.00

Customer Copy

THANK YOU

MALLINGER FAMILY EYECA
1930 VILLAGE CENTER #10
LAS VEGAS, NV 89134

09/01/2014

14:42:42

MID: 000000003881334

TID: 15916 05

CREDIT CARD

VISA SALE

CARD #

XXXXXXXXXXXX33

INVOICE

000

SEQ #:

000

Batch #:

000021

Appr val Code:

024217

Entry Method:

Swiped

Mode:

Online

SALE AMOUNT

\$72.50

CUSTOMER COPY

*NICHOLAS
CO-PAY &
HALL OF GUESTS*
\$145.00 TOTAL
COST

7180 W. CRAIG RD.
LAS VEGAS, NV
89120

KILGORE NICHOLAS
10151 DORELL LANE, LAS VEGAS, NV 89166
Ph: 702.325-1835 DOB: 06-00
INTUNIVER 3 MG TABLET
SHIRE US INC
TAKE 1 TABLET BY MOUTH DAILY



Date: 02/12/2014 DAW: 0
Rx: 0705131 01

NDC:54092-0517-02 Days Supply: 30 Refills: 5 Qty:30 EA
Prescriber: SONYA LENAY AIKELS
TP: 2610 GR: RX1122
AUTH: 140435088356136699 CAREMARK BIN 084326
TP: 22395 GR: EC31005031
AUTH: U14043P1102300 THERAPY FIRST

PAY: \$15.00

Caps: Y

002384

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- | | |
|-----------------|----------------|
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CVS/pharmacy

36
KI



APM *0406889 0201 3 0000508 1*

NICHOLAS KILGORE
6509 Columbia Falls Ct
Las Vegas, NV 891494522
(702)325-1835
• Your Insurance Saved You: \$18.91

WAITING

THU 7:27PM

\$5.08

EXPRESS PAY

06/26/14

New

Walgreens

#12539 6825 N DURANGO DR
LAS VEGAS, NV 89149
702-260-8242

960 0453 0032 06/26/2014 9:48 PM

FSA RX 0406889 5.08
CLM RF# 141777682937167998
FSA RX 0406888 9.46
CLM RF# 141777679268117999

TOTAL 14.54
DEBIT CARD 14.54
CHANGE .00

TOTAL FSA ITEMS 0.00
TOTAL RX ITEMS 14.54
TOTAL FSA AND RX ITEMS 14.54

APPROVED FSA/HRA AMOUNT 0.00

THANK YOU FOR SHOPPING AT WALGREENS

WAITING

THU 7:27PM

\$9.46

EXPRESS PAY

06/26/14

New



APM *0406888 0101 3 0000946 7*

36
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6509 Columbia Falls Ct
Las Vegas, NV 891494522
(702)325-1835

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CHILDREN'S BONE AND SPINE SURGERY LLP

1525 E. Windmill Lane Ste. 201 , Las Vegas NV 89123-1903 Phone: (702)434-6920 Fax: (702)434-1524

Receipt

Patient Name: KILGORE \$\$, RICHARD BOY
Account No: KILRIC0001
Guarantor Balance: \$0.00

Date: 04/11/2014

Co-Payment Paid: \$0.00
Patient Paid: \$49.77
Patient Deposit: \$0.00
Payment Type: VISA
Check/Credit Card No:
Payment Date: 04/11/2014

CHILDREN'S BONE & SPINE SURGERY
1525 E WINDMILL LANE #101
LAS VEGAS NV 89123
702-434-6920

Merchant ID: 172114217
Term ID: 7118

Sale

DEBIT

XXXXXXXXXXXX3317

Entry Method: Swiped

Apprvd: Online Batch#: 000004

04/11/14

Debit Ref #: 997

11:42:37

Inv#: 00000003 Appr Code: 070314

Total: \$ 49.77

Customer Copy

THANK YOU!

CVS/pharmacy

7190 W. CRAIG RD. E. MEAD, WA 99131
PHARMACY: 645-7495

REG#10 TRN#0128 CSH#111

Helped by: KENYA

F 1 RX #: ****9930030 15.00
F 1 RX #: ****9720000 20.00

2 ITEMS

TOTAL	35.00
VISA	35.00
*****0106	MS
CHANGE	.00



2502 9293 3510 1281 01
RETURNS WITH RECEIPT THRU 02/15/2014

DECEMBER 17, 2013 5:00 PM

F-FLEXIBLE SPENDING ACCT SUMMARY
Prescription Eligible Total: 35.00

FSA summary above includes items
(and tax) that may be eligible for plan
reimbursement. Restrictions may apply.

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THANK YOU. SHOP 24 HOURS AT CVS.COM

CVS/pharmacy

7190 W CRAIG RD. LN
PHARMACY, 645 7495 5100

REG#10 TRN#2313 CSH#1141600

Helped by: MOISES

F I RX #: ****1310000 50.00
F I RX #: ****3280000 20.00

2 ITEMS

TOTAL	70.00
VISA	70.00
*****0100	00
CHANGE	00



2502 9294 0152 3131 00
RETURNS WITH RECEIPT THRU 03/16/2014

JANUARY 15, 2014 5:15 PM

F-FLEXIBLE SPENDING ACCT SUMMARY (FSA)
Prescription Eligible Total 70.00

FSA summary above includes items
(and tax) that may be eligible for plan
reimbursement. Restrictions may apply.

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THANK YOU. SHOP 24 HOURS AT CVS.COM

HCI # 1 I

CENTENNIAL HILLS HOSPITAL MED CTR

TYPE OF BILL	DATE OF BILL	DATE OF PREV. BILL
CYCLE	07/04/14	
INS.		

6900 N DURANGO DR
LAS VEGAS, NV
866 823-4250
FEI # 20-4993360

89149-0689

BIRTH-DATE
06/29/00

PAGE NO.
1

HOSP. NO.

H	T	PATIENT NAME	PATIENT NUMBER	SEX	AGE	ADMISSION DATE	DISCHARGE DATE	DAYS	OUT PATIENT
		KILGORE, NICHOLAS	8003448506	M	14	06/28/14			

GUARANTOR NAME AND ADDRESS	C.O.B.	INSURANCE COMPANY NAME	GROUP NUMBER	POLICY NUMBER
ELFNI KILGORE 6509 COLUMBIA FALLS CT LAS VEGAS NV 89149-4522	1	TEACHERS HEALTH T		000014906

AMOUNT OF PAYMENT \$

DATE OF SERVICE	DESCRIPTION OF HOSPITAL SERVICES	SERVICE CODE	TOTAL CHARGES	EST. COVERAGE INS.CO. NO. 1	EST. COVERAGE INS.CO. NO. 2	EST. COVERAGE INS.CO. NO. 3	EST. COVERAGE INS.CO. NO. 4	PATIENT AMOUNT
DETAIL OF CURRENT CHARGES, PAYMENTS AND ADJUSTMENTS								
06/28	51000057 001 80048		615.00	615.00				
	BMP	300						
06/28	51009579 001 85025		332.00	332.00				
	CBC AUTO W/AUTO DIFF	305						
06/28	51010320 001 85610		271.00	271.00				
	PT - PROTHROMBIN TIME							
06/28	51018851 001 36415		37.00	37.00				
	SPEC COLL VENOUS VENIPUNCT	300						
06/28	43022300 001 99283		1225.00	1225.00				
	3MLEVEL 3 ED W/O PROCEDURES							
06/28	43034958 001							
	ER STATISTICAL CHARGE							
06/28	54079777 002		6.00	6.00				
	PSEUDOPHEDRINE 30MG TAB							
06/30	99800096 001		150.00					150.00-
	UPFRONT ER PAYMENT CODE							
	SUMMARY OF CURRENT PAY/ADJ		150.00					150.00-
	SUMMARY OF CURRENT CHARGES							
	LABORATORY		1255.00	1255.00				
	EMERGENCY ROOM		1225.00	1225.00				
	PHARM OTHER		6.00	6.00				
	SUB-TOTAL OF CURR. CHARGES		2486.00	2486.00				
	EMPLOYER INFORMATION:							
	CCSD							
TOTALS			2336.00	2486.00				150.00-

PATIENT NUMBER	PLEASE REFER TO PATIENT NUMBER ON ALL INQUIRIES AND CORRESPONDENCE.	ADDITIONAL PATIENT BILLING MAY BE NECESSARY FOR ANY CHARGES NOT POSTED WHEN THIS STATEMENT WAS PREPARED, OR IF INSURANCE CARRIERS DO NOT PAY ANY PART OF THE AMOUNTS SHOWN UNDER ESTIMATED INSURANCE COVERAGE.
8003448506		

CENTENNIAL HILLS HOSPITAL MED CTR
LAS VEGAS, NV

HCI # 1 T

CENTENNIAL HILLS HOSPITAL MED CTR

PAGE NO.
2

TYPE OF BILL	DATE OF BILL	DATE OF PREV. BILL
CYCLE	07/04/14	
INS.		

6900 N DURANGO DR
LAS VEGAS, NV
866 823-4250
FEI # 20-4993360

E9149-0689

BIRTH-DATE
06/29/00

HOSP. NO.

H	T	PATIENT NAME	PATIENT NUMBER	SEX	AGE	ADMISSION DATE	DISCHARGE DATE	DAYS	OUT PATIENT
		KILGORE, NICHOLAS	8003448506	M	14	06/28/14			

GUARANTOR NAME AND ADDRESS	C.O.B.	INSURANCE COMPANY NAME	GROUP NUMBER	POLICY NUMBER
ELENI KILGORE 6509 COLUMBIA FALLS CT LAS VEGAS NV 89149-4522	1	TEACHERS HEALTH T		000014906

AMOUNT OF PAYMENT	\$
-------------------	----

DATE OF SERVICE	DESCRIPTION OF HOSPITAL SERVICES	SERVICE CODE	TOTAL CHARGES	EST. COVERAGE INS. CO. NO. 1	EST. COVERAGE INS. CO. NO. 2	EST. COVERAGE INS. CO. NO. 3	EST. COVERAGE INS. CO. NO. 4	PATIENT AMOUNT
	DIAGNOSIS:	607.3 607.3						
AMOUNTS DUE HEREUNDER HAVE BEEN ASSIGNED TO UHS RECEIVABLES CORP. & US BANK, N.A. AS TRUSTEE								
T O T A L S			2336.00	2486.00				150.00-

PATIENT NUMBER	PLEASE REFER TO PATIENT NUMBER ON ALL INQUIRIES AND CORRESPONDENCE.	ADDITIONAL PATIENT BILLING MAY BE NECESSARY FOR ANY CHARGES NOT POSTED WHEN THIS STATEMENT WAS PREPARED. OR IF INSURANCE CARRIERS DO NOT PAY ANY PART OF THE AMOUNTS SHOWN UNDER ESTIMATED INSURANCE COVERAGE.
8003448506		

CENTENNIAL HILLS HOSPITAL MED CTR
LAS VEGAS, NV

KI

02/12/2014

PROMISED: 03:00p
RdyFillElig 02-12-2014
Scripts: 01

#2929 Ph: 702.645-4382

CUSTOMER RECEIPT

7190 W. CRAIG RD.
LAS VEGAS, NV
89129**KILGORE, NICHOLAS**
10151 DORELL LANE, LAS VEGAS, NV 89166
Ph: 702.325-1835 DOB: 06-00
INTUNIV ER 3 MG TABLET
SHIRE US INC.
TAKE 1 TABLET BY MOUTH DAILY

27 0705131 001 000 00 0001500

Date: 02/12/2014 DAW: 0
Rx: 0705131 01NDC: 54092-0517-02 Days Supply: 30 Refills: 5 Qty: 30 EA
Prschr: SONYA LENAY AIKELS
TP: 2619 GR: RX1122
AUTH#: 1404350551021099 CAREMARK BIN 004336
TP: 22395 SR: EC31095031
AUTH#: U1304391102302 THERAPY FIRST

PAY: \$15.00

Caps: Y

KI

02/12/2014

PROMISED: 02:00p
02-12-2014
Scripts: 01

#2929 Ph: 702.645-4382

CUSTOMER RECEIPT

7190 W. CRAIG RD.
LAS VEGAS, NV
89129**KILGORE, NICHOLAS**
10151 DORELL LANE, LAS VEGAS, NV 89166
Ph: 702.325-1835 DOB: 06-00
METHYLPHENIDATE ER 36 MG TAB
KREMER US INC.
TAKE 1 TABLET BY MOUTH EVERY MORNING

27 0712125 000 000 00 0002000

Date: 02/12/2014 DAW: 0
Rx: N 0712125 00NDC: 62175-0312-37 Days Supply: 30 Refills: 0 Qty: 30 EA
Prschr: SONYA LENAY AIKELS
TP: 2619 GR: RX1122
AUTH#: 140435105551021099 CAREMARK BIN 004336

PAY: \$20.00

Caps: Y

002384

**Your CVS Pharmacist can
answer questions about
your medications**

- Knowledgeable
- Caring
- Committed
- Confidential

CVS/pharmacy

002384

**Your CVS Pharmacist can
answer questions about
your medications**

- Knowledgeable
- Caring
- Committed
- Confidential

CVS/pharmacy

Exhibit 3

Exhibit 3

see 11p B6

RECEIPT		DATE <u>7/25/13</u>
RECEIVED FROM <u>Kilgore, Richard</u>		\$ <u>160.00</u>
<u>Contms</u>		<u>4/29/00</u> DOLLARS
<input type="radio"/> FOR RENT <input type="radio"/> FOR		
ACCOUNT	<u>160.00</u>	<input type="radio"/> CASH
PAYMENT	<u>160.00</u>	<input checked="" type="radio"/> CHECK
BAL. DUE	<u>0</u>	<input type="radio"/> MONEY ORDER
		<input type="radio"/> CREDIT CARD
FROM		TO
BY <u>Wm J. Kilgore</u>		<u>Rich Kilgore</u>
		<u>PAID</u>

RICHIE
FOOTBALL

RECEIPT		DATE <u>8/19</u>	No. <u>29504</u>
RECEIVED FROM <u>Nick Kilgorn</u>		\$ <u>40.00</u>	
		DOLLARS	
FOR RENT <u>2 PE Uniforms</u>			
FOR			
ACCOUNT		<input type="radio"/> CASH	
PAYMENT		<input type="radio"/> CHECK	FROM _____ TO _____
BAL. DUE		<input type="radio"/> MONEY ORDER	BY <u>Larry Nelson</u>
		<input type="radio"/> CREDIT CARD	

Exhibit 4

Exhibit 4

**Richard Kilgore
IRS Bill**

Of the IRS Debt Paid 2012 :

Richard Kilgore Paid:

\$200.00, April 15, 2012
\$200.00, May 15, 2012
\$100.00 June 15, 2012
\$100.00 July 15, 2012
\$200.00 Aug 15, 2012
\$200.00 Sept 15, 2012
\$200.00 Oct 15, 2012
\$200.00 Nov 15, 2012
\$200.00 Dec 15, 2012

\$1,600.00 total Paid 2012

Eleni Kilgore Paid

\$0 April 15, 2012
\$0 Mar 15, 2012
\$100.00 Jun 15, 2012
\$100.00 Jul 15, 2012
\$0 Aug 15, 2012
\$0 Sept 15, 2012
\$0 Oct 15, 2012
\$0 Nov 15, 2012
\$0 Dec 15, 2012

\$200.00 Total Paid 2012

IRS Debt Paid 2013

<\$146.93> **Penalty for non Payment**

January Payment was given to Eleni

Atty in open court in January

\$0 Jan 15, 2013

\$3,629.00 Jan 30, 2013(Tax Return)

\$ 200.00 Feb 15, 2013

\$0 Jan 15, 2013

\$0 Feb 15, 2013

\$200.00

Total: \$5,429.00

Remaining IRS Debt \$4,647.32

Medical Paid by Richard Kilgore:

\$84.00 Dr Malinger Alexandra
\$20.00 Co Pay Kid Fixer Richie
\$20.00 Co pay Kid Fixer Richie
\$20.00 Co Pay Kid Fixer Nicholas
\$60.00 Prescriptions Wal-Greens Richie/
Nicholas
\$60.00 Prescriptions Wal- Greens Richie
/ Nicholas
\$60.00 Prescriptions CVS Nicholas
\$90.43 Prescriptions CVS Nicholas
\$295.00 Traffic Ticket Alexandra

MEDICAL
2012
\$474.35

Total \$709.43



Department of the Treasury
Internal Revenue Service
Fresno, CA 93888-0025

106050.291954.47931.4563 1 AV 0.381 469



Notice	CP49
Tax Year	2013
Notice date	May 12, 2014
Social Security number	530-64-5808
To contact us	1-800-829-0922
Your Caller ID	402620
Page 1 of 2	89H

RICHARD S KILGORE
6509 COLUMBIA FALLS CT
LAS VEGAS NV 89149-4522

Your 2013 Form 1040 overpayment was applied to tax you owe

Refund due: \$4,788.20

We applied \$2,091.80 of your 2013 (Form 1040) overpayment to the amount you owe for 2011.

As a result, you are due a refund of \$4,788.20.

Summary

Overpayment for 2013	-\$6,880.00
Amount applied to tax owed for 2011	2,091.80
Refund due	\$4,788.20

Continued on back...



RICHARD S KILGORE
6509 COLUMBIA FALLS CT
LAS VEGAS NV 89149-4522

Notice	CP49
Notice date	May 12, 2014
Social Security number	530-64-5808



Contact information

If your address has changed, please call 1-800-829-0922 or visit www.irs.gov.

☐ Please check here if you've included any correspondence. Write your Social Security number (530-64-5808), the tax year (2011), and the form number (1040) on any correspondence.

Primary phone	Best time to call	Secondary phone	Best time to call
	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.		<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.

INTERNAL REVENUE SERVICE
FRESNO, CA 93888-0025



530645808 WU KILG 30 0 201112

DEPARTMENT OF THE TREASURY
FINANCIAL MANAGEMENT SERVICE
P. O. BOX 1686
BIRMINGHAM, AL 35201-1686



THIS IS NOT A BILL
PLEASE RETAIN FOR YOUR RECORDS

04/30/14



KILGORE, RICHARD S
6509 COLUMBIA FALLS CT
LAS VEGAS, NV 89149-4522

As authorized by Federal law, we applied all or part of your Federal payment to a debt you owe. The government agency (or agencies) collecting your debt is listed below.

CLARK COUNTY DISTRICT ATTORNEY
FAMILY SUPPORT DIVISION
1900 E FLAMINGO RD
SUITE #100
LAS VEGAS, NV 89119
(702) 671-9200
PURPOSE: Child Support

TIN Num: 530-64-5808
TOP Trace Num: 105337183
Acct Num: 530645808
Amount This Creditor: \$2771.00
Creditor: 02 Site: NV

Department of Veterans Affairs
P.O. Box 360001
North Las Vegas NV 89036-8108

TIN Num: 530-64-5808
TOP Trace Num: 105337184
Acct Num: 59300000000060851
Amount This Creditor: \$448.02
Creditor: 04 Site: V4

866-582-6140 866 582-6140
PURPOSE: Non-Tax Federal Debt

The Agency has previously sent notice to you at the last address known to the Agency. That notice explained the amount and type of debt you owe, the rights available to you, and that the Agency intended to collect the debt by intercepting any Federal payments made to you, including tax refunds. If you believe your payment was reduced in error or if you have questions about this debt, you must contact the Agency at the address and telephone number shown above. The U. S. Department of the Treasury's Financial Management Service cannot resolve issues regarding debts with other agencies.

We will forward the money taken from your Federal payment to the Agency to be applied to your debt balance; however, the Agency may not receive the funds for several weeks after the payment date. If you intend to contact the Agency, please have this notice available.

U. S. Department of the Treasury
Financial Management Service
(800) 304-3107
TELECOMMUNICATIONS DEVICE FOR THE DEAF (TDD) (866) 297-0517

PAYMENT SUMMARY

PAYEE NAME: KILGORE, RICHARD S
PAYMENT BEFORE REDUCTION: \$4788.20
TOTAL AMOUNT OF THIS REDUCTION: \$3219.02
PAYING FEDERAL AGENCY: Internal Revenue Service
(See Insert on Tax Refund Offsets for Additional Information)

PAYMENT DATE: 04/30/14
PAYMENT TYPE: EFT
SPLIT REFUND CODE:

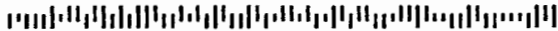
FOR OFFICIAL USE ONLY: 0000088637 10533718346035808502344355277ALTR-P02KILG078686
RL0709





Department of the Treasury
Internal Revenue Service
Fresno, CA 93888-0010

057256.275790.55333.3113 1 AV 0.381 634



RICHARD S & ELENI KILGORE
6509 COLUMBIA FALLS CT
LAS VEGAS NV 89149-4522

057256

Notice	CP39
Tax Year	2011
Notice date	March 24, 2014
Social Security number	530-64-5808
To contact us	1-800-829-0922
Your Caller ID	402620
Page 1 of 2	89H

We applied a 2013 overpayment to tax you owe for 2011

Amount due: \$2,080.54

We applied the \$3,624.00 overpayment from your 2013 tax return to the amount owed on the tax return you filed in 2011. As a result, the amount you owe for 2011 is \$2,080.54.

Billing Summary

Amount owed on 2011 tax return	\$5,704.54
Overpayment applied from 2013	-\$3,624.00
Amount due by April 3, 2014	\$2,080.54

What you need to do immediately

Pay immediately

- Pay the amount due of \$2,080.54 by April 3, 2014, to avoid additional penalty and interest charges.

If you made a payment that's not reflected in the amount above

If you already paid the full amount due in the past four weeks, you don't need to do anything.

Continued on back...



RICHARD S & ELENI KILGORE
6509 COLUMBIA FALLS CT
LAS VEGAS NV 89149-4522

Notice	CP39
Notice date	March 24, 2014
Social Security number	530-64-5808



Payment

- Make your check or money order payable to the United States Treasury.
- Write your Social Security number (530-64-5808), the tax year (2011), and the form number (1040) on your payment and any correspondence.

Amount due by April 3, 2014

\$2,080.54

INTERNAL REVENUE SERVICE
FRESNO, CA 93888-0010



530645808 WU KILG 30 0 201112 670 00000208054

Notice	CP39
Tax Year	2011
Notice date	March 24, 2014
Social Security number	530-64-5808
Page 2 of 2	89H

What you need to do immediately — **continued**

- If it's been more than four weeks since you mailed your payment, please send us the proof of payment, such as a copy of the money order, or cashier's receipt, or check (front and back). Mail us the copy with the Contact information section of this notice.
- In addition, if your previous payment was for an amount less than \$2,080.54, please include a check for the remaining balance.

Additional information

- Visit www.irs.gov/cp39
- For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).
- Keep this notice for your records.

If you need assistance, please don't hesitate to contact us.



RICHARD S & ELENI KILGORE
6509 COLUMBIA FALLS CT
LAS VEGAS NV 89149-4522

Notice	CP39
Notice date	March 24, 2014
Social Security number	530-64-5808

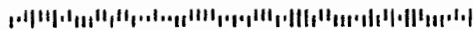


Contact information

If your address has changed, please call 1-800-829-0922 or visit www.irs.gov.
☐ Please check here if you've included any correspondence. Write your Social Security number (530-64-5808), the tax year (2011), and the form number (1040) on any correspondence.

Primary phone	Best time to call	Secondary phone	Best time to call
	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.		<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.

INTERNAL REVENUE SERVICE
FRESNO, CA 93888-0010

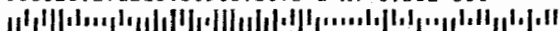


530645808 WU KILG 30 0 201112



Department of the Treasury
Internal Revenue Service
Fresno, CA 93888-0010

068828.271215.36968.2673 1 AV 0.381 864



Notice	CP21A
Tax Year	2011
Notice date	March 10, 2014
Social Security number	530-64-5808
To contact us	1-800-829-0922
Your Caller ID	402620
Page 1 of 5	89H

RICHARD S KILGORE
6509 COLUMBIA FALLS CT
LAS VEGAS NV 89149-4522

068828

Changes to your 2011 Form 1040

Amount due: \$5,678.89

The income or deductions reported on your 2011 Form 1040 do not match what was reported to us by your payer or trustees. We've contacted you about this issue, but have no record you've responded as required. So, we've changed your tax return to match our records and correct your:

- pensions and annuities
- Form 5329, Additional Tax on Early Distributions or Certain Distributions from Education Accounts
- interest and/or dividend income

We changed the civil penalty amount that we previously charged.

As a result, you owe \$5,678.89.

Billing Summary

Account balance before this change	\$ 2,636.07
Increase in tax	1,922.00
Increase in accuracy-related penalty on underpayments penalty	384.00
Increase in failure-to-pay penalty	317.93
Increase in interest	418.89
Amount due by March 31, 2014	\$5,678.89

Continued on back...



RICHARD S KILGORE
6509 COLUMBIA FALLS CT
LAS VEGAS NV 89149-4522

Notice	CP21A
Notice date	March 10, 2014
Social Security number	530-64-5808



Payment

- Make your check or money order payable to the United States Treasury.
- Write your Social Security number (530-64-5808), the tax year (2011), and the form number (1040) on your payment and any correspondence.

Amount due by March 31, 2014

\$5,678.89

INTERNAL REVENUE SERVICE
FRESNO, CA 93888-0010



530645808 WU KILG 30 0 201112 670 00000567889

What you need to do immediately

If you agree with the changes we made

- Pay the amount due of \$5,678.89 by March 31, 2014 to avoid additional penalty and interest charges.
- If you can't pay the amount due, pay as much as you can now and make payment arrangements that allow you to pay off the rest over time. Visit www.irs.gov/Payments for more information about:
 - Installment and payment agreements—download required forms or save time and money by applying online if you qualify
 - Automatic payment deductions from your bank account
 - Payroll deductions
 - Credit card payments

Or, call us at 1-800-829-0922 to discuss your options.

What you need to do immediately — continued

If you don't agree with the changes

- Call 1-800-829-0922 to review your account. You can also contact us by mail. Fill out the Contact information section, detach, and send it to us with any correspondence or documentation.
- If we don't hear from you, we'll assume you agree with the information in this notice.

If you've already paid your balance in full within the past 14 days or made payment arrangements, please disregard this notice.

If we don't hear from you

- If you don't pay \$5,678.89 by March 31, 2014, interest will increase, and additional penalties may apply.



RICHARD S. KILGORE
6509 COLUMBIA FALLS CT
LAS VEGAS NV 89149-4522

Notice	CP21A
Notice date	March 10, 2014
Social Security number	530-64-5808



Contact information

If your address has changed, please call 1-800-829-0922 or visit www.irs.gov.

- ☐ Please check here if you've included any correspondence. Write your Social Security number (530-64-5808), the tax year (2011), and the form number (1040) on any correspondence.

☐ a.m.
☐ p.m.

☐ a.m.
☐ p.m.

Primary phone

Best time to call

Secondary phone

Best time to call

INTERNAL REVENUE SERVICE
FRESNO, CA 93888-0010

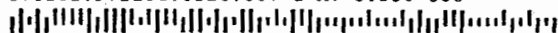


530645808 WU KILG 30 0 201112



Department of the Treasury
Internal Revenue Service
Fresno, CA 93888-0010

076562.972204.0324.007 1 AV 0.350 806



RICHARD S & ELENIL KILGORE
6509 COLUMBIA FALLS CT
LAS VEGAS NV 89149-4522

Notice CP14
Tax Year 2011
Notice date May 28, 2012
Social Security number 530-64-5808
To contact us Phone 1-800-829-0922
Your Caller ID 598520
Page 1 of 3



076562

You have unpaid taxes for 2011

Amount due: \$9,404.58

Our records show you have unpaid taxes for the
tax year ending on December 31, 2011 (Form
1040).

Billing Summary

Tax you owed	\$26,163.00
Payments and credits	-17,030.00
Failure to pay proper estimated tax penalty	148.00
Failure-to-pay penalty	91.33
Interest charges	32.25
Amount due by June 18, 2012	\$9,404.58

What you need to do immediately

Pay immediately

Send us the amount due of \$9,404.58 by June 18, 2012, to avoid additional penalty
and interest charges.

Continued on back ...



RICHARD S & ELENIL KILGORE
6509 COLUMBIA FALLS CT
LAS VEGAS NV 89149-4522

Notice CP14
Notice date May 28, 2012
Social Security number 530-64-5808



Payment

INTERNAL REVENUE SERVICE
FRESNO, CA 93888-0010

Amount Due By June 18, 2012

\$9,404.58



530645808 WU KILG 30 0 201112 670 00000940458

What you need to do immediately - **continued**

Pay immediately - **continued**

- If you can't pay the amount due, pay as much as you can now and make payment arrangements that allow you to pay off the rest over time. Visit www.irs.gov and search for keyword "tax payment options" for more information about:
 - Installment and payment agreements—download required forms or save time and money by applying online if you qualify
 - Automatic deductions from your bank account
 - Payroll deductions
 - Credit card payments
- Or, call us at 1-800-829-0922 to discuss your options.

If you think there's been a mistake

Call 1-800-829-0922 to review your account. You can also contact us by mail. Fill out the Contact Information section, detach, and send it to us with any correspondence or documentation.

If you've already paid your balance in full within the past 14 days or made payment arrangements, please disregard this notice.

If we don't hear from you

If you don't pay \$9,404.58 by June 18, 2012, interest will increase and additional penalties may apply.



Contact information

INTERNAL REVENUE SERVICE
FRESNO, CA 93888-0010



530645808 WU KILG 30 0 201112

RICHARD S & ELENI KILGORE
6509 COLUMBIA FALLS CT
LAS VEGAS NV 89149-4522

Notice	CP14
Notice date	May 28, 2012
Social Security number	530-64-5808

If your address has changed, please call 1-800-829-0922 or visit www.irs.gov.

- ☐ Please check here if you've included any correspondence. Write your Social Security number (530-64-5808), the tax year (2011), and the form number (1040) on any correspondence.

<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.
Primary phone	Best time to call
Secondary phone	Best time to call

Penalties

We are required by law to charge any applicable penalties.

Failure-to-pay

Description	Amount
Total failure-to-pay	\$317.93

When you pay your taxes after the due date, we charge a penalty of 0.5% of the unpaid amount due per month, up to 25% of the amount due. We count part of a month as a full month. It may include amounts charged before the adjustment.
(Internal Revenue Code section 6651)

Overstatement, understatement, or accuracy-related

Description	Amount
Total overstatement, understatement, or accuracy-related	\$384.00

For returns due before January 1, 1990, this penalty is one or more of the following: Valuation Overstatement, Valuation Understatement, or Substantial Understatement. For returns due after December 31, 1989, the accuracy-related penalty has been added. Refer to our Examining Officer's report for an explanation of the penalty.
(Internal Revenue Code section 6662)

Removal or reduction of penalties

We understand that circumstances - such as economic hardship, a family member's death, or loss of financial records due to natural disaster - may make it difficult for you to meet your taxpayer responsibility in a timely manner.

If you would like us to consider removing or reducing any of your penalty charges, please do the following:

- Identify which penalty charges you would like us to reconsider (e.g., 2005 late filing penalty).
- For each penalty charge, explain why you believe it should be reconsidered.
- Sign your statement, and mail it to us.

We will review your statement and let you know whether we accept your explanation as reasonable cause to reduce or remove the penalty charge(s).

Removal of penalties due to erroneous written advice from the IRS

If you were penalized based on written advice from the IRS, we will remove the penalty if you meet the following criteria:

- If you asked the IRS for written advice on a specific issue.
- You gave us complete and accurate information.
- You received written advice from us.
- You relied on our written advice and were penalized based on that advice.

To request removal of penalties based on erroneous written advice from us, submit a completed Claim for Refund and Request for Abatement (Form 843) to the IRS service center where you filed your tax return. For a copy of the form or to find your IRS service center, go to www.irs.gov or call 1-800-829-0922.

Continued on back...

Interest charges

We are required by law to charge interest on unpaid tax from the date the tax return was due to the date the tax is paid in full. The interest is charged as long as there is an unpaid amount due, including penalties, if applicable. It may include amounts charged before the adjustment. (Internal Revenue Code section 6601)

Period	Days	Interest rate	Interest factor	Amount due	Interest charge
04/15/2012 – 05/28/2012	43	3.0%	0.003530664	\$11,055.00	\$39.03
05/28/2012 – 06/15/2012	18	3.0%	0.001476438	11,237.85	16.59
06/15/2012 – 06/30/2012	15	3.0%	0.001230214	11,254.44	13.85
06/30/2012 – 07/16/2012	16	3.0%	0.001312282	11,268.29	14.79
07/16/2012 – 08/20/2012	35	3.0%	0.002872854	11,083.08	31.84
08/20/2012 – 09/18/2012	29	3.0%	0.002379779	10,914.92	25.98
09/18/2012 – 10/15/2012	27	3.0%	0.002215475	10,740.90	23.80
10/15/2012 – 10/19/2012	4	3.0%	0.000327909	11,148.70	3.66
10/19/2012 – 11/13/2012	25	3.0%	0.002051197	10,952.36	22.47
11/13/2012 – 12/17/2012	34	3.0%	0.002790658	10,774.83	30.07
12/17/2012 – 12/31/2012	14	3.0%	0.001148153	10,604.90	12.18
12/31/2012 – 02/18/2013	49	3.0%	0.004035352	10,617.08	42.84
02/18/2013 – 02/19/2013	1	3.0%	0.000082192	7,030.92	0.58
02/19/2013 – 03/15/2013	24	3.0%	0.001974468	6,831.50	13.49
03/15/2013 – 04/15/2013	31	3.0%	0.002551089	6,644.99	16.95
04/15/2013 – 06/30/2013	76	3.0%	0.006265868	5,217.94	32.69
06/30/2013 – 12/31/2013	184	3.0%	0.015237592	5,250.63	80.01
12/31/2013 – 03/10/2014	69	3.0%	0.005687110	5,330.64	30.32
Total interest					\$451.14

We multiply your unpaid tax, penalties, and interest (the amount due) by the interest rate factor to determine the interest due.

Additional interest charges

If the amount you owe is \$100,000 or more, please make sure that we receive your payment within 10 work days from the date of your notice. If the amount you owe is less than \$100,000, please make sure that we receive your payment within 21 calendar days from the date of your notice. If we don't receive full payment within these time frames, the law requires us to charge interest until you pay the full amount you owe.

Additional information

- Visit www.irs.gov/cp21a
- For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).
- Keep this notice for your records.

We're required to send a copy of this notice to both you and your spouse. Each copy contains the information you are authorized to receive. Please note: Only pay the amount due once.



Notice	CP21A
Tax Year	2011
Notice date	March 10, 2014
Social Security number	530-64-5808
Page 5 of 5	89H

Additional information — **continued**



068828

You may qualify for innocent spouse relief. You can check to see if you qualify by either:

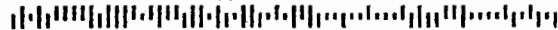
- Answering the interactive questions on our website at www.irs.gov, or
- Reviewing Publication 971, Innocent Spouse Relief. You can get this publication at the IRS website, your local IRS office, or by calling 1-800-TAX-FORM (1-800-829-3676).

If you need assistance, please don't hesitate to contact us.



Department of Treasury
Internal Revenue Service
5045 E BUTLER AVE
FRESNO CA 93888-0021

005297.143918.0032.001 2 AT 0.374 1413



RICHARD S & ELEN KILGORE
6509 COLUMBIA FALLS CT
LAS VEGAS NV 89149-4522

Notice CP2000
Tax Year 2011
Notice date December 31, 2012
Social Security number 530-64-5808
AUR control number 500046451
To contact us Phone 1-800-829-3009
Fax 1-877-477-0962

Page 1 of 8



53064580820111

005297

Proposed changes to your 2011 Form 1040

Amount due: \$2,361

The income and payment information we have on file from sources such as employers or financial institutions doesn't match the information you reported on your tax return. If our information is correct, you will owe \$2,361 (including interest), which you need to pay by January 30, 2013.

Summary of proposed changes

Tax you owe	\$1,922
Payments	\$0
Negligence penalty	\$384
Interest	\$55
Amount due by January 30, 2013	\$2,361

What you need to do immediately

Review this notice, and compare our changes to the information on your 2011 tax return.

If you agree with the changes we made

- Complete, sign and date the Response form on Page 7, and mail it to us along with your payment of \$2,361 so we receive it by January 30, 2013.
- If you can't pay the amount due, pay as much as you can now, and make payment arrangements that allow you to pay off the rest over time. If you want to apply for an installment plan, send in your Response form AND a completed Installment Agreement Request (Form 9465). Download Form 9465 from www.irs.gov, or call 1-800-829-3676 to request a copy. You can also save time and money by applying online if you qualify. Visit www.irs.gov, and search for keyword: "tax payment options" for more information about:
 - Installment and payment agreements
 - Payroll deductions
 - Credit card payments

Or, call us at 1-800-829-3009 to discuss your options.

If you don't agree with the changes

Complete the Response form on Page 7, and send it to us along with a signed statement and any documentation that supports your claim so we receive it by January 30, 2013.

If we don't hear from you

If we don't receive your response by January 30, 2013, we will send you a Statutory Notice of Deficiency followed by a final bill for the proposed amount due. During this time, interest will increase and penalties may apply.

Continued on back...

Changes to your 2011 tax return

Your income and deductions		Shown on return	As corrected by IRS	Difference
Interest		\$0	\$174	\$174
Retirement income taxable		\$0	\$4,780	\$4,780
Income net difference				\$4,954
Change to taxable income				\$4,954
Your tax computations		Shown on return	As corrected by IRS	Difference
Taxable income, line 43		\$136,252	\$141,206	\$4,954
Tax, line 44		\$26,313	\$27,607	\$1,294
Child tax credit, line 51		\$150	\$0	-\$150
Tax on qualified plans, including IRAs, and other tax-favored accounts, line 58		\$0	\$478	\$478
Total tax, line 61		\$26,163	\$28,085	\$1,922
Tax you owe *1				\$1,922

(*1) Decreases to credits result in an increase to tax.

Explanation of changes to your 2011 Form 1040

This section tells you specifically what income information the IRS received about you from others (including your employers, banks, mortgage holders, etc.). This information doesn't match the information you reported on your tax return.

Use the table to compare the data the IRS received from others to the information you reported on your tax return to understand where the difference(s) occurred. To assist you in reviewing your income amounts, the table may include both reported and unreported amounts.

Interest		Address	Account Information	Shown on return	Reported to IRS by others	Difference
Received from						
BANK OF AMERICA N.A.		PO BOX 29961	64532000501009203611	\$0	\$174	\$174
TAX REPORTING AZ1 200 19 06		PHOENIX AZ 850380961	SSN 530-08-6477			
			Form 1099-INT			
Retirement Income Taxable		Address	Account Information	Shown on return	Reported to IRS by others	Difference
Received from						
RELIASTAR LIFE INSURANCE CO.		20 WASHINGTON AVE	90912AP63000273152EF	\$0	\$4,780	\$4,780
		SOUTH	SSN 530-08-6477			
		MINNEAPOLIS MN 55401	Form 1099-R			
			Distrib CD L1			

RESPONSE CONFIRMATION TIMEFRAME

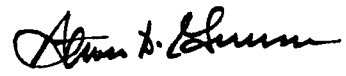
If you submit a Form 1040X, U.S. Amended Individual Income Tax Return, please notate CP2000 or CP2501 at the top of the first page. When mailing your response, please use the envelope provided and also allow 3-4 weeks for confirmation of receipt.

INSTALLMENT AGREEMENT REQUEST - SIGNATURES NEEDED

If you would like to set up an installment agreement you must complete the Form 9465 AND the signature page of the CP2000, Step A, Option 1, Consent to Tax Increase. The Form 9465 is available on line at www.irs.gov or by calling toll-free 1-800-829-3676. For taxpayers who filed a joint return the Form 9465 and the Consent to Tax Increase must contain both signatures to process their request. If the signature(s) is missing from either of these forms, delays may occur.

MISC

Name: Eleni Kilgore
Address: 10151 Derrill Lane
Las Vegas, NV 89146
Phone: (702) 325-1935
Email: kilgoreentertainment
Attorney for _____
Nevada State Bar No. _____


CLERK OF THE COURT

Eighth Judicial District Court
Clark County, Nevada

<u>Richard Kilgore</u> Plaintiff,	Case No. <u>0-12-4591-11-0</u>
vs. <u>Eleni Kilgore</u> Defendant.	Dept. <u>I</u>

GENERAL FINANCIAL DISCLOSURE FORM

A. Personal Information:

1. What is your full name? (first, middle, last) Eleni Kilgore
2. How old are you? 45
3. What is your date of birth? 8-22-1969
4. What is your highest level of education? Master's Degree

B. Employment Information:

1. Are you currently employed/ self-employed? (☒ check one)

☐ No

☒ Yes

If yes, complete the table below. Attached an additional page if needed.

Date of Hire	Employer Name	Job Title	Work Schedule (days)	Work Schedule (shift times)
<u>2-16-1983</u>	<u>CCSD</u>	<u>ECSE Teacher</u>	<u>M-F</u>	<u>8:20-5:30</u>

2. Are you disabled? (☒ check one)

☒ No

☐ Yes

If yes, what is your level of disability? _____

What agency certified you disabled? _____

What is the nature of your disability? _____

C. Prior Employment: If you are unemployed or have been working at your current job for less than 2 years, complete the following information.

Prior Employer: _____ Date of Hire: _____ Date of Termination: _____
Reason for Leaving: _____

Monthly Personal Income Schedule

A. Year-to-date Income.

As of the pay period ending Nov. 2014 my gross year to date pay is 57,854.16

B. Determine your Gross Monthly Income.

Hourly Wage

	×		=		×	52	=		÷	12	=	
Hourly Wage		Number of hours worked per week		Weekly Income		Weeks		Annual Income		Months		Gross Monthly Income

Annual Salary

<u>67,781</u>	÷	12	=	<u>5648</u>
Annual Income		Months		Gross Monthly Income

C. Other Sources of Income.

Source of Income	Frequency	Amount	12 Month Average
Annuity or Trust Income			
Bonuses			
Car, Housing, or Other allowance:			
Commissions or Tips:			
Net Rental Income:			
Overtime Pay			
Pension/Retirement:			
Social Security Income (SSI):			
Social Security Disability (SSD):			
Spousal Support			
Child Support	<u>Monthly</u>	<u>686-</u>	<u>NO - NOV 108100 OR DEC</u>
Workman's Compensation			
Other:			
Total Average Other Income Received			<u>\$ 1086</u>

Total Average Gross Monthly Income (add totals from B and C above)	<u>\$ 6334</u>
--	----------------

D. Monthly Deductions

	Type of Deduction	Amount
1.	Court Ordered Child Support (automatically deducted from paycheck)	
2.	Federal Health Savings Plan	
3.	Federal Income Tax	494.48
4.	Health Insurance Amount for you: 0 For Opposing Party: 0 For your Child(ren): ✓	420-
5.	Life, Disability, or Other Insurance Premiums	329.70
6.	Medicare	73.12
7.	Retirement, Pension, IRA, or 401(k)	-
8.	Savings	0
9.	Social Security	-
10.	Union Dues	104.94
11.	Other: (Type of Deduction)	
Total Monthly Deductions (Lines 1-11)		1,388.24

Business/Self-Employment Income & Expense Schedule

A. Business Income: N/A

What is your average gross (pre-tax) monthly income/revenue from self-employment or businesses?
\$ _____

B. Business Expenses: Attach an additional page if needed.

Type of Business Expense	Frequency	Amount	12 Month Average
Advertising			
Car and truck used for business			
Commissions, wages or fees			
Business Entertainment/Travel			
Insurance			
Legal and professional			
Mortgage or Rent			
Pension and profit-sharing plans			
Repairs and maintenance			
Supplies			
Taxes and licenses (include est. tax payments)			
Utilities			
Other:			
Total Average Business Expenses			-

Personal Expense Schedule (Monthly)

A. Fill in the table with the amount of money you spend each month on the following expenses and check whether you pay the expense for you, for the other party, or for both of you.

Expense	Monthly Amount I Pay	For Me <input checked="" type="checkbox"/>	Other Party <input type="checkbox"/>	For Both <input type="checkbox"/>
Alimony/Spousal Support	—			
Auto Insurance	577 -			
Car Loan/Lease Payment	650 -			
Cell Phone	220 -			
Child Support (not deducted from pay)	—			
Clothing, Shoes, Etc...	100 -			
Credit Card Payments (minimum due)	195 -			
Dry Cleaning	50 -			
Electric	300 -			
Food (groceries & restaurants)	1500 -			
Fuel	200 -			
Gas (for home)	50 -			
Health Insurance (not deducted from pay)	—			
HOA	—			
Home Insurance (if not included in mortgage)	31 -			
Home Phone	—			
Internet/Cable	257 -			
Lawn Care	30 -			
Membership Fees	—			
Mortgage/Rent/Lease	1410			
Pest Control	—			
Pets	600 -			
Pool Service	—			
Property Taxes (if not included in mortgage)	—			
Security	40 -			
Sewer	40 -			
Student Loans	—			
Unreimbursed Medical Expense	200 -			
Water	32 -			
Other: <u>Alexandra's College</u>	254 -			
Total Monthly Expenses	16196 -			

Household Information

- A. Fill in the table below with the name and date of birth of each child, the person the child is living with, and whether the child is from this relationship. Attached a separate sheet if needed.

	Child's Name	Child's DOB	Whom is this child living with?	Is this child from this relationship?	Has this child been certified as special needs/disabled?
1 st	Richard Kilgore	6-29-2000	Mom/Dad	Yes	No
2 nd	Nicholas Kilgore	"	Mom	Yes	No
3 rd					
4 th					

- B. Fill in the table below with the amount of money you spend each month on the following expenses for each child.

Type of Expense	1 st Child	2 nd Child	3 rd Child	4 th Child
Cellular Phone				
Child Care				
Clothing	100	100		
Education				
Entertainment	125	125		
Extracurricular & Sports	100	100		
Health Insurance (if not deducted from pay)				
Summer Camp/Programs				
Transportation Costs for Visitation	25	25		
Unreimbursed Medical Expenses	50	250		
Vehicle				
Other:				
Total Monthly Expenses	400	600		

- C. Fill in the table below with the names, ages, and the amount of money contributed by all persons living in the home over the age of eighteen. If more than 4 adult household members attached a separate sheet.

Name	Age	Person's Relationship to You (i.e. sister, friend, cousin, etc...)	Monthly Contribution
Alexandra Kilgore	19	Daughter	0-
Timothy Rowe	42	Boyfriend	2000-

Personal Asset and Debt Chart

A. Complete this chart by listing all of your assets, the value of each, the amount owed on each, and whose name the asset or debt is under. If more than 15 assets, attach a separate sheet.

Line	Description of Asset and Debt Thereon	Gross Value	Total Amount Owed	Net Value	Whose Name is on the Account? You, Your Spouse/Domestic Partner or Both
1.	2011 Chevy Equinox	\$ 15,000	- \$ 19,000	= \$ -4000	Mine
2.	2011 Ford Focus	\$ 8100	- \$ 9500	= \$ -1400	Mine
3.		\$	- \$	= \$	
4.		\$	- \$	= \$	
5.		\$	- \$	= \$	
6.		\$	- \$	= \$	
7.		\$	- \$	= \$	
8.		\$	- \$	= \$	
9.		\$	- \$	= \$	
10.		\$	- \$	= \$	
11.		\$	- \$	= \$	
12.		\$	- \$	= \$	
13.		\$	- \$	= \$	
14.		\$	- \$	= \$	
15.		\$	- \$	= \$	
Total Value of Assets (add lines 1-15)		\$	- \$	= \$ -5400	

B. Complete this chart by listing all of your unsecured debt, the amount owed on each account, and whose name the debt is under. If more than 5 unsecured debts, attach a separate sheet.

Line #	Description of Credit Card or Other Unsecured Debt	Total Amount owed	Whose Name is on the Account? You, Your Spouse/Domestic Partner or Both
1.	Barclay Visa	\$ 1000 -	Mine
2.	Credit One Visa	\$ 500 -	Mine
3.	Kohl's	\$ 600 -	Mine
4.		\$	
5.		\$	
6.		\$	
Total Unsecured Debt (add lines 1-6)		\$ 2100	

CERTIFICATION

Attorney Information: Complete the following sentences:

1. I (have/have not) have retained an attorney for this case.
2. As of the date of today, the attorney has been paid a total of \$ 1000 on my behalf.
3. I have a credit with my attorney in the amount of \$ _____.
4. I currently owe my attorney a total of \$ TBD.
5. I owe my prior attorney a total of \$ _____.

IMPORTANT: Read the following paragraphs carefully and initial each one.

☒ I swear or affirm under penalty of perjury that I have read and followed all instructions in completing this Financial Disclosure Form. I understand that, by my signature, I guarantee the truthfulness of the information on this Form. I also understand that if I knowingly make false statements I may be subject to punishment, including contempt of court.

☒ I have attached a copy of my 3 most recent pay stubs to this form.

☐ I have attached a copy of my most recent YTD income statement/P&L statement to this form, if self-employed.

☐ I have not attached a copy of my pay stubs to this form because I am currently unemployed.

Eloni Kilgore
Signature

12-5-14
Date

CERTIFICATE OF SERVICE

I hereby declare under the penalty of perjury of the State of Nevada that the following is true and correct:

That on (date) December 8, 2014, service of the General Financial Disclosure Form was made to the following interested parties in the following manner:

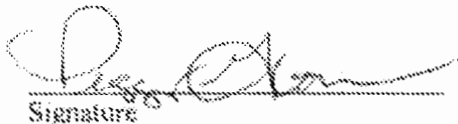
☒ Via 1st Class U.S. Mail, postage fully prepaid addressed as follows:

7465 W. Lakeview Blvd. Suite 100, WNV 89128

☐ Via Electronic Service, in accordance with the Master Service List, pursuant to NEPCR 9, to:

☐ Via Facsimile and/or Email Pursuant to the Consent of Service by Electronic Means on file herein to: _____

Executed on the 8th day of December, 2014.


Signature

Employee Self Service

Dashboard Help

You are logged in as: **kilgoe** | Logout

PROFILE PAYROLL

Export to a PDF

Paycheck/Direct Deposit Slip

ELENI KILGORE
10151 DORRELL LN 1152
LAS VEGAS NV 89166

Pay Date: 11-10-2014
\$2,069.84
DEPOSITED ON NOV 10, 2014
TO: CHASE (C)

OVERVIEW

Description	Current	Year to Date Amount
GROSS EARNINGS	2,754.96	59,474.16
TOTAL DEDUCTIONS	-685.12	-13,780.67
NET PAY	2,069.84	45,693.49

EARNINGS

Location	Earning Description	Hours/Days	Pay Rate	Current	Year to Date Amount
204	SALARIED/DAILY	1.00	2,754.96	2,754.96	57,854.16
	OTHER EARNINGS				1,620.00
	GROSS EARNINGS			2,754.96	59,474.16

DEDUCTIONS

Tax or Deduction Description	Current Amount	Year to Date Amount
FED TAX M02	238.24	5,374.70
MEDICARE TAX	36.56	800.53
AM FID ACC	20.50	430.50
SEC 125 PPO	213.00	3,833.00
DISAB AM FID	66.60	1,398.60
LIF INS AM FID	77.75	854.25
DUES-CCEA	32.47	684.59
OTHER DEDUCTION	0.00	404.50
TOTAL DEDUCTION	685.12	13,780.67

Employee Self Service

Dashboard Help

You are logged in as: **kilgoex** | Logout

PROFILE PAYROLL

Export to a PDF

Paycheck/Direct Deposit Slip

ELENI KILGORE

10151 DORRELL LN 1152

LAS VEGAS NV 89166

Pay Date: 10-10-2014

\$2,069.84

DEPOSITED ON OCT 10, 2014

TO: CHASE (C)

OVERVIEW

Description	Current	Year to Date Amount
GROSS EARNINGS	2,754.96	53,904.24
TOTAL DEDUCTIONS	-685.12	-12,400.56
NET PAY	2,069.84	41,503.68

EARNINGS

Location	Earning Description	Hours/Days	Pay Rate	Current	Year to Date Amount
204	SALARIED/DAILY	1.00	2,754.96	2,754.96	52,344.24
	OTHER EARNINGS				1,560.00
	GROSS EARNINGS			2,754.96	53,904.24

DEDUCTIONS

Tax or Deduction Description	Current Amount	Year to Date Amount
FED TAX M02	238.24	4,889.22
MEDICARE TAX	36.56	726.54
AM FID ACC	20.50	389.50
SEC 125 PPO	213.00	3,407.00
DISAB AM FID	66.60	1,265.40
LIF INS AM FID	77.75	698.75
DUES-CCEA	32.47	619.65
OTHER DEDUCTION	0.00	404.50
TOTAL DEDUCTION	685.12	12,400.56

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TRANS

COPY

FILED
APR - 3 2018
Steph L. Blum
CLERK OF COURT

EIGHTH JUDICIAL DISTRICT COURT
FAMILY DIVISION
CLARK COUNTY, NEVADA

RICHARD SCOTT KILGORE,)
)
Plaintiff,) CASE NO. D-12-459171-D
)
vs.)
)
ELENI KILGORE,)
)
Defendant.)
_____)

BEFORE THE HONORABLE KATHY HARDCASTLE
DISTRICT COURT JUDGE

TRANSCRIPT RE: MOTIONS FOR ORDERS TO MODIFY CHILD CUSTODY

TUESDAY, December 9, 2014

APPEARANCES:

The Plaintiff:	RICHARD KILGORE
For the Plaintiff:	JANICE JACOVINO, ESQ.
	BONNIE LONARDO, ESQ.
	7881 West Charleston Blvd. #160
	Las Vegas, Nevada 89117
The Defendant:	ELENI KILGORE
For the Defendant:	FRED PAGE, ESQ.
	6145 Spring Mountain Road, #201
	Las Vegas, Nevada 89146
	(702) 469-2378

1 LAS VEGAS, NEVADA

TUESDAY, DECEMBER 9, 2014

2 P R O C E E D I N G S

3 (THE PROCEEDINGS BEGAN AT 9:51:04)

4
5 THE COURT: Kilgore, 4591711; state your appearances
6 for the record.

7 MS. JACOVINO: Good morning, Your Honor. Janice
8 Jacovino on behalf of Plaintiff. With me today is Plaintiff,
9 Richard Kilgore, father, and my partner, Bonnie Lonardo.

10 MS. LONARDO: Good morning, Your Honor. Bonnie
11 Lonardo, bar number 8548.

12 MR. PAGE: Good morning, Your Honor. Fred Page, bar
13 number 6080, on behalf of Ms. Kilgore, who is present.

14 THE COURT: Okay. Before we get started on the
15 motion, I have a couple of questions. First of all, in the
16 paperwork that you filed with the Court, you filed copies of
17 your son's medical records. You understand this is public.
18 Anybody can go online and look at these. Do you really want
19 medical records regarding your son's private parts available
20 possibly on the internet?

21 THE DEFENDANT: My attorney advised me to do it, so.

22 THE COURT: Not?

23 MR. PAGE: I was not the --

24 THE DEFENDANT: Not -- not this attorney.

1 THE COURT: Not the medical records.

2 THE DEFENDANT: Okay.

3 THE COURT: You were saying he hadn't reimbursed you
4 for medical cost. I didn't see any medical bills. Don't ever
5 put your son's medical records on a filing in the future.
6 We're going to enter an order to strike those medical records.
7 I think it was exhibit -- I didn't write down the exhibit
8 number. Do you remember what the exhibit number was on your
9 motion?

10 MR. PAGE: Exhibit A.

11 THE COURT: Okay. This would be on Defendant's
12 opposition and counter motion, Exhibit A. That is to be
13 stricken and removed, or sealed, so that the public cannot
14 access those medical records. All right.

15 MS. JACOVINO: Your Honor, this was our motion to
16 modify. We're looking to modify the custody based on
17 termination. As such, he is unable to afford the current
18 child support obligation, and so we're not -- go ahead and sit
19 down. And so we're not starting off without making support
20 payments, we're asking the Court.

21 THE COURT: I don't have any updated financial
22 affidavits in the file, so without that I'm not going to
23 modify any -- any support. I would also ask -- he was
24 terminated from the City. How much does he have in savings?

1 What did he get on his severance package? How much unpaid
2 -- or unused sick leave did he get paid for? That's why I
3 need the affidavits. And I want all that information listed.
4 He may be temporarily unemployed, but he should have gotten a
5 substantial check when he was terminated from his employment
6 that would carry him over, and help him meet his obligations
7 and the child support. I have no updated financial affidavit
8 from you.

9 MR. PAGE: Some -- the prior counsel E-filed
10 hers yesterday. I --

11 THE COURT: I don't have it.

12 MR. PAGE: I -- I have an extra copy if you'd like
13 it, Your Honor.

14 THE COURT: I don't have his, so I'm not going to
15 modify any custody. I didn't see anything in here that
16 indicated the parties had a meet and confer regarding the
17 medical bills, or that either party had served, or provided
18 the medical bills to the other side. Normally, when you want
19 to get reimbursed for medical bills you present the bills to
20 the other side. They have a right to look at it, see if
21 there's a problem with any of them. And then they are given
22 time to pay it. I didn't see anything in either of the
23 motions or counter motions that they did any of this. That
24 the other side -- there's nothing in there that indicates that

1 they actually know what the other side is claiming is owed.

2 MS. JACOVINO: Have you been retained for a hearing
3 or as counsel?

4 MR. PAGE: I was just contacted yesterday to do
5 -- fill an appearance is what it amounts to. I've -- I've
6 read the pleadings and that's kind of my extent of my
7 involvement thus far.

8 THE COURT: Okay.

9 MS. JACOVINO: Because at this point, Your Honor,
10 it's -- it would be much easier to get together and do a meet
11 and confer if we had all counsels present.

12 MR. PAGE: Quite frankly, this case was originally
13 with Mr. Flangas's office. I was contacted yesterday to fill
14 in, so I did.

15 THE COURT: All right.

16 MR. PAGE: And if they want to contact Mr. Flangas's
17 office they can, but I'm just here to help out.

18 THE COURT: And there were complaints that the QDROS
19 haven't been prepared, but there was no indication in --
20 other than one has been prepared, presented to the other side,
21 but there's no indication what's been done on the others. And
22 then you come into court and expect that we're just going to
23 sit here and mishmash through this? Wait a minute. So, since
24 there's no affidavit of financial circumstances filed, I'm

1 going to deny the motion right now to modify the child
2 support. I need a meet and confer, and you can appear with
3 counsel or not, but you need to talk to counsel of record for
4 the other side now regarding the QDROS and the other matters
5 post decree.

6 MR. PAGE: We do have the qualified domestic
7 relations of the parent, if she's willing to sign it, we have
8 it ready.

9 MS. JACOVINO: We're not --

10 MR. PAGE: She can have some time review if she
11 wants.

12 THE COURT: Yeah, she'll need time to review it, I'm
13 sure.

14 MS. JACOVINO: Yes. This was the first time that
15 we've seen it, was when it was filed with her order. We'd
16 need to not only review it, but also it's been done by Mom
17 only, and so Dad would like his input on this. And
18 additionally, Dad's not willing or ready to sign yet when Mom
19 hasn't had hers prepared. So, this would be giving her
20 portion of Dad's QDRO.

21 THE COURT: We don't get to do -- go back and forth
22 on that, okay?

23 MS. JACOVINO: So, we -- we won't be doing this in
24 court today.

1 THE COURT: It's not that, I won't sign it until you
2 get me the other one. Sign what is presented to you, as long
3 as it's in proper fashion. If it's not in proper fashion then
4 you need to let them know what the deficiencies are. We're
5 not going to sit here and play this game, because it's been a
6 while --

7 MS. JACOVINO: It has.

8 THE COURT: -- since the decree was entered. This
9 needs to get done. You guys need to quit playing games with
10 each other, and get serious about what's good for your kids.

11 MS. JACOVINO: There's a couple of things that have
12 happened in the meantime, putting aside the things from the
13 decree that didn't -- that did not occur, and the deficiencies
14 on both sides in regards to those. We've had a bunch of
15 different altercations at school events, at school functions,
16 and at sporting events. And we believe it's in the best
17 interest that Mom's boyfriend not be allowed to attend these
18 events.

19 THE COURT: I don't -- do that.

20 MR. PAGE: It's not part -- it's not part of the
21 plea.

22 THE COURT: He can attend the events. What I can do
23 is I can say you get to attend one event, but not the next
24 event. Same with you, do you want to do that?

1 THE DEFENDANT: No, Your Honor.

2 THE COURT: Can you not be adult enough with each
3 other to be able to attend your kids' school events without
4 getting into altercations with each other?

5 MS. JACOVINO: Your Honor --

6 THE COURT: I can order that one of you stand on one
7 side of the room, and one stand on the other side of the room;
8 I can do that.

9 MS. JACOVINO: It's happened on numerous occasions.

10 THE COURT: I'm not ordering that her boyfriend
11 can't go with her. He doesn't get to dictate to her who she
12 has a relationship. Likewise, she doesn't get to dictate to
13 you. But if you can't be an adult with each other, I can bar
14 one of you from attending, or I can order you to stand on
15 separate sides of the room. What do you want to do?

16 THE DEFENDANT: Your Honor, I have --

17 MR. PAGE: No, don't say anything. What would you
18 like?

19 (COUNSEL AND CLIENT CONFER BRIEFLY)

20 MR. PAGE: It's better if that they stay on separate
21 sides of whatever room they're in.

22 THE COURT: And they are not to trade comments with
23 each other, or with each other's companions. All right, can
24 we do that?

1 THE PLAINTIFF: Understood.

2 THE COURT: So, you take the right side of the room,
3 he takes the left side of the room.

4 MS. JACOVINO: We also need to make sure that --

5 THE COURT: And that that's along the wall, not in
6 the middle. You stay on the edges.

7 MS. JACOVINO: But, governor (ph), wait here.

8 THE COURT: Uh-huh.

9 MS. JACOVINO: Also, that they don't block any of
10 the other parents from talking to the children at the school
11 events.

12 MR. PAGE: My client says that doesn't happen, so
13 I'm not -- they're complaining about an issue my client
14 believes do not exist. I don't --

15 THE COURT: You get the first 30 minutes of the
16 school event, up to 30 minutes before the event starts, and
17 you get the last 30 minutes. Does that work?

18 THE PLAINTIFF: That'll work.

19 MS. JACOVINO: And we -- we recognize the breakdown
20 that's happened since the decree, and obviously in the
21 marriage before that. And we would like a chance to work
22 things out, so we don't have to come to court and ask you to
23 referee it. So, it was our thought that possibly we can do
24 some kind of family counseling.

1 MR. PAGE: I would agree that these are issues that
2 are better handled by a therapist, or other than a judge, no
3 offense to you. But --

4 THE COURT: I agree. There's some issues with your
5 sons, and you guys aren't helping them. So, what do you want
6 to do on that? Do you want -- does this counseling for the
7 two of you individually, separately, what are we asking for
8 here, or this counseling with the kids, or for the kids?

9 MS. JACOVINO: We were -- we were thinking all of
10 the above, some family, which would include Mom and Dad, and
11 the kids, and then separately.

12 MR. PAGE: If therapy is being proposed, we would
13 suggest that this be assigned out to a MFT, someone on the
14 approved provider list, then let the MFT take the lead as to
15 who should be involved when. They have the background, the
16 education, and experience to decide that.

17 THE COURT: That would be fine. Can you agree upon
18 who you want to pick as a therapist? Do you both want to do
19 the therapy?

20 MR. PAGE: There may be somebody who is on the
21 approved list who may be covered by insurance. There are some
22 considerations to think about here --

23 THE COURT: Right.

24 MR. PAGE: -- as far as cost is concerned.

1 THE COURT: Because it does cost. What are the
2 therapists normally charging now per hour?

3 MR. PAGE: \$7500 (sic) an hour -- MFTs.

4 (COUNSEL AND CLIENT CONFER BRIEFLY)

5 MR. PAGE: There is someone available through her
6 church that would be available to deal with the children and
7 the overall family dynamic, but that would have to be, I
8 think, for the -- everyone to go through, they have to have
9 Mr. Kilgore's approval as well.

10 THE COURT: What's the name of the person?

11 THE DEFENDANT: It's Gary Waters. He runs a
12 counseling program. I've already seen him because my one son
13 is living with me now, so I was trying to get him into
14 counseling.

15 MR. PAGE: You can't do that without talking to Mr.
16 Kilgore.

17 THE COURT: All right. Mr. Kilgore, who do you
18 want?

19 THE PLAINTIFF: I would have to -- get a look up and
20 find one -- recommend. I am not in agree with the church
21 counseling. They are personal friends, and when I -- we dealt
22 with them before it was not pretty.

23 THE COURT: Okay. Marriage -- family therapist. If
24 you can't agree upon who to use, provide a list to this

1 department. You get to provide three names, you get to
2 provide three names, the Court will make the decision.

3 MS. JACOVINO: I think --

4 THE PLAINTIFF: Yeah, we can do that.

5 MS. JACOVINO: We can probably do that without the
6 Court's -- just like we do like --

7 THE COURT: You guys can put --

8 MS. JACOVINO: -- in arbitration.

9 THE COURT: -- the names in a bowl, and pull one
10 out. However, you want to do it, but if you guys can't come
11 to an agreement of how to do it, submit it to me, or to this
12 department and we'll pull a name out and that's who you'll
13 use.

14 MR. PAGE: Your Honor, we have a list.

15 THE COURT: All right. Why don't you look it over,
16 see if we can pick one right now. Oh, yeah. You're going to
17 need to see who is covered by your insurance. Okay. All
18 right. And meet and confer, and then what's your pleasure?
19 Do you want me to just reschedule a hearing on this, and then
20 we can look at whatever unresolved issues we have after the
21 meet and confer?

22 MR. PAGE: I think that would be a good idea. In my
23 review of the issues here, I see some omitted things that
24 probably need to be added in as far -- far as a supplemental

1 request for relief are concerned -- they deal with financial
2 issues. We will deal with that later, but they at least
3 deserve notice and an opportunity to respond.

4 THE COURT: Provide your list of medical bills that
5 you think the other side should have to put in on.

6 MS. JACOVINO: And so, we'll definitely --

7 THE COURT: Both sides have medical bills they've
8 incurred, according to the paperwork. So, submit them to each
9 other and see. And from now on it would be 30/30 rule.
10 You've got 30 days after the child's been seen by a medical
11 professional to submit the bill to the other side. The other
12 side then has 30 days to either agree or dispute it. Once
13 it's resolved, then they have 30 days to pay, all right? If
14 you don't submit to the -- the bill to the other side within
15 30 days, it's your responsibility.

16 MS. JACOVINO: Your Honor, at this moment we are
17 concerned that Mr. Kilgore may not be able to make the court
18 ordered child support payments, and we don't want an arrears
19 situation.

20 THE COURT: I don't have an affidavit, so I can't
21 grant him any relief right now.

22 THE CLERK: Your return date will be March 11, 9:30
23 a.m.

24 MR. PAGE: My client did indicate that the parties

1 were ordered to use the Family Wizard. She indicates that at
2 this point Mr. Kilgore is unwilling, or unable to use the
3 Family Wizard; we request a reiteration of the order that Mr.
4 Kilgore's required to issue non-emergency communications
5 through Family Wizard.

6 THE COURT: All right. That's the order.

7 MR. PAGE: She would also order that medical bills
8 were to be attached as part of the communications in Family
9 Wizard, and Ms. Kilgore requests that that be implemented as
10 well.

11 THE COURT: That can be, fine. That will be the
12 order of the Court. All right. In the meantime, it's the
13 also the order that at school events, you get the left, you
14 get the right.

15 MS. JACOVINO: And 30 minutes --

16 THE COURT: Outer edges, and 30 minutes before is
17 his, 30 minutes after is yours to visit with the children.

18 MS. JACOVINO: And so, just for clarification, all
19 the other court orders are still in place, the same visitation
20 schedule that we had, the same --

21 THE COURT: All those orders --

22 MS. JACOVINO: -- support orders?

23 THE COURT: -- remain in place to -- for the order.

24 MS. JACOVINO: Does that mean that the kids will be

1 coming to other parent's house, one week on, one week off?

2 MR. PAGE: Your Honor, we've run into a situation
3 where the -- one of the children, Nicholas, is refusing to
4 spend time with his father -- he's 14. We're at the age of
5 suitable age of discretion. We're asking that the children be
6 interviewed --

7 THE COURT: Not ruling -- not ruling on that today.
8 He has to go visit the father.

9 MR. PAGE: Would -- in order for Eleni be better
10 prepared for the return hearing, when that comes up in March,
11 would the Court be willing to send the children out to be
12 interviewed at the Family Mediation Center to get their take
13 on the situation given their age?

14 THE COURT: Not at this time, until we've started
15 the counseling, the family counseling.

16 MR. PAGE: I'm sorry?

17 THE COURT: Once they've been through some of the
18 family counseling we'll see where we're at. But at this point
19 I'm not going to make the 14 year old a pawn in the game.

20 MS. JACOVINO: Your Honor, may we pick up Nick after
21 school today, as it is currently Dad's day?

22 MR. PAGE: I didn't hear what you said; my client
23 was talking to me.

24 MS. JACOVINO: Can we pick up Nick after school

1 today?

2 THE DEFENDANT: You know what, I have encouraged my
3 children to see him.

4 MR. PAGE: Go ahead and stand if you're going to
5 address.

6 THE DEFENDANT: I don't know what to do in this
7 situation. My son is very angry at his father. I have been
8 trying to get him in to counseling. He ran away from him at
9 the school events. He's saying we're blocking him. I'm not
10 blocking him, I have encouraged all my kids to see him. I
11 have two out of my three kids living with me. I can't force
12 -- I can't force this kid to -- he ran away from -- he showed
13 up with the police to try to get him. Nicholas looked at the
14 policeman and said, I'm not going this -- oh, we do have an
15 open CPS case. He said the CPS lady told me I don't have to
16 go if I'm in fear, or abused, or whatever. But she told him
17 that, and I can't --

18 THE COURT: He has to go, and you tell your son he
19 has to go. Not oh, I'm so sorry you have to go, maybe you
20 don't have to go. It's you have to go, that's what you say to
21 him. All right.

22 MS. JACOVINO: And just -- the CPS case has been
23 closed --

24 THE COURT: All right. Thank you.

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MS. JACOVINO: -- as unsubstantiated.

MR. PAGE: My client indicates that the case -- case
is still open, so we just have a clear record.

THE COURT: It doesn't matter, he has to go.

MS. JACOVINO: Thank you, Your Honor.

MS. LONARDO: Thank you, Your Honor.

MR. PAGE: I appreciate your time. Thank you.

THE PLAINTIFF: Thank you, Your Honor, for your
time.

(PROCEEDINGS CONCLUDED AT 10:08:44)

* * * * *

ATTEST: I do hereby certify that I have truly and
correctly transcribed the digital proceedings in the
above-entitled case to the best of my ability.

/s/ Nita Painter
Nita Painter, Transcriptionist