

1 Code: 3720

2 Name: _____

3 Address: _____

4 Telephone: _____

5 Email: _____

6 Self-Represented Litigant

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

10 _____,
11 Plaintiff / Petitioner / Joint Petitioner,

12 vs.

Case No. _____

13 _____,
14 Defendant / Respondent / Joint Petitioner. /

Dept. No. _____

15 PROOF OF SERVICE

16 I served a true and correct copy of my TRIAL STATEMENT upon:

17 1. Name (of person served): _____

18 2. Date of Service: _____

19 3. By: Service by eFlex Personal Service

20 Certified mail, return receipt attached U.S. Mail, postage prepaid

21 Other: _____

22 Address where service occurred, if applicable: _____

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 DATED this (day) _____ day of (month) _____, 20____.

28 Submitted By: (Your signature) _____

(Print your name) _____