1	Case No.			
2	Dept. No.			
3	The undersigned hereby affirms that this document does not contain the social security number of any person.			
5				
6 7	IN THE TENTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA			
8	IN AND FOR THE COUNTY OF CHURCHILL			
9				
10 11	Plaintiff,			
12	v. OPPOSITION TO MOTION FOR REVIEW AND MODIFICATION OF CHILD SUPPORT			
14	Defendant/			
16	I,in this matter, (Your name) (Plaintiff or Defendant)			
17 18	submit the following Response to the Motion for Review and Modification of Child Support			
19	filed by on as follows: (Name of other party) (Date document filed)			
20	I with the Motion for the following reasons: (Agree or Disagree)			
22	(State very specifically and in detail the facts and legal reasons you are agreeing with, or opposing, the motion.)			
24				
25				
26				
27				
28				

nore space is needed	to explain your position o	or your argument, attach additional sheets.
	one side of the sheet.	
I re	equest a hearing on this m	atter.
	wastad places state why	you faal a haaring is nagassary
ir a nearing is rec	uested, please state why y	you feel a hearing is necessary:
ate:		
		(Print Name)
		(Signature)
		(Address)
		(Telephone number)
	2	

CERTIFICATE OF SERVICE

2	The undersigned hereby certifies that they are 18 years of age or older, and on this date			
3	served a true and correct copy of the document/s entitled:			
4				
5	(Clearly list all documents you served			
6	In the following way: (check the appropriate blank, and fill in the appropriate information)			
7	IF THE DOCUMENTS WERE SERVED BY MAIL:			
8	by placing a copy enclosed in a sealed envelope upon which first class postage was fully prepaid			
10	by placing a copy enclosed in a sealed envelope and mailing it certified, return receipt requested			
11	The envelope was addressed to:			
13	(Name) at			
14	(Address)			
15				
16 17	And that there is regular communication by mail between the place of mailing and the place addressed.			
18	IF THE DOCUMENTS WERE PERSONALLY SERVED:			
19	by personally serving:			
20	(Name) at			
21				
22	(Address)			
23				
24				
25	DATED: This day of,			
26				
27				
28	(Signature of person who performed service)			