

1 Code: 3720

Name: _____

2 Address: _____

3 Telephone: _____

Email: _____

4 Self-Represented Litigant

5 IN THE FAMILY DIVISION
6 OF THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
7 IN AND FOR THE COUNTY OF WASHOE

8
9 _____,
Plaintiff / Petitioner / Joint Petitioner,

Case No. _____

10 vs.

Dept. No. _____

11
12 _____,
Defendant / Respondent / Joint Petitioner.

13 PROOF OF SERVICE

14
15 I served a true and correct copy of CASE MANAGEMENT CONFERENCE STATEMENT
16 upon the following people:

17 1. Name: _____ Date: _____

18 By: Service by eFlex

Personal Service

19 Certified mail, return receipt attached

U.S. Mail, postage prepaid

20 Other: _____

21 Address where service occurred, if applicable: _____

22 If more room is needed, attach additional sheets.

23 A copy of this Proof of Service has been electronically served, mailed, or personally delivered
24 to all parties or their lawyer.

25 This document does not contain the personal information of any person as defined by
26 NRS 603A.040.

27 Date: _____

Your Signature: _____

28 Print Your Name: _____