

1 Code: 1520
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 _____, Case No. _____
11 Plaintiff / Petitioner / Joint Petitioner, Dept. No. _____
12 vs. _____
13 _____,
14 Defendant / Respondent / Joint Petitioner. _____ /

15 DECLARATION OF MOVING PARTY

16 **This form must be fully completed and filed along with a Motion for an Order to**
17 **Enforce and/or for an Order to Show Cause Regarding Contempt, even if it contains the**
18 **same or similar information as the Motion.**

19 If more room is needed for ANY section, attach additional sheets.

20 I declare under penalty of perjury that:

- 21 1. The Court entered a written order titled (*title of order*) _____
22 _____ on (*date of order: month, day, and year*) _____,
23 which requires the other party to do the following (*state exactly what the order requires the*
24 *other party to do*):
25 _____
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This requirement can be found in the order on page(s) _____, lines _____.

2. The Order was served on the other party by *(state how the party was served with the Order, such as through eFlex, personal service, U.S. Mail, etc.)* _____ on the following date *(date of service: month, day, and year)* _____.

3. At an evidentiary hearing, I would testify under oath to the following facts showing the other party has violated the Court’s Order *(state exactly what the other party has done to violate the order based on your own personal knowledge of the violations, including as many specific details as possible such as dates. For example, “On February 1, 2022, the opposing party refused to return the children to me on my scheduled custodial day” or “The opposing party has not paid his monthly alimony obligation since January 31, 2021.”)*:

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I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct. I understand a person who commits perjury is subject to being punished for a category D felony, as provided in NRS 199.120 and NRS 193.130(d).

Date: _____ Your Signature: _____

Print Your Name: _____

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