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 I	DISTRICT COURT OF THE STATE OF NEVADA
IN AND FOR	R THE COUNTY OF CHURCHILL
(Your name) Petitioner	
VS	PETITION FOR CUSTODY, SUPPO AND VISITATION
(Other Party's name) Respondent,	
(Your name)	, in proper person, petitions this ing specific visitation for the following minor children:
Child's Name	Child's Birthdate
Petitioner,	, states as follows:
(Your Name)	
My present address is:	
I have lived at that address for:	

Prior to living at my present address, I lived at:	_
I lived at that address for:	[circle one] days/months/years
The child(ren) presently live at:	
The child(ren) have lived at that address for:	[circle one] days/months/year
The child(ren) are presently living with (state with whom the	ne children are presently living)
Prior to the present address, the child(ren) lived at:	
The child(ren) have lived at that address for:  The child(ren) lived at the prior address with  (state with whom the	
II.	
The other parent of the child(ren) is:(Name of the other parent)  That parent resides at :	
The other parent has lived at that address for:  Prior to living at that present address, the other parent lived a	
The other parent lived at that address for:	[circle one] days/months/years

III. 1 Print "YES" on the line in front of the statement that fits your circumstances. Print "N/A" (not applicable) on those lines that do not apply to your set of 3 circumstances. 4 The paternity of the child(ren) has been established by: 5 A voluntary acknowledgement of paternity was signed by both 6 parents at the time of the child's birth and Father's name is on the birth certificate. 7 Paternity was established through a court proceeding in: 8 Name of court \_\_\_\_\_ 9 Address of court Date proceeding was held \_\_\_\_\_ 10 Case Number of the proceeding 11 Through genetic testing, a copy of which is attached to this pleading. 12 The child(ren) have the Father's last name. 13 IV. 14 15 Child Support Print "YES" on each line in front of all of the statements that fit your circumstances 16 and fill in the blanks regarding each "YES" answer. Print "N/A" (not applicable) on each line in front of all of the statements that do not fit your circumstances. 17 I am paying child support directly to the other parent in the amount 18 of \$\_\_\_\_\_ per (circle one) week, month. 19 I am paying child support through the District Attorney's Office in the amount of \$ \_\_\_\_\_ per (circle one) week, month. 20 21 I am not paying child support. 22 I am receiving child support directly from the other parent in the amount of \$ \_\_\_\_\_ per (circle one) week, 23 month. 24 I am receiving child support through the District Attorney's Office 25 in the amount of \$ \_\_\_\_\_\_ per (circle one) week, month. 26 I am not receiving any child support. 27

I am receiving welfare benefits for the child(ren).

	The child(ren) is/are currently covered by hea	
	by and the premiums are \$ (Mother or Father)	(week or month
	nter an Order for child support as follows:	in the
Father or Mother)	shall pay child support to (Father or Mother)	in the
amount of \$	per month, per child, for a total monthly chi	ild support obligation
of \$	The child support shall be paid on or bef	Fore the
Print "N/A"	on the line in front of the statement that fits your circle (not applicable) on those lines that do not apply to you circumstances.	
	based upon the following information:	
	The parent paying child support is unemployed child support obligation should be set at the n requirement.  The parent paying child support is employed a per (circle one) hour/day/day/day/day/day/day/day/day/day/day	ninimum statutory and earns
	child support obligation should be set at the n requirement.	and earns week/month. earning week/month, but is bligation should be set
	child support obligation should be set at the marequirement.  The parent paying child support is employed a per (circle one) hour/day/v  The parent paying child support is capable of \$ per (circle one) hour/day/v currently unemployed and the child support of at the minimum statutory requirement until er	and earns week/month.  earning week/month, but is bligation should be set mployed and then the  earning week/month, but is
	child support obligation should be set at the marequirement.  The parent paying child support is employed sper (circle one) hour/day/vecurrently unemployed and the child support of at the minimum statutory requirement until er support obligation should be reviewed.  The parent paying child support is capable of sper (circle one) hour/day/vecurrently unemployed or underemployed and the child support of the parent paying child support is capable of sper (circle one) hour/day/vecurrently unemployed or underemployed and	and earns week/month.  earning week/month, but is bligation should be set mployed and then the  earning week/month, but is should pay the

	<b>V.</b>
To my knowledge, child(ren):	the following custody and visitation orders have been entered regarding th
child(ren), incli	sustody or visitation orders have ever been filed regarding the uding orders in Temporary Protective Orders, state the provisions of to orders have ever been filed, print "NONE" in the space provided.
	VI.
custodian of the ch  I request the	ild(ren).  the <u>ONE</u> space that describes the kind of custody you want the Print "NO" in all of the other spaces.
	Joint legal and joint physical custody to the Petitioner and the Respondent.
	Joint legal custody to the parties with primary physical custody the Petitioner.
	Joint legal custody to the parties with primary physical custody the Respondent.
	-

	Mother has had contact with the child(ren) in the following way:
_	
_	
	Father has had contact with the child(ren) in the following way:
s v t	REGULAR WEEKLY/MONTHLY EXCHANGE AND VISITATION  Visitation must be set out in specific detail, including a full weekly or monthly chedule with the days the exchanges will take place, the times of the exchanges and who will provide transportation. Without very specific visitation, an Order will not be granted. Terms such as "reasonable visitation" and "visitation at reasonable times and places" will not be accepted. If you are requesting supervised visitation, be very specific as to who is going to act as supervisor.
	sh this Court to enter an Order for regular, specific, weekly/monthly visitation and exne child(ren) as follows:
_	
_	
_	
_	

#### **HOLIDAY VISITATION**

1 You may add or subtract any holiday(s) on the following list. If you choose not to exchange the 2 child/ren on a specific holiday, print "not applicable" in the space for that holiday. If no changes for the holidays are to be made in the regular visitation schedule, state that clearly in 3 the next paragraph and print "not applicable" on the lines provided for the individual holidav(s). 4 5 The major holidays will be handled in the following manner: 6 (Name each specific holiday, such as Thanksgiving, Christmas, Easter, Passover, Hanukkah) 7 8 9 10 11 12 13 14 15 New Year's Day will be alternated with \_\_\_\_\_ having the child in the (Mother or Father) year \_\_\_\_\_ and each \_\_\_\_ year thereafter. 16 (Odd or even)

Martin Luther King's Birthday will be alternated with \_\_\_\_\_\_ having the \_\_\_\_\_\_ (Mother or Father) 17 child in the year\_\_\_\_\_ and each \_\_\_\_\_ year thereafter. 18 President's Day will be alternated with \_\_\_\_\_\_ having the child in the 19 year \_\_\_\_\_ and each \_\_\_\_ year thereafter. (Odd or even) 20 \_\_\_\_\_ having the child in the Memorial Day will be alternated with \_\_\_\_\_ 21 (Mother or Father) year \_\_\_\_\_ and each \_\_\_\_ year thereafter. 22 Fourth of July will be alternated with \_\_\_\_\_\_ having the child in the 23 (Mother or Father) year \_\_\_\_\_ and each \_\_\_\_ year thereafter. 24 Labor Day will be alternated with \_\_\_\_\_\_ having the child in the 25 year \_\_\_\_\_ and each \_\_\_\_ year thereafter. 26

Nevada Day will be alternated with \_\_\_\_\_ having the child in the \_\_\_\_\_

year \_\_\_\_\_ and each \_\_\_\_ year thereafter. (Odd or even)

27

1	Halloween will be alternated with having the child in the
2	year and each year thereafter.  (Odd or even)  (Odd or even)
3	veterans' Day will be alternated with naving the child in the
4	year and each year thereafter.
5	(Odd or even)  Child's birthday will be alternated with having the child in the
6	year and each year thereafter.  (Mother or Father) year year thereafter.
7	Mother shall have the child(ren) on Mother's Day and Father shall have the child(ren) on
8	Father's Day.
9	Holidays not specifically time definite shall begin at a.m. and end at
10	on that same day. The parent who has the holiday will pick the child(ren) up and
	return the child(ren) to the other parent at the end of the scheduled time.
11	Should a holiday fall on a three-day weekend and it is the other parent's weekend to have
12	the child(ren), the three-day holiday will be handled as follows:
13	
14	
15	
16	shall have a block of time with the child(ren) for vacation  (Mother or Father or both)
17	purposes. That length of time period for vacation shall be
18	(one week, two weeks, three weeks, etc.) shall notify the other parent, in writing, at least
19	(Mother or Father) (days or weeks) in advance of the choice of time.
20	WHEREFORE, Petitioner prays that this Court enter an Order granting Petitioner's
21	requests regarding custody, visitation and support as set forth above.
22	DATE:
23	(Signature)
24	(Print name)
25	(Address)
26	<u> </u>
27	
28	(Telephone number)

## VERIFICATION AND ACKNOWLEDGEMENT

2	STATE OF NEVADA )
3	COUNTY OF) ss:
5 6	, being first duly sworn, under penalties of perjury, deposes and says:
7	I am the Plaintiff/Petitioner in the above-entitled action; that I have read the foregoing
8	document and am competent to testify of its contents of my own knowledge and the contents are
9	true of my own knowledge except for those matters stated therein on information and belief, and,
10	as to those matters, I believe them to be true.
1	
2	
3	(Signature)
4	SUBSCRIBED and SWORN to before me
	This day of,
5	
6	
.7	NOTARY PUBLIC
9	STATE OF NEVADA
20	COUNTY OF) ss:
21	
22	On this day of,, personally appeared before me, the
23	undersigned, a Notary Public in and for the County of, State of Nevada,
24	, personally known to me or proved to me, to be the
25	person whose name is subscried to the attached instrument who acknowledged to me that he/she
26	did so freely and voluntarily and for the uses and purposes herein stated.
27	NOTARY PUBLIC
28	11

Case No.	
Dept. No.	
IN THE TENTH JUDICIAL DISTRICT	COURT OF THE STATE OF NEVADA
IN AND FOR THE CO	UNTY OF CHURCHILL
Plaintiff,	
v.	SUMMONS
Defendant.	
YOU WITHOUT YOUR BEING HEARD UNL READ THE INFORMATION BELOW VERY (subdivisions, agencies, officers, employees, board member after service of this summons within which to file an answer.	CAREFULLY. (The state of Nevada, its political rs, commission members, and legislators, each has 45 days er to the complaint.)
A civil complaint has been filed by the plaintiff a document (see complaint). When service is by p the action. See Rules of Civil Procedure, Rule 4	publication, add a brief statement of the object of
of, this summons, exclusive of the day of a. File with the Clerk of this Court,	must do the following within 20 days after service service: whose address is shown below, a formal written ith the appropriate filing fees, in accordance with
the rules of the Court.	n the attorney or plaintiff whose name and address
Issued on behalf of plaintiff or plaintiff's attorne Name:	y: SUE SEVON CLERK OF THE COURT
Address:City, State, Zip:	By:
Phone No	Deputy Clerk Tenth Judicial District Court
	73 N. Maine Street, Ste B Fallon, NV 89460
	(775) 423-6080

1	Case No.:
2	Department No.:
3	
4	
5	
6	IN THE TENTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA,
7	IN AND FOR THE COUNTY OF CHURCHILL
8	<b>,</b>
9	,
10	Plaintiff,  GENERAL FINANCIAL DISCLOSURE
11	vs. FORM
12	
13	Defendant.
14	The judge uses this form to understand the financial position of the Plaintiff and the
15	Defendant. You must fill this form out completely and truthfully.
16	A. Personal Information:
17	What is your full name? (first, middle, last)
18	2. How old are you?
19	3. What is your date of birth?
20	4. What is your occupation?
21	5. What is your highest level of education?
22	B. Employment Information: ( check one)
23	1. Are you currently employed?
24	□ No
25	Yes If yes, what is the name of your employer?
26	
27	
28	

1			Date of Hire	Employer Name	Job Title	Work Schedule (days)	Work Schedule (Shift times)
2							
3							
4							
5		2.	Are you disa	ıbled? (⊠ check o	ne)		
6			☐ No				
7			☐ Yes	If yes, what is your	level of disability	?	
8			,	What agency certif	ied you disabled?		
9			,	What is the nature	of your disability?	·	
10							
11		3.		ment: If you are u han 2 years, comp			at your current
12			Prior Employ	/er:			
13			Date of Hire	 :			
14			Date of Terr	nination:			
15			Reason for I	_eaving:			
16	C A++	orna	ov Informatio	n: Complete the fo	allowing contonoo	0.	
17	C. All			•	· ·		half for this case
18		1.	An Attorney	· <u></u>		etained on my bel	ndii ioi inis case.
19		2.	•	the attorney has be	een paid a total of	f \$	
20		_	on my behal			•	
21				lit with my attorney		\$	
22				ve my attorney a to	·		
23		5.	I owe my price	or attorney at total	of <u>\$</u>		
24							
25							
26							
27							
28							

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2	0
2	1
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2	8

Sa	ction	1.	Personal Income	_
ЭE	CHON		Personal income	÷

Before you can complete the next section you need to figure out your frequency. Your pay frequency is determined by the number of times you are paid each month.

Pay Frequency Table

1.00 = Paid one time per month

2.00 = Paid two times per month

2.17 = Paid every two weeks

4.00 = Paid every week

#### A. Year-to-Date Income.

As of the pay period ending	
My Gross year to date pay is	

### B. Fill in the line that applies to you. Only complete line 1 OR line 2.

Line #	Income Question	Amount Earned		Number of Hours Worked Per Week		Pay Frequency (1.00, 2.00. 2.17, or 4.00)		Monthly Income
1	I am paid a hourly wage in the amount of	\$	Х		Х		=	
2	I am paid a base salary in the amount of	\$		N/A				

## C. File in the amount of money you receive each month for the following types of income:

Line #	Income Question	Amount Received Monthly
3	Annuity or Trust Income	\$
4	I regularly work overtime and each month earn an average of	\$
5	I receive bonuses, commissions, or tips in the amount of	\$
6	I receive a car, gas, housing, or other allowance in the amount of	\$
7	I receive spousal support in the amount of	\$
8	I receive social security in the amount of	\$
9	I receive social security disability in the amount of	\$
10	I receive workman's compensation benefits in the amount of	\$
11	I receive unemployment benefits in the amount of	\$
12	I receive pension or retirement income in the amount of	\$
13	I receive net rental income in the amount of	\$
14	I receive income from other sources in the amount of	\$
15	Total Income Received (add lines 3-14)	\$

## D. Total monthly income from all sources:

Line #		
16	Total From Line 1 OR 2	\$
17	Total From Line 15	\$
18	Total Gross Monthly Income (add lines 16-17)	\$

#### **Section 2: Personal Deductions**

# A. Fill in the amount of money that is take out of <u>every paycheck</u> for each of the following deductions:

B. Business Expenses: Attach an additional page if needed.

Type of Business Expense	Frequency	Amount	12 Month Average
Advertising			
Car and truck used for business			
Commissions, wages or fess			
Business Entertainment/Travel			
Insurance			
Legal and Professional			
Mortgage or Rent			
Other: (type of expense)			
Pension and profit-sharing plans			
Repairs and maintenance			
Supplies			
Taxes and Licenses			
Utilities			

#### **Section 5: Child Information**

A. Fill in the table below with the name and date of birth of each of your children, parent the child is living with, and whether the child is from this marriage or relationship?

Child's Name	Child's Date of Birth	Whom is child living with? (Mom, Dad, or Both)	Is this child from this relationship?	Has this child been certified as special needs/disabled?
1 <sup>st</sup>				
2 <sup>nd</sup>				
3 <sup>rd</sup>				
4 <sup>th</sup>				
5 <sup>th</sup>				

## B. Fill in the table below with the amount of money you spend <u>each month</u> on the following expenses for the children.

	Children's Expenses	1 <sup>st</sup> Child	2 <sup>nd</sup> Child	3 <sup>rd</sup> Child	4 <sup>th</sup> Child	5 <sup>th</sup> Child
1	Child Care	\$	\$	\$	\$	\$
2	Clothes, Shoes and Accessories	\$	\$	\$	\$	\$
3	Unreimbursed Medical Expenses	\$	\$	\$	\$	\$
4	Telephone and Internet	\$	\$	\$	\$	\$
5	Entertainment	\$	\$	\$	\$	\$
6	Food	\$	\$	\$	\$	\$
7	Insurance (other than health)	\$	\$	\$	\$	\$
8	Education Related Expenses	\$	\$	\$	\$	\$
9	Summer Camp/Programs	\$	\$	\$	\$	\$
10	Vehicle	\$	\$	\$	\$	\$
11	Transportation Cost for Visitation	\$	\$	\$	\$	\$
12	Total Monthly Expenses for Children (add lines 1-10)	\$	\$	\$	\$	\$

C. Fill in the table below with the names, ages, and the amount of money contributed by all persons living in the home over the age of eighteen. If more than 4 adult household members attached a separate sheet.

Name	Age	Person's Relationship to You (i.e. sister, friend, cousin, etc)	Monthly Contribution

Section 6: Personal Expenses: Fill in the table with the amount of money you spend each month on the following expenses and check whether you pay the expense for you, for the other party, or for both of you.

Expense	Monthly Amount of Expense	For Me	For the Other Party	For Both
Home				
Mortgage/Rent/Lease	\$			
Property Taxes	\$			
НОА	\$			
Home Owner's Insurance	\$			
Lawn Care	\$			
Pest Control	\$			
Pool Service	\$			
Security	\$			
Other	\$			
Utilities				
Water	\$			
Electric	\$			
Gas	\$			
Sewer	\$			
Home Phone	\$			
Internet/Cable	\$			
Other	\$			
Medical				
Health Insurance	\$			
Unreimbursed Medical Expenses	\$			
Other	\$			
Transportation				

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1	0
1	1
1	2
1	3
1	4
1	5
1	6
1	7
1	8
1	9
2	0
2	1
2	2
2	3
2	4
2	5
2	6
2	7

Car Loan/Lease Payment	\$	
Fuel	\$	
Auto Insurance	\$	
Other	\$	
Personal		
Food (groceries and restaurants)	\$	
Pets	\$	
Cell Phone	\$	
Membership Fees	\$	
Clothing, Shoes, etc	\$	
Dry Cleaning	\$	
Other	\$	
Debts		
Credit Card Payments	\$	
Child Support	\$	
Alimony/Spousal Support	\$	
Student Loans	\$	
Other	\$	
Total Monthly Expenses	\$	

A. Complete the chart below by listing all assets and debts, the value of each, the amount owed on each, and whose name the asset or debt is under (You, the Other Party, or Both)

	Total	1					
Line#	Description of Asset or Debt	Gross Value		Total Amount Owed		Net Value	Whose Name is on the Account? (Me, the Other Party or Both)
1		\$	-	\$	=	\$	
2		\$	-	\$	=	\$	
3		\$	-	\$	=	\$	
4		\$	-	\$	=	\$	
5		\$	-	\$	=	\$	
6		\$	-	\$	=	\$	
7		\$	-	\$	=	\$	
8		\$	-	\$	=	\$	
9		\$	-	\$	=	\$	
10		\$	-	\$	=	\$	
11		\$	-	\$	=	\$	
12		\$	-	\$	=	\$	
13		\$	-	\$	=	\$	
14		\$	-	\$	=	\$	
15		\$	-	\$	=	\$	
16		\$	-	\$	=	\$	
17		\$	-	\$	=	\$	
18		\$	-	\$	=	\$	
19		\$	-	\$	=	\$	
20		\$	-	\$	=	\$	
Total V	alue of Assets (add lines 1-20)	\$	-	\$	=	\$	

1	B. Complete this Chart by listing all of your unsecured debt, the amount owed on			
2	each account, and whose name the debt is under. If more than 5 unsecured			
3	debts, attach a separate sheet.			
4	Line	Description of Credit Card or Other unsecured Debt	Total Amount owed	Whose Name is on the Account? You, Your Spouse/Domestic Partner or
5	#			Both
6	1		\$	
7	2		\$	
8	3		\$	
9	4		\$	
10	5		\$	
11	Total U	nsecured Debt (add lines 1-5)	\$	
12				
13	  IMPOF	RTANT: Read the following paragraph of	arefully.	
14			•	
15	I am the ( $\boxtimes$ <i>check one</i> ) $\square$ Plaintiff $\square$ Defendant in the above action. I swear or affirm under			
16	penalty of perjury that I have read and followed all instructions in completing this Financial			
17	Disclosure Form. I understand that, by my signature, I guarantee the truthfulness of the			
18	information on this Form. I also understand that if I knowingly make false statements, I may be			
19	subject to punishment, including contempt of court.			
20	Subjec	t to purishment, including contempt of c	ourt.	
21				
22				
23				
24	Your	Signature	Date	
25				
26				
27				
28				
	1			

## **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 on the other party)  In the following way: (check the appropriate blank, and fill in the appropriate information)		
6	IF THE DOCUMENTS WERE SERVED BY MAIL:		
7 8	by placing a copy enclosed in a sealed envelope upon which first class postage was fully prepaid		
9 10	by placing a copy enclosed in a sealed envelope and mailing it certified, return receipt requested		
11	The envelope was addressed to:		
12	(Name) at		
13	(Address)		
14			
15			
16	And that there is regular communication by mail between the place of mailing and the place addressed.		
17	IF THE DOCUMENTS WERE PERSONALLY SERVED:		
18	by personally serving:		
19	(Name) at		
20	(Address)		
21	(Address)		
22			
23	DATED: This day of,		
24			
25			
26	(Signature of person who performed service)		
27			

1	Case No	
2	Dept. No	
3	The undersigned hereby affirms that this document does not contain the social security number of any person.	
4	social security number of any person.	
5		
6	IN THE TENTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA	
7	IN AND FOR THE COUNTY OF CHURCHILL	
8		
10		
11	Petitioner,	
12	vs ORDER FOR CUSTODY	
13 14	Respondent.	
15		
<ul><li>16</li><li>17</li></ul>	It appears to the satisfaction of the Court, from the(Name of Document filed)	
18	, filed, and good cause appearing, the (Date Filed)	
19	Court hereby finds as follows:	
20	1. That Petitioner is now and has been an actual bona fide resident of Churchill County,	
21	Nevada and has been actually domiciled therein for more than six weeks immediately	
22	preceding the commencement of this action;	
23	2. That the name(s), and date(s) of birth of the parties' child(ren) are:	
24 25	a. Name, date of birth;	
26	b. Name, date of birth;	
27	c. Name, date of birth;	
28		

1		d. Name, date of birth
1 2	The ch	nild(ren) habitual state of resident is Nevada.
3	3.	That the parties have never been married.
4	4.	That paternity of the child(ren) listed in paragraph 2 is not an issue. Paternity has been
5		established by:
6		CHECK ALL THAT APPLY
7		[ ] A court order filed in thecourt, case
8 9		number, on
10		AND/OR
11		[ ] An affidavit of Paternity filed with the Office of Vital Statistics more than six months
12		immediately preceding the filing of this action. The Affidavit of Paternity was not revoked
13		within six months from the date it was filed.
14		
15	5.	CHECK ONLY ONE BOX
16 17		[ ] That the parties are fit and proper person to be awarded joint legal custody of the
18		minor child(ren);
19		OR
20		[ ] That [ ] Plaintiff/ [ ] Defendant is a fit and proper person to be awarded sole legal
21		custody of the minor child(ren);
22	6.	CHECK ONLY ONE BOX
23		[ ] That the parties are fit and proper person to be awarded joint physical custody of the
24		minor child(ren). The parties should have visitation as set forth below;
<ul><li>25</li><li>26</li></ul>		OR
27		<del></del> -
28		
28		

1	[ ] That [ ] Plaintiff/[ ] Defendant is a fit and proper person to be awarded primary
2	physical custody of the minor child(ren). The parties should have visitation as set forth
3	below.
4	OR
5	[ ] That [ ] Plaintiff/[ ] Defendant is a fit and proper person to be awarded sole physica
6	custody of the minor child(ren);
7	7. That [ ] Plaintiff/ [ ] Defendant should pay child support in the amount of \$
8	per month;
9 10	8. CHECK ONLY ONE BOX
11	[ ] That the amount of child support in paragraph 7 is in compliance with NRS 125B.070
12	and is [ ] 18% [ ] 25% [ ] 29% [ ] 31% of [ ] Plaintiff's/ [ ] Defendant's gross
13	monthly income;
14	OR
15	OR .
16	[ ] That under the statutory formula, [ ] Plaintiff/ [ ] Defendant would be obligated to
17	pay \$ per month for child support. That amount should be changed
18	because (please see NRS 125B.080 for the only reason that you can change the amount
19	from the formula amount)
20	
21	This amount of child support meets the child(ren)'s financial needs;
22	9. That [ ] Plaintiff/[ ] Defendant should maintain medical and dental insurance for the
23	minor child(ren) through [ ] his/[ ] her employer, if available. Any deductible and
24	expenses not covered by insurance should be paid equally by both parties.
25	
26	Therefore, IT IS HEREBY ORDERED and (CHECK ONLY ONE BOX)
27	[ ] The parties are awarded joint legal custody of the minor child(ren).
28	

OR [ ] Plaintiff [ ] Defendant is awarded sole legal custody of the minor child(ren). IS IT FURTHER ORDERED that (CHECK ONLY ONE BOX) [ ] The parties are awarded joint physical custody of the minor child(ren). Plaintiff shall have visitation as follows: (must specify days and times) Defendant shall have visitation as follows: OR [ ] That [ ] Plaintiff/[ ] Defendant is awarded primary physical custody of the minor child(ren). [ ] Plaintiff/ [ ] Defendant shall have visitation as follows (must specify days and OR 

1	[ ] That [ ] Plaintiff/[ ] Defendant is awarded sole physical custody of the minor			
2	child(ren).			
3	IT IS F	IT IS FURTHER ORDERED that holiday visitation, when in conflict with the above,		
4	will take prece	will take precedence, and will be as follows: (must specify days and times)		
5	For eac	ch of the holidays listed below, Plaintiff shall have visitation in the even-numbered		
6	years and Defendant will have visitation in the odd-number years.			
7	a.	from		
8		Until		
9		from		
10		Until		
12		from		
13		Until		
14				
15		from		
16		Until		
17	For each of the	e holidays listed below, Defendant shall have visitation in the even-numbered years		
18	and Plaintiff w	rill have visitation in the odd-number years.		
19	a.	from		
20		Until		
21	b.	from		
22   23		Until		
23	c.	from		
25		Until		
26	d.	from		
27		Until		
28				

1	Plaintiff shall have visitation every year for the following holidays.		
2	a	from	
3	Until		
4	b	from	
5	Until		
6	c.	from	
7	Until		
8			
9		from	
10	Until		
11	Defendant shall have visitation eve	ry year for the following holidays.	
12	e	from	
13	Until		
14	f	from	
15 16	Until		
17	g	from	
18	Until		
19	h	from	
20	Until		
21		RED that [ ] Plaintiff/ [ ] Defendant will pay \$	
22		that [ ] Framen [ ] Detendant win pay \$	
23	per month for child support.		
24	IT IS FURTHER ORDER	<b>RED</b> that [ ] Plaintiff/ [ ] Defendant will maintain medical	
25	and dental insurance for the minor child(ren) through [ ] his/ [ ] her employer, if available. Any		
26	deductibles and expenses not cover	red by insurance will be paid equally by both parties.	
27			

IT IS FURTHER ORDERED that each party shall submit the information required in NRS 125B.055 on a separate form to the Court and the Welfare Division of the Department of Human Resources within ten days from the date this Decree is filed. Such information shall be maintained by the Clerk in a confidential manner and not part of the public record. The parties shall update the information filed with the Court and the Welfare Division of the Department of Human Resources within ten days should any of that information become inaccurate.

NOTICE IS HEREBY GIVEN of the following provision of NRS 125.510(6): PENALTY FOR VIOLATION OF ORDER: THE ABDUCTION, CONCEALMENT OR DETENTION OF A CHILD IN VIOLATION OF THIS ORDER IS PUNISHABLE AS A CATEGORY D FELONY AS PROVIDED IN NRS 193.130. NRS 200.359 provides that every person having a limited right of custody to a child or any parent having no right of custody to the child who willfully detains, conceals or removes the child from a parent, guardian or other person having lawful custody or a right of visitation of the child in violation of an order of this court, or removes the child from the jurisdiction of the court without the consent of either the court or all persons who have the right to custody or visitation is subject to being punished for a category D felony as provided in NRS 193.130.

**NOTICE IS HEREBY GIVEN** that the terms of the Hague Convention of October 25, 1980, adopted by the 14<sup>th</sup> Session of the Hague Conference on Private International Law, apply if a parent abducts or wrongfully retains a child in a foreign country. The parties are also put on notice of the following provisions in NRS 125.510(8):

If a parent of the child lives in a foreign country or has significant commitments in a foreign country:

- (a) The parties may agree, and the court shall include in the order for custody of the child, that the United States is the country of habitual residence of the child for the purposes of applying the terms of the Hague Convention as set forth in subsection 7.
- (b) Upon motion of one of the parties, the court may order the parent to post a bond if the court determines that the parent poses an imminent risk of wrongfully removing or concealing the child outside the country of habitual residence. The bond must be in an amount determined by the court and may be used only to pay for the cost of locating the child and returning him to his habitual residence if the child is wrongfully removed from or concealed outside the country of habitual residence. The fact that a parent has significant commitments in a foreign country does not create a presumption that the parent poses an imminent risk of wrongfully removing or concealing the child.

	NTR 447 G 400		
1	NRS 125C.200 regarding relocation with minor children:		
2	If custody has been established and the custodial parent intends to move his residence to place outside of this State and to take the child with him, he must, as soon as possible and before the planned move, attempt to obtain the written consent of the non-custodial parent to move the child from this State. If the non-custodial parent refuses to give that consent		
3			
4	the custodial parent shall, before he leaves the State with the child, petition the court for		
5	permission to move the child. The failure of a parent to comply with the provisions of this section may be considered a factor if a change of custody is requested by the non-custodial parent.		
7	NOTICE IS HEREBY GIVEN that they are subject to the provisions of NRS 31A and		
8	125.45 regarding the collection of delinquent child support payments.		
9	NOTICE IS HEREBY GIVEN that either party may request a review of child support		
10	pursuant to NRS 125B.145.		
11			
12			
13			
14	Dated: this day of, 20		
15			
16			
17	DISTRICT JUDGE		
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			

1	Case No.
2	Dept. No.
3 4	The undersigned hereby affirms that this document does not contain the social security number of any person.
5	
6	IN THE TENTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
7	IN AND FOR THE COUNTY OF CHURCHILL
8	
9	
10	Plaintiff,
11	v. AFFIDAVIT OF SERVICE
12	, , , , , , , , , , , , , , , , , , ,
13	Defendant.
14 15	STATE OF)
16 17	)ss: County of)
18	I,, do hereby swear under penalty of (Name of person making service)
19	Perjury that the assertions of this affidavit are true.
20	1. That I am: (check the appropriate blank)
21	1. That I am. (check the appropriate blank)
22	a party in this action and am appearing in proper person.
23	
24	and am over the age of 18 years.
25	and an over the age of 10 years.
26	2. That on the day of,, I served a true and,, I served a true and, I served a true and, I served a true and, I served a true and
27	(date) (month) (year)
28	

	document/s entitled:(Clearly list all documents you served on the other part
	ay: (check the appropriate blank, and fill in the appropriate information
IF THE DOCUM	ENTS WERE SERVED BY MAIL ON THE OTHER PARTY- OR S LAWYER – FILL IN THE FOLLOWING:  by placing a copy enclosed in a sealed envelope upon which first clapostage was fully prepaid
	by placing a copy enclosed in a sealed envelope and mailing it certi return receipt requested
The envelop	pe was addressed to:
(Name)	at
(Address)	
	ENTS WERE PERSONALLY SERVED ON THE OTHER PARTY RTY'S LAWYER –FILL IN THE FOLLOWING:
	hy nerconally cerving:
(Name)	by personally serving:
(Name) (Address)	
(Address) Subscribed and Sw	vorn to before me
(Address) Subscribed and Sw	
(Address) Subscribed and Sw	vorn to before me y of, (print name)
(Address) Subscribed and Sw Thisday	vorn to before me y of,  (print name)
(Address) Subscribed and Sw Thisday	vorn to before me y of,  (print name)

OF THE STATE OF NEVADA
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FCHURCHILL
SUMMONS
E COURT MAY DECIDE AGAINST RESPOND WITHIN 20 DAYS.  LLY. (The state of Nevada, its political on members, and legislators, each has 45 days applaint.)
u for the relief as set forth in that , add a brief statement of the object of
e following within 20 days after service dress is shown below, a formal written ropriate filing fees, in accordance with ney or plaintiff whose name and address
application of the plaintiff and this ef demanded in the complaint
SUE SEVON CLERK OF THE COURT
Ву:
Deputy Clerk Tenth Judicial District Court
73 N. Maine Street, Ste B Fallon, NV 89460
(775) 423-6080
E T C T L

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	by personally serving:
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