

COURT CODE: 1395

Your Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____

Email Address: _____

Self-Represented

**IN THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
IN AND FOR THE COUNTY OF WASHOE**

In the Matter of the Guardianship of the:

- Person
- Estate
- Person and Estate

of:

(name of person who has a guardian)

A Protected Person.

CASE NO.: _____

DEPT: _____

CITATION TO APPEAR AND SHOW CAUSE

TO: *(protected person's name)* _____

(protected person's attorney's name) _____

(guardian's names) _____

ALL KNOWN RELATIVES OF THE PROTECTED PERSON:

(Write each relative's name on a separate line) _____

**ANY PERSON HAVING THE CARE, CUSTODY, AND CONTROL OF THE
PROTECTED PERSON**

PLEASE TAKE NOTICE that the following person(s) (*first petitioner's name*) _____ and (*second petitioner's name, or "n/a" if none*) _____ have filed a petition asking the court to (*check one*)

- Petition to Transfer Adult Guardianship to Nevada;
- Other: (*name of the petition filed*) _____

DATE AND TIME OF COURT APPEARANCE
(*the court clerk will fill this out*)

YOU ARE DIRECTED TO APPEAR AND SHOW CAUSE why the court should not grant the relief requested on the:

_____ day of _____, 20____, at _____ a.m. p.m., at the courthouse of the Second Judicial District Court, located at 75 Court Street, Reno, Nevada 89501. **IMPORTANT NOTICE: due to the ongoing COVID-19 pandemic, this hearing will occur using Zoom. The Zoom link will be posted on <https://www.washoecourts.com/OnlineHearings/GeneralJurisdiction> and may also be obtained by contacting AdultGuardianship@washoecourts.us.**

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

DATED this _____ day of _____, 20____.

ALICIA L. LERUD
CLERK OF COURT

BY: _____
DEPUTY CLERK

NOTE: The guardian(s) and the petitioner(s) must attend the scheduled hearing; all other interested parties do not need to attend unless they want to oppose the relief requested.