

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 the (*name of document(s) served*) \_\_\_\_\_

17 \_\_\_\_\_ upon:

18 1. Name (*of person served*): \_\_\_\_\_

19 2. Date of Service: \_\_\_\_\_

20 3. By:  Service by eFlex  Personal Service  Certified mail, return receipt attached

21  U.S. Mail, postage prepaid  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*) \_\_\_\_\_