COURT CODE: 1360	
Your Name:	
Address:	
City, State, Zip:	
Telephone:	
Email Address:	
Self-Represented	
	CT COURT OF THE STATE OF NEVADA COUNTY OF WASHOE
In the Matter of the Guardianship of the:	
□ Person	CASE NO.:
☐ Estate	DEDE
☐ Person and Estate	DEPT:
of:	
(name of person who has a guardian)	
A Protected Person.	
	TE OF SERVICE
I HEREBY CERTIFY that I am over the age	of 18 and I served the (\boxtimes <i>check all that apply</i>)
☐ Petition for Permission to Move☐ Citation to Appear and Show Ca☐ Other:	
in the following manner:	
BY	MAIL
I certify that I deposited copies the	foregoing documents in the U.S. mail in (city)
, Nevada, addressed to the	persons listed below on (date)
by (\boxtimes <i>check one</i>) \square Regular, \square Certified or \square	Registered, return receipt requested:
Name:	Name:
Address:	Address:

Name:	Name:
Address:	Address:
Name:	Name:
Address:	
Name:	Name:
Address:	Address:
	ELECTRONIC
I served the following persons pursu	ant to the court's electronic service rules on (date):
Name:	Name:
Email Address:	Email Address:
Name:	Name:
Email Address:	Email Address:
Name:	Name:
Email Address:	Email Address:
Name:	
Email Address:	Email Address:
I declare under penalty of foregoing is true and correct.	perjury under the law of the State of Nevada that the
This document does not con	tain the personal information of any person as defined by
NRS 603A.040.	
DATED (month)	, 20
	(Your Signature)
	(Printed Name)