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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

_____ ,

Plaintiff

vs

**PETITION TO DOMESTICATE
FOREIGN DECREE FOR ENFORCEMENT
AND/OR MODIFICATION**

_____ ,

Defendant,

_____ /

_____, acting in proper person, petitions this Court as
(Your name)

follows:

I.

_____, is a resident of _____, State of
(Your Name) (County in which you live)

_____, and has resided in that State since _____.
(State where you live) (date you moved)

II.

_____, is a resident of _____, State of
(Other party's Name) (County in which you live)

_____, and has resided in that State since _____.
(State where you live) (date you moved)

since _____.
(how long the other party has lived at their present address)

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III.

A _____ was issued from
(title of Decree of Order to be domesticated)

_____ on
(The Court the Decree of Order was issued from and the location of the Court)

_____, case number _____, a copy of which is
(date Decree or Order was issued) (case number)

attached hereto as Exhibit A.

Said Decree/Order has been duly registered with the Clerk of the Court in
_____ County, Registration Number _____, and a
(Churchill or Lyon)

certified copy of the Decree/Order is on file therein.

The other party was notified of the registration by _____ on
(mail or personal service)

_____. (See Exhibit B)
(date of Notice)

IV.

There is/are _____ minor child(ren) for whom provisions were made within the
Decree/Order. That/Those child(ren) is/are:

<u>Name</u>	<u>Age</u>	<u>Date of Birth</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

The child(ren) reside(s) at _____, in the City
(address of the Child(ren)'s residence)
of _____, State of _____, and have resided at that
(City in which child(ren) reside) (State where child(ren) reside)
address for a period of _____ (years/month).

Prior to that, the children resided at _____, in the City
(address of the Child(ren)'s residence)

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I request that this Court enter an Order granting me the following:

List specifically and in detail only what you want the Court to order. At this point, do not explain why you want your changes ordered.

This Petition is made for the following reasons:

Fully explain why you believe you should be granted your request(s). Be specific and give details.

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(If more room is needed, you may attach additional sheets of paper. Be sure to write only on one side of any additional sheets of paper.)

DATE: _____

(Signature)

(Print name)

(Address)

(Telephone number)

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VERIFICATION AND ACKNOWLEDGEMENT

STATE OF NEVADA)
) ss:
COUNTY OF _____)

_____, being first duly sworn, under penalties of perjury, deposes
(Your name)
and says:

I am the Plaintiff/Petitioner in the above-entitled action; that I have read the foregoing document and am competent to testify of its contents of my own knowledge and the contents are true of my own knowledge except for those matters stated therein on information and belief, and, as to those matters, I believe them to be true.

(Signature)

SUBSCRIBED and SWORN to before me

This ____ day of _____, _____.

NOTARY PUBLIC

STATE OF NEVADA)
) ss:
COUNTY OF _____)

On this ____ day of _____, _____, personally appeared before me, the undersigned, a Notary Public in and for the County of _____, State of Nevada, _____, personally known to me or proved to me, to be the person whose name is subscribed to the attached instrument who acknowledged to me that he/she did so freely and voluntarily and for the uses and purposes herein stated.

NOTARY PUBLIC

1 Case No.

2 Dept. No.

3 IN THE TENTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
4 IN AND FOR THE COUNTY OF CHURCHILL

5 _____,
6 Plaintiff,

7 v.

SUMMONS

8 _____,
9 Defendant.

10 TO THE DEFENDANT: YOU HAVE BEEN SUED. THE COURT MAY DECIDE AGAINST
11 YOU WITHOUT YOUR BEING HEARD UNLESS YOU RESPOND WITHIN 20 DAYS.
12 READ THE INFORMATION BELOW VERY CAREFULLY. *(The state of Nevada, its political*
13 *subdivisions, agencies, officers, employees, board members, commission members, and legislators, each has 45 days*
after service of this summons within which to file an answer to the complaint.)

14 A civil complaint has been filed by the plaintiff against you for the relief as set forth in that
15 document (see complaint). When service is by publication, add a brief statement of the object of
the action. See Rules of Civil Procedure, Rule 4 (b).

- 16 1. If you intend to defend this lawsuit, you must do the following within 20 days after
17 service of, this summons, exclusive of the day of service:
 - 18 a. File with the Clerk of this Court, whose address is shown below, a formal written
19 answer to the complaint, along with the appropriate filing fees, in accordance with
20 the rules of the Court.
 - 21 b. Serve a copy of your answer upon the attorney or plaintiff whose name and
22 address is shown below.
- 2. Unless you respond, a default will be entered upon application of the plaintiff and this
Court may enter a judgment against you for the relief demanded in the complaint.

Dated this _____ day of _____, 20__.

24 Issued on behalf of plaintiff or plaintiff's attorney:

25 Name: _____

26 Address: _____

27 City, State, Zip: _____

28 Phone No. _____

SUE SEVON
CLERK OF THE COURT

By: _____
Deputy Clerk

Tenth Judicial District Court
73 N. Maine Street, Ste. B
Fallon, NV 89406
(775) 423-6088

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Case No.

Dept. No.

The undersigned hereby affirms that
this document does not contain the
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IN THE TENTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
IN AND FOR THE COUNTY OF CHURCHILL

Plaintiff,

v.

REQUEST FOR SUBMISSION

Defendant.

_____ /

I, _____, the _____ in this matter,
(Your name) (Plaintiff or Defendant)

request the _____ filed on _____
(Title of document you want submitted to the Court) (Date document filed)

in this case be submitted to the Judge for consideration and determination.

Date: _____

(Signature)

(Print Name)

(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 on the other party)

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)