Case No. _____

Dept. No. _____

The undersigned hereby affirms that this document does not contain the social security number of any person.

_____

IN THE TENTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA

IN AND FOR THE COUNTY OF CHURCHILL

In the Matter of the Guardianship of the Person, Estate or Person and Estate of:

_____

_____

_____

A Minor Child/ren

OPPOSITION TO PETITION TO TERMINATE GUARDIANSHIP OF MINOR CHILD/REN

_____/

_____, in Proper Person, responds to the Petition
(Your name)

To Terminate the Guardianship filed on _____ by
(Date Petition Filed)

_____ as follows:
(Name of person/s who filed Petition)

_____

_____

_____

_____

_____

_____

If more space is needed to explain your position or you're your argument, attach additional sheets

Date: _____

_____
(Print Name)

_____
(Signature)

_____
(Address)

_____

_____
(Telephone number)

CERTIFICATE OF SERVICE

The undersigned hereby certifies that they are 18 years of age or older, and on this date served a true and correct copy of the document/s entitled: _____

_____

(Clearly list all documents you served

In the following way: ***(check the appropriate blank, and fill in the appropriate information)***

IF THE DOCUMENTS WERE SERVED BY MAIL:

_____ by placing a copy enclosed in a sealed envelope upon which first class postage was fully prepaid

_____ by placing a copy enclosed in a sealed envelope and mailing it certified, return receipt requested

The envelope was addressed to:

(Name) _____ at

(Address) _____

_____

And that there is regular communication by mail between the place of mailing and the place addressed.

IF THE DOCUMENTS WERE PERSONALLY SERVED:

_____ by personally serving:

(Name) _____ at

(Address) _____

_____

DATED: This ____ day of _____, _____.

_____

(Signature of person who performed service)