

COURT CODE: 1360

Your Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____

Email Address: _____

Self-Represented

**IN 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
- Estate
- Person and Estate

of:

(name of person who has a guardian)
A Protected Person.

CASE NO.: _____

DEPT: _____

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that I am over the age of 18 and I served the (*check all that apply*)

- Petition to Release Funds from Blocked Account
- Request for Submission
- 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 (*check one*) Regular, Certified or Registered, return receipt requested:

Name: _____

Address: _____

Name: _____

Address: _____

Name: _____
Address: _____

Name: _____
Address: _____

Name: _____
Address: _____

Name: _____
Address: _____

Name: _____
Address: _____

Name: _____
Address: _____

ELECTRONIC

I served the following persons pursuant to the court's electronic service rules on (*date*) _____:

Name: _____
Email Address: _____

Name: _____
Email Address: _____

Name: _____
Email Address: _____

Name: _____
Email Address: _____

Name: _____
Email Address: _____

Name: _____
Email Address: _____

Name: _____
Email Address: _____

Name: _____
Email Address: _____

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

This document does not contain the personal information of any person as defined by NRS 603A.040.

DATED (*month*) _____ (*day*) _____, 20__.

(Your Signature)

(Printed Name)