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Code:
(Your name) _____

(Your address) _____

(Telephone) _____

In Proper Person

IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA

IN AND FOR THE COUNTY OF _____

In the Matter of the Guardianship of)

the person)

the estate)

the person and estate)

CASE NO. _____

DEPT. NO. _____

_____,)

_____, and)

_____)

Minor Children.)

_____)

**AFFIDAVIT OF SERVICE OF ORDER OF TEMPORARY GUARDIANSHIP
AND NOTICE OF EXTENSION HEARING**

STATE OF NEVADA)

COUNTY OF _____)

_____, being first duly sworn under penalties of
(Print name of person making service)

perjury, states as follows:

1. That I am: (check the appropriate box)

a party in this action and am appearing in proper person.

a person not involved in this action and have no interest in this action and am
over the age of 18 years.

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2. That on _____ I served a true and correct copy of
(Date the documents were mailed or served)

the documents entitled (List the name of all documents mailed or served) _____

(Check the appropriate box and fill in the appropriate information in the following paragraphs)

IF THE DOCUMENTS WERE SERVED BY MAIL ON THE PARTIES OR THE OTHER PARTIES' LAWYER, FILL IN THE FOLLOWING:

by placing a copy of the documents enclosed in a sealed envelope and mailing it by certified mail, return receipt requested or regular first class mail to the last known address of the following:

(name) _____ (name) _____
(address) _____ (address) _____

IF THE DOCUMENTS WERE PERSONALLY SERVED ON THE OTHER PARTIES OR THE OTHER PARTIES' LAWYER, FILL IN THE FOLLOWING:

by personally serving:

(name) _____ (name) _____
(address) _____ (address) _____

(If additional pages are needed to list other names and addresses, copies of this page may be attached.)

Date: _____ (print name) _____
_____ (signature) _____

SIGNED and SWORN to before me by (name of person making service)
_____ on the _____ day of _____, _____.

NOTARY PUBLIC