COURT CODE: 2610	
Your Name:	
Address:	
City, State, Zip:	
Telephone:	
Email Address:	
Self-Represented	
	T COURT OF THE STATE OF NEVADA COUNTY OF WASHOE
In the Matter of the Guardianship of the:	
□ Person	CASE NO.:
□ Estate	DEDT.
☐ Person and Estate	DEPT:
of:	
(name of person who has a guardian) A Protected Person.	
NOTICE OF INTENT TO M	IOVE PROTECTED PERSON
1. Proposed Move. The Guardian(s) plan to r	move the adult to: (write the details of where you
plan to move the adult)	
pun to move the datity	
Name of Facility (if applicable)	
Name of Facility (if applicable)	
Address	
City, State, Zip Code	
Telephone number	
•	
2. Date of Move. The Guardian(s) plan to mo	ve the adult to the location above on (date of the
planned move)	.

	Name of Facility (if applicable)	
	Address	
	City, State, Zip Code	
	Telephone number	
	-	ved from any interested person within 10 business
•	er receiving this notice, the guardi rmission.	an(s) may move the protected person without
court pe	rmission.	
I	declare under penalty of perjury g is true and correct.	under the law of the State of Nevada that the
foregoing	5 is true and correct.	
	his document does not contain the	personal information of any person as defined by
T NRS 603	his document does not contain the	
T NRS 603	This document does not contain the 3A.040.	

CERTIFICATE OF SERVICE BY MAIL

Name:	Name:
Address:	
	Tradiciss.
Name:	Name:
Address:	
Name:	Name:
Address:	Address:
Nama:	Nama
Name: Address:	
Name: Email Address: Name:	Email Address:
Email Address:	
Name:	Name:
Email Address:	Email Address:
Name:	Name:
Email Address:	Email Address:
foregoing is true and correct.	y of perjury under the law of the State of Nevada that the st contain the personal information of any person as defined by
	(Your Signature)
	` '