COURT CODE:	
Your Name:	
Address:	
City, State, Zip:	
Telephone:	
Email Address:	
Self-Represented	
	T COURT COUNTY, NEVADA
In the Matter of the Guardianship of the:	
□ Person	CASE NO.:
□ Estate	
☐ Person and Estate	DEPT:
of:	
(name of person who has a guardian) A Protected Person.	
NOTICE O	F HEARING
PLEASE TAKE NOTICE that (petition	ner's name)
	, filed in the
	<i>ion</i>);
	the (court clerk will insert details) day
	\square a.m. / \square p.m., at the courthouse of
	ct Court, located at (insert full address):
	, Courtroom number
Further details concerning these matters	can be obtained by reviewing the documents on
file at the office of the Clerk of Court. You may	appear at the hearing date above.
DATED (month)	(day), 20
Submitted By: (your sign	ature) >
	r name)