

1 Name: _____

2 Address: _____

3 _____

3 Telephone No. _____

4 Appearing in Proper Person

5 IN THE FAMILY DIVISION
6 OF THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
7 IN AND FOR THE COUNTY OF WASHOE

8 In the Matter of :

9 _____

Case No. _____

10 _____

Dept. No. _____

11 _____

12 Minor Child(ren)

13 _____ /

14 REPLY TO RESPONSE TO MOTION

15 I, _____, reply to the Response to Motion filed by
16 (Your name)

17 _____ on _____ for the
(Name of other party) (Date reply was filed)

18 following reasons:

19 ***State very specifically your reply to the other party's response or opposition.***

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(If you need more space, you may attach additional pages. Be sure the pages clearly indicate they are a continuation of this portion of the pleading.)

I _____ request a hearing on this matter.
(Do or do not)

If a hearing is requested, please state why you feel a hearing is necessary: _____

This document does not contain the Social Security Number of any person.

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

DATED this _____ day of _____, 20_____.

(Signature)

1 Code: 3860

2 Name: _____

3 Address: _____

4 Telephone: _____

5 Self-Represented Litigant

6 IN THE FAMILY DIVISION
7 OF THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
8 IN AND FOR THE COUNTY OF WASHOE

9
10 _____, Case No. _____
11 Plaintiff / Petitioner / Joint Petitioner,

12 vs. Dept. No. _____

13 _____,
14 Defendant / Respondent / Joint Petitioner.

15 REQUEST FOR SUBMISSION

16
17 I, _____, request that the
18 (Print your name)

19 _____ that was filed on
20 (Name of the document to be submitted to the Court)

21 _____ be submitted to the Court for decision.
22 (Date the document was filed with the Court)

23 This document does not contain the Social Security Number of any person.

24 Date: _____ Signature: _____

25 Print Your Name: _____
26
27
28

1 Code: 3720
2 Name: _____
3 Address: _____
4 Telephone: _____
5 Email: _____
6 Self-Represented Litigant

7 IN THE FAMILY DIVISION
8 OF THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
9 IN AND FOR THE COUNTY OF WASHOE
10

11 _____, Case No. _____
12 Plaintiff / Petitioner / Joint Petitioner, Dept. No. _____
13 vs.
14 _____,
15 Defendant / Respondent / Joint Petitioner.
16 _____ /

17 PROOF OF SERVICE

18 Pursuant to Nevada Rule of Civil Procedure 5(b), I served a true and correct copy of the
19 _____ filed on
20 (Name of document(s) served)
21 _____ in the manner(s) and at the location(s) described below. A copy
22 (Date of filing)
23 of this Proof of Service has been mailed or personally delivered to all parties or their lawyer.
24

25 *Service Description*

26 Fill in the information requested on the next page for each person who has been served.
27 If a person was served by United States Postal Service certified mail, you must attach the
28 return receipt to this document.

1 A copy of the above named document(s) was served upon the following people:
2

3 1. Name: _____ Date: _____
4 (Name of the person who was served) (Date of service: month / day / year)

5 By: Personal service –OR– Service by U.S. Mail, postage prepaid –OR–
6 Certified mail, return receipt attached –OR– Other: _____
7

8 Address: _____
9 (Mailing address or physical address where service took place)
10 _____

11 2. Name: _____ Date: _____
12 (Name of the person who was served) (Date of service: month / day / year)

13 By: Personal service –OR– Service by U.S. Mail, postage prepaid –OR–
14 Certified mail, return receipt attached –OR– Other: _____
15

16 Address: _____
17 (Mailing address or physical address where service took place)
18 _____

19 If more room is needed, attach additional sheets.
20

21 This document does not contain the Social Security Number of any person.

22 I declare under penalty of perjury, under the law of the State of Nevada, that the foregoing
23 statements are true and correct.
24

25 Signature: _____

26 Date: _____ Print Your Name: _____
27
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