Your Name: Address: A	COURT CODE: 1356	
Address: City, State, Zip:		
CERTIFICATE OF MAILING FOR THE PETITION TO TRANSFER MINOR GUARDIANSHIP TO NEVADA I HEREBY CERTIFY that I served the: (⊠ check all that apply) Petition to Transfer Minor Guardianship to Nevada Citation to Appear and Show Cause Other: On (month)		
Telephone: Email Address: Self-Represented IN THE FAMILY DIVISION OF THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA IN AND FOR THE COUNTY OF WASHOE In the Matter of the Guardianship of the: Person	City, State, Zip:	
IN THE FAMILY DIVISION OF THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA IN AND FOR THE COUNTY OF WASHOE In the Matter of the Guardianship of the: Person		
IN THE FAMILY DIVISION OF THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA IN AND FOR THE COUNTY OF WASHOE In the Matter of the Guardianship of the: Person		
OF THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA IN AND FOR THE COUNTY OF WASHOE In the Matter of the Guardianship of the: Person	Self-Represented	
□ Estate □ Person and Estate of: (name of child who has a guardian) A Protected Minor. CERTIFICATE OF MAILING FOR THE PETITION TO TRANSFER MINOR GUARDIANSHIP TO NEVADA I HEREBY CERTIFY that I served the: (☑ check all that apply) □ Petition to Transfer Minor Guardianship to Nevada □ Citation to Appear and Show Cause □ Other: □ on (month) (day), 20, by depositing a copy of the same in the U.S. Mail, enclosed in sealed envelopes, prepaid Certified Mail, Return Receipt Requested addressed to: Relatives / Required Notices: Name: Name:	OF THE SECOND JUDICIAL DISTRIC	T COURT OF THE STATE OF NEVADA
□ Estate □ Person and Estate of: (name of child who has a guardian) A Protected Minor. CERTIFICATE OF MAILING FOR THE PETITION TO TRANSFER MINOR GUARDIANSHIP TO NEVADA I HEREBY CERTIFY that I served the: (☑ check all that apply) □ Petition to Transfer Minor Guardianship to Nevada □ Citation to Appear and Show Cause □ Other: □ on (month) (day), 20, by depositing a copy of the same in the U.S. Mail, enclosed in sealed envelopes, prepaid Certified Mail, Return Receipt Requested addressed to: Relatives / Required Notices: Name: Name:	In the Matter of the Guardianship of the:	
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Person and Estate CERTIFICATE OF MAILING FOR THE PETITION TO TRANSFER MINOR GUARDIANSHIP TO NEVADA I HEREBY CERTIFY that I served the: (⊠ check all that apply) Petition to Transfer Minor Guardianship to Nevada Citation to Appear and Show Cause Other:		
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☐ Citation to Appear and Show Cause ☐ Other: ☐ Other: ☐ Other: ☐ Other: ☐ Other: ☐ Other: ☐ (day), 20, by depositing a copy of the same in the U.S. Mail, enclosed in sealed envelopes, prepaid Certified Mail, Return Receipt Requested addressed to: Relatives / Required Notices: Name: Name:	I HEREBY CERTIFY that I served the: (⊠ cho	eck all that apply)
U.S. Mail, enclosed in sealed envelopes, prepaid Certified Mail, Return Receipt Requested addressed to: Relatives / Required Notices: Name: Name:	☐ Citation to Appear and Show Cau	ase
addressed to: Relatives / Required Notices: Name: Name:	on (month)(day)	_, 20, by depositing a copy of the same in the
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Address:	Address:
	27
Name:	Name:Address:
If the child receives or has received Medicai ☐ Nevada Department of Health and Hu Director's Office 1000 N. Division Street, Suite # 102 Carson City, NV 89703	
I declare under penalty of perjury und is true and correct.	ler the law of the State of Nevada that the foregoing
This document does not contain the p	personal information of any person as defined by
NRS 603A.040.	
DATED (month)	(day), 20
	(Signature)
	(Printed Name)

ATTACH THE SIGNATURE RECEIPTS (GREEN CARDS FROM THE POST OFFICE) TO THIS FORM WHEN RECEIVED