

COURT CODE: 1910

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:

- General Guardianship of the Person
- General Guardianship of the Estate
- General Guardianship of the Person & Estate
- Special Guardianship

of:

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

CASE NO.: \_\_\_\_\_

DEPT: \_\_\_\_\_

**LETTERS OF GUARDIANSHIP**

On (*month*) \_\_\_\_\_ (*day*) \_\_\_\_\_, 20\_\_\_\_, a Court Order was entered appointing (*name of first guardian*) \_\_\_\_\_ and (*name of second guardian, or "n/a"*) \_\_\_\_\_ as Guardian(s) of the above named protected person. The named Guardian(s), having duly qualified, is/are authorized to act and has/have authority to perform the duties of such Guardian(s) as provided by law.

In testimony of which, I have this date signed these Letters and affixed the Seal of the Court.

DATED \_\_\_\_\_

ALICIA L. LERUD  
CLERK OF COURT

BY: \_\_\_\_\_  
Deputy Clerk

**OATH**

*(do not sign this until you are in front of the Clerk of Court or a Notary Public)*

I, *(name of guardian)* \_\_\_\_\_,  
residing at *(street/city/state/zip)*: \_\_\_\_\_

whose mailing address is *(street/city/state/zip)*: \_\_\_\_\_

solemnly affirm that I will well and faithfully perform the duties of Guardian according to law. I will file all reports, at least annually, and when ordered by the Court. I affirm that any matters stated in any petition, document or court proceeding are true of my own knowledge or if any matters are stated on information or belief, I believe them to be true. I affirm I will follow the Protected Person’s Bill of Rights to the greatest extent possible.

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.

EXECUTED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Printed Name)

Signed and sworn to before me on this *(day)* \_\_\_\_\_ day of *(month)* \_\_\_\_\_, 20\_\_\_\_  
by *(name of guardian)* \_\_\_\_\_

\_\_\_\_\_  
DEPUTY CLERK / NOTARY PUBLIC

*(Repeat oath for each guardian; attach separate sheets if necessary)*