

COURT CODE: _____
Your Name: _____
Address: _____
City, State, Zip: _____
Telephone: _____
Email Address: _____
Self-Represented

DISTRICT COURT
_____ **COUNTY, NEVADA**

In the Matter of the Guardianship of the:

- ☐ Person
☐ Estate
☐ Person and Estate

of:

(name of child who needs a guardian)
A Proposed Protected Minor.

CASE NO.: _____

DEPT: _____

**CERTIFICATE OF MAILING FOR THE
PETITION FOR APPOINTMENT OF GUARDIANS**

I HEREBY CERTIFY that I served the: (☒ check all that apply)

- ☐ Petition for Appointment of Guardian
☐ 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: _____
Address: _____

Name: _____
Address: _____

Name: _____
Address: _____

Name: _____
Address: _____

Name: _____
Address: _____

Name: _____
Address: _____

Name: _____
Address: _____

Name: _____
Address: _____

Name: _____
Address: _____

Name: _____
Address: _____

If the child is in the care, custody, or control of a child welfare agency, you must serve the agency and complete this section:

Child Welfare Agency: _____
Street Address: _____
City, State, Zip: _____

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____.

(Signature)

(Printed Name)

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