3860	
Name:	
Address:	
Email:	
	IN THE SECOND JUDICIAL COURT OF THE STATE OF NEVADA
	IN AND FOR THE COUNTY OF WASHOE
IN THE N	MATTER OF THE ESTATE
OF	Case No.
	Dept. No. PR
	Deceased. /
	REQUEST FOR SUBMISSION
	, requests that (Your Name)
the	(Name of Document to Be Submitted To The Court)
filed on _	be submitted to the Court for decision.
۱۲	nereby certify that a copy of this Request has been mailed to all parties or the
counsel.	This document does not contain the Social Security Number of any person.
Da	ate:
	Signature:
	Print Name:
	Attorney for:
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