1768		
Name		
Address		
City/State/Z	.ip 	
Telephone		
E-mail		
	N THE SECOND JUDICIAL DISTRI NEVADA IN AND FOR THE	
	TEVASATIVATE FOR THE	0.001111 0.101001
IN THE MA	TTER OF THE ESTATE OF	
		Case No.:
	Deceased.	Dept. No.: PR
	GENERAL	CLAIM
Claim of	,,	Address
The		amed deceased presents this claim agains
	ed, a sworn statement ¹ of which is a	
		\$
·		
¹ Please refer	to NRS 147.070 et. seq.	

1	STATE OF NEVADA)	
2) ss. COUNTY OF WASHOE)	
3	The undersigned, being duly sworn, says: that he/sh	e is the
5	creditor named herein and who makes the foregoing claim a	against the Estate of
6	, deceased, that the amount of said claim, t	o wit: the sum of
7	Dollars, is justly due to said claimant, that no payments hav	e been made which are not
8	credited, and there are no offsets to the knowledge of this a	ffiant; that affiant has personal
9	knowledge of all the facts of said claim.	
10 11		
12		Signature of affiant
13	SUBSCRIBED AND SWORN to before me	
14	This day of, 20	
15		
16	Notary Public	
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റര I	II	

SECOND JUDICIAL DISTRICT COURT COUNTY OF WASHOE, STATE OF NEVADA

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AFFIRMATION Pursuant to NRS 239B.030 and 603A.040

4	Pursuant to NRS 239B.030 and 603A.040
_	The undersigned does hereby affirm that the preceding document,
5	
6	
7	
8	(Title of Document)
9	filed in case number:
0	Document does not contain the personal information of any person
	-OR-
2 3	Document contains the social security number of a person as required by:
4	A specific state or federal law, to wit:
5	
6	(State specific state or federal law)
	-or-
7 8	For the administration of a public program
9	-or-
20	For an application for a federal or state grant
1 1	-or-
22	Confidential Family Court Information Sheet
23	(NRS 125.130, NRS 125.230 and NRS 125B.055)
.3 !4	Doto
	Date:(Signature)
25	
26	(Print Name)
7	
28	(Attorney for)
- 1	