

1 Code:
 2 (Your name) _____
 3 (Address) _____
 4 (Telephone) _____
 5 In Proper Person

6 IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
 7 IN AND FOR THE COUNTY OF _____

8 In the Matter of the Guardianship)
 9 of the Person only)
 10 Estate only)
 11 Person and Estate)
 12 of:)
 13 _____)
 14 _____)
 15 _____)
 16 A(n) Minor.)
 17 Adult.)

CASE NO. _____
 DEPT. NO. _____

18 **GENERAL LETTERS OF GUARDIANSHIP**

19 State of Nevada)
 20 County of _____)
 21 On (month) _____ (day) _____ (year) _____, the (name of court)
 22 _____ Judicial District Court, (name of county) _____
 23 County, State of Nevada, appointed (name of guardian) _____
 24 guardian of the (check one) person estate person and estate for (ward's name)
 25 _____ a(n) (check one) adult minor, that the named
 26 _____
 27
 28

1 guardian has qualified and has the authority and shall perform the duties of guardian of the (check
2 one person estate person and estate for the named ward as provided by law.

3 In Testimony Whereof, I have hereunto subscribed my name and affixed the seal of the court
4 at my office on _____ (month) _____ (day) _____ (year).

5 (Name of Clerk of Court) _____ CLERK OF COURT

6 By: _____
7 Deputy Clerk Date

8 OATH

9 I, _____, residing at _____
10 _____, whose mailing address is _____

11 _____
12 (mailing address if different from residence)

13 solemnly affirm that I will faithfully perform according to law duties of Guardian and that any
14 matters stated in any petition or paper filed with the Court are true of my own knowledge or if any
15 matters are stated on information or belief, I believe them to be true.

16 _____
17 Guardian

18 SUBSCRIBED AND AFFIRMED before me by (Guardian's name) _____

19 on the _____ day of _____, _____.

20 (name of Clerk of Court) _____ CLERK OF COURT

21 By: _____
22 Deputy Clerk

23 (OR)

24 _____
25 Notary Public

26 County of: _____

27 State of: _____

28

1 Code:
 2 (Your name) _____
 3 (Address) _____
 4 _____
 5 _____
 6 (Telephone) _____
 In Proper Person

7 IN THE _____ DISTRICT COURT OF THE STATE OF NEVADA
 8
 9 IN AND FOR THE COUNTY OF _____

10 In the Matter of the Guardianship)
 of the Person only)
 11 Estate only)
 12 Person and Estate)
 13 of:)
 14 _____)
 15 _____)
 16 _____)
 17 A(n) Minor.)
 18 Adult.)
 19 _____)

CASE NO. _____
 DEPT. NO. _____

20
 21 **NOTICE OF ENTRY OF ORDER**

22 **TO:** The persons listed on Exhibit 1, attached hereto
 23 **PLEASE TAKE NOTICE** that (title on Order) _____
 24 was entered in the above-entitled matter on (date) _____, a copy of
 25 which is attached hereto.

26 DATED this _____ day of _____, _____.

27 _____
 (Your signature)
 28

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

CERTIFICATE OF MAILING

I hereby certify that service of the Notice of Entry of Order was made this ____ day of _____, _____, by depositing copies of same in United States mail in (city) _____, Nevada, addressed to the persons listed on Exhibit 1, attached hereto.

(Your signature)

///
///
///
///
///
///
///
///
///
///
///
///
///
///
///
///
///
///
///
///

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

EXHIBIT 1

<u>Name of Person/Organization Entitled to Notice</u>	<u>Relationship to Ward</u>	<u>Address</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____
11. _____	_____	_____
12. _____	_____	_____

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

Name of Person/Organization
Entitled to Notice

Relationship to Ward

Address

13.	_____	_____	_____
14.	_____	_____	_____
15.	_____	_____	_____
16.	_____	_____	_____
17.	_____	_____	_____
18.	_____	_____	_____
19.	_____	_____	_____
20.	_____	_____	_____
21.	_____	_____	_____
22.	_____	_____	_____
23.	_____	_____	_____
24.	_____	_____	_____

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

Name of Person/Organization
Entitled to Notice

Relationship to Ward

Address

25.	_____	_____	_____
26.	_____	_____	_____
27.	_____	_____	_____
28.	_____	_____	_____
29.	_____	_____	_____
30.	_____	_____	_____
31.	_____	_____	_____
32.	_____	_____	_____
33.	_____	_____	_____
34.	_____	_____	_____
35.	_____	_____	_____
36.	_____	_____	_____

1 Code:
 2 Your name _____
 3 Address _____
 4 Telephone _____

In Proper Person

6 IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
 7 IN AND FOR THE COUNTY OF _____

8 In the Matter of the Guardianship of)
 9 the estate,) CASE NO. _____
 10 the person and the estate,) DEPT. NO. _____
 11 _____)
 12 A(n) Adult Minor.)

14 **VERIFIED INVENTORY**

16 **I. RECORD OF VALUE**

17 Note: There are two parts to this verified inventory. Assets should only be listed once, either in
 18 the Record of Value section or the Appraised Inventory section. The asset may not appear in
 19 both sections.

19 **Designate Nature of Ward's Interest & % of Ownership; (C) Community; (S) Separate; I.E. 50 % (C) or (S)

	a) Asset Value	b) Amount Owed (mortgage, lien, loan)	c) Net Asset Value [a-b=c]	d) Ward's** Interest	e) Value of Ward's Interest [cxd=e]
<u>A. REAL PROPERTY</u>					
Description ¹					
Item					
1. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
2. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
3. _____	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____

28 ¹ Real property is real estate, whether it is undeveloped land or developed commercial, industrial, or residential land. The County assessed value is acceptable until the property is to be sold.

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

B. <u>PERSONAL PROPERTY</u>					
Cash, Checking and Savings Accounts, other Accounts (List)					
4.	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
5.	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
6.	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
Other Interest, Etc. (Describe) ²					
7.	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
8.	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
Notes, Bonds, Securities, Debts, Etc., (List Name & Address of Debtor, Date Debt Originated, Endorsement W/Date, Estimate As to Amount Collectible) ³					
9.	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
10.	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
11.	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
12.	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
Vehicles (Describe)					
13.	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
14.	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
15.	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
Miscellaneous Personal Property (Describe) ⁴					
16.	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
17.	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
18.	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____
19.	\$ _____	\$ _____	\$ _____	_____% ()	\$ _____

² Interests in partnerships, LLCs, corporations, joint ventures, trusts, etc. Book value may be acceptable to the court until the interest is to be sold, disposed or transferred. The Guardian may need to request instructions from the court on how the value of the Ward's interest is to be listed on this document.

³ Additional items to be listed in this category are: deeds of trust, rents, royalties, life insurance policies with cash values.

⁴ This category includes household items, collectibles and antiques. If the aggregate(total) replacement value exceeds \$5,000.00 an appraisal is required.

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

VERIFIED RECORD OF VALUE (IN LIEU OF APPRAISEMENT)

I, the undersigned, solemnly affirm that Items listed above in section "I. Record of Value" of this Verified Inventory of the Estate have been examined by me and that I have written the value of these items on the Verified Inventory at the value shown opposite thereof.

I report that the total value of the times listed in this section of this Verified Inventory have a value of \$ _____ dollars and cents.

Guardian

Co-Guardian

II. APPRAISED INVENTORY

	a) Asset Value	b) Amount Owed (Mortgage, lien, loan)	c) Net Asset Value (a-b=c)	d) Ward's** Interest	e) Value of Ward's Interest [cxd=e]
<u>A. REAL PROPERTY</u>					
Description					
1. _____	\$ _____	\$ _____	\$ _____	____ % ()	\$ _____
2. _____	\$ _____	\$ _____	\$ _____	____ % ()	\$ _____
3. _____	\$ _____	\$ _____	\$ _____	____ % ()	\$ _____
<u>B. PERSONAL PROPERTY</u>					
4. _____	\$ _____	\$ _____	\$ _____	____ % ()	\$ _____
5. _____	\$ _____	\$ _____	\$ _____	____ % ()	\$ _____
6. _____	\$ _____	\$ _____	\$ _____	____ % ()	\$ _____
7. _____	\$ _____	\$ _____	\$ _____	____ % ()	\$ _____
8. _____	\$ _____	\$ _____	\$ _____	____ % ()	\$ _____
9. _____	\$ _____	\$ _____	\$ _____	____ % ()	\$ _____

**Designate Nature of Ward's Interest & % of Ownership; (C) Community; (S) Separate; I.E. 50 % (C) or (S)

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

OATH OF APPRAISER, CPA OR EXPERT IN VALUATIONS

STATE OF NEVADA)
)
COUNTY OF _____)

I, the undersigned, appraiser of the estate of the above-named ward, solemnly affirm that I will truly, honestly, and impartially appraise the inventory of the Estate to the best of my knowledge and ability, and the appraisal was completed in compliance with NRS 159.0865.

EXECUTED this _____ day of _____, 20____.

SIGNED and SWORN to before me

Appraiser's signature

by (Appraiser's name) _____

Appraiser's name (print)

on the ____ day of _____, ____.

NOTARY PUBLIC

Appraiser's address

APPRAISAL

I, the undersigned appraiser, CPA or expert in valuation of the Estate of the above-named ward, hereby certify that the items listed in the Verified Inventory under section "II. Appraised Inventory" have been personally examined by me or my authorized agent, and that I appraised these items at the value shown opposite thereof. I report that the total value of the times listed in this section of the Verified Inventory have a value of \$ _____ dollars and cents.

Appraiser

Date

(Repeat Oath & Certification for Each Appraiser; Attach Separate Sheets If Necessary)

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

OATH OF GUARDIAN

STATE OF NEVADA)
)
COUNTY OF _____)

I, the undersigned guardian of the Estate of the above-named ward, solemnly affirm that the foregoing Verified Inventory (Record of Value and/or Verified Appraisals) is a true statement of all assets of the Estate having come into my possession or for which I have knowledge, and the inventory includes all money and claims of the ward, including claims, if any, the Ward has against me.

Guardian

SIGNED and SWORN to before me by (Guardian's name) _____
on the ____ day of _____, ____.

NOTARY PUBLIC

OATH OF CO-GUARDIAN

STATE OF NEVADA)
)
COUNTY OF _____)

I, the undersigned co-guardian of the Estate of the above-named ward, solemnly affirm that the foregoing Verified Inventory (Record of Value and/or Verified Appraisals) is a true statement of all assets of the Estate having come into my possession or for which I have knowledge, and the inventory includes all money and claims of the ward, including claims, if any, the Ward has against me.

Co-Guardian

SIGNED and SWORN to before me by (Co- Guardian's name) _____
on the ____ day of _____, ____.

NOTARY PUBLIC

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

VERIFICATION OF GUARDIAN

STATE OF NEVADA)
)
COUNTY OF _____)

The above guardian being duly sworn, states that he or she is the guardian of the estate of the above-named ward, has read the above and foregoing Record of Value, know the contents thereof, and it is true of his or her own knowledge, except for those matters therein stated on information and belief, and as for those matters believed them to be true.

Guardian

SIGNED and SWORN to before me by (Guardian's name) _____

on the ____ day of _____, ____.

NOTARY PUBLIC

VERIFICATION OF CO-GUARDIAN

STATE OF NEVADA)
)
COUNTY OF _____)

The above co-guardian being duly sworn, states that he or she is the co-guardian of the estate of the above-named ward, has read the above and foregoing Record of Value, know the contents thereof, and it is true of his or her own knowledge, except for those matters therein stated on information and belief, and as for those matters believed them to be true.

Co-Guardian

SIGNED and SWORN to before me by (Co- Guardian's name) _____

on the ____ day of _____, ____.

NOTARY PUBLIC

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

Code:
(Your name) _____

(Address) _____

(Telephone) _____

In Proper Person

IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA

IN AND FOR THE COUNTY OF _____

In the Matter of the Guardianship of
 the person
 the estate
 the person and the estate,

CASE NO. _____

DEPT NO. _____

of:

an Adult.

STATE OF NEVADA)

COUNTY OF _____)

REPORT OF THE GUARDIAN OF THE ADULT PERSON

_____ through _____
BEGINNING DATE **ENDING DATE**

I, (name of guardian) _____ am the Guardian of the Person of
(name of ward) _____. My annual report is as follows:

I.

General Information for the Ward and Guardian(s)

Ward's date of birth: _____

Ward's address: _____

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

Ward's phone number: _____

Ward's current physician (address and phone number) _____

Name(s) and addresses of guardian(s) _____

Guardian(s) relationship to ward: _____

Number of times guardian(s) visited the ward in the last year: _____

The ward (check one) does/ does not continue to need a guardian. (Explain) _____

II.

Physical and Mental Condition of the Ward

(A) The ward currently lives in a (check one) private home boarding home nursing home other (explain) _____

(B) The ward's facility provides for the ward's daily living and recreational needs by (describe) _____

(C) The ward (check one)

does not attend daily or regular weekly outings, training or work because:

attends daily or regular weekly outings, training or work as follows:

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

(D) The activities described in (C), above (check one) do/ do not meet the ward's needs. (Explain, if necessary) _____

(E) The ward has had the following medical care during the last year: _____

(F) The ward was last seen by a physician on (date) _____

(G) The ward's current physical health is Good Fair Poor (please describe)

(H) There (check one) have have not been any substantial changes in the ward's mental abilities or health in the last year. (If there have been substantial changes, explain.)

III.

Miscellaneous Information

(A) (Check one)

The ward does not have any assets or property and does not have annual income more than \$5,000.

The ward does have assets or property or an annual income more than \$5,000. (name) _____ is responsible for these assets. (Note: you may need to

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

file an accounting. See accounting instructions and form in a separate packet and NRS 159.177-
NRS 159.181 and NRS 159.076.)

(B) (Check one)

The ward does not receive any county services.

The ward receives the following county services:

(C) (Check one)

The ward does not receive any other services.

The ward receives the following non-county services:

(D) I would like the court to know the following: (briefly state anything else that you
would like the court to know, or write "N/A")

1 SIGNED and SWORN to before me by (name of guardian) _____

2 on the ____ day of _____, ____.

3

4

NOTARY PUBLIC

5

OR

6

7

DEPUTY CLERK

8

OR

9

10

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE
AND CORRECT.

11

Executed on (date) _____ (signature) _____

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

Code:
 (Your name) _____
 (Address) _____

 (Telephone) _____

In Proper Person

IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
 IN AND FOR THE COUNTY OF _____

In the Matter of the Guardianship)
 of the Estate)
 Person and Estate)
 of:)
 _____)
 A(n) Minor)
 Adult)
 _____)

CASE NO. _____
 DEPT. NO. _____

ACCOUNTING

[First, Second, Third, _____] or Final¹ *Circle of fill-in appropriate number*

_____ through _____
 BEGINNING DATE ENDING DATE

DO NOT FILL IN GRAY AREAS

RECAPITULATION (RECAP)	Subtotal	Total
Beginning balance (balance brought forward from inventory or previous accounting)		\$
+ Total from Schedule A	\$	
- Total from Schedule B	\$	
Ending Balance for this accounting period		\$

¹ Final is circled if the guardianship has been terminated or this is the last accounting of this guardian.

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

Schedule A	Subtotal	Total
Income/ Receipts/Increases in Value		
Total Income (from <i>Worksheet 1</i>):	\$	
Receipts or Refunds Received (from <i>Worksheet 2</i>):	\$	
Increases in Value of Assets (from <i>Worksheet 3</i>):	\$	
Gains of Sales of Assets (from <i>Worksheet 4</i>):	\$	
Total Increase to Estate:		\$

Worksheet 1, Income/Interest²

Description	Amount
	\$
	\$
	\$
	\$
	\$
TOTAL	\$

Worksheet 2, Receipts/Refunds Received³

Description	Amount
	\$
	\$
	\$
	\$
TOTAL	\$

² Income/Interest may come from, but is not limited to: social security; wages from employment; and interest income.

³ Receipts/Refunds may include, but are not limited to: retirement payments, annuity payments, rental receipts, loan payment receipts, collected receivables, refunds on utility deposits, refunds on home/apartment rental deposits.

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

Worksheet 3, Increases in Value of Assets⁴

Description	Amount
	\$
	\$
	\$
	\$
TOTAL	\$

Worksheet 4, Gains on Sales of Assets⁵

Description	a) Sales Price	b) Recorded Value	c) Amount of Gain [a - b = c]
			\$
			\$
			\$
			\$
			\$
TOTAL			\$

⁴ Increases in values of assets may include, but are not limited to: real property, antiques, collectibles; gains in value of investment accounts, stocks, or other securities.

⁵ If an asset was sold for more than its recorded value in the inventory or the last accounting, the amount received above that value is a gain on the sale of an asset.

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

Worksheet 6, Decreases in Value of Assets⁶

Description	Amount
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL	\$

Worksheet 7, Losses on Sale of Assets⁷

Description	a) Recorded Value	b) Sales Price	c) Amount of Loss [a-b=c]
			\$
			\$
			\$
			\$
			\$
			\$
TOTAL			\$

⁶ Decreases in value of assets may include, but is not limited to: real property, antiques, collectibles, investment accounts, stocks, securities, motor vehicles.

⁷ If an asset is sold for less than its recorded value in the inventory or last annual accounting, the amount which is less than the recorded value is the loss on the sale of the asset.

Assets of the Estate at the Ending Date of the Accounting

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

	Value of Ward's Interest
A. REAL PROPERTY	
Description	
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
B. PERSONAL PROPERTY	
Cash, Checking and Savings Accounts, other Accounts (List)	
4. _____	\$ _____
5. _____	\$ _____
6. _____	\$ _____
Other Interest, Etc. (Describe)	
7. _____	\$ _____
8. _____	\$ _____
Notes, Bonds, Securities, Debts, Etc., (List Name & Address of Debtor)	
9. _____	\$ _____
10. _____	\$ _____
11. _____	\$ _____
12. _____	\$ _____
Vehicles (List)	
13. _____	\$ _____
14. _____	\$ _____
15. _____	\$ _____
Miscellaneous Personal Property (Describe)	
16. _____	\$ _____
17. _____	\$ _____
18. _____	\$ _____
19. _____	\$ _____
Other (Describe)	
20. _____	\$ _____
21. _____	\$ _____
22. _____	\$ _____
23. _____	\$ _____
TOTAL	\$ _____

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

VERIFICATION OF PETITIONER

STATE OF NEVADA)
)
COUNTY OF _____)

I, (your name) _____, being first duly sworn under penalty of perjury, hereby depose and say:

That I am the Petitioner in the within action; that I have read the foregoing Petition For Appointment of Guardian(s) and know the contents thereof; that the same is true of my knowledge except as to those matters therein stated upon information and belief and as to those matters, I believe them to be true.

Petitioner

SIGNED and SWORN to before me by (Petitioner's name) _____

on the ____ day of _____, _____.

NOTARY PUBLIC

ACKNOWLEDGMENT OF PETITIONER

STATE OF NEVADA)
)
COUNTY OF _____)

On this ____ day of _____, _____, before me, the undersigned Notary Public in and for the said County and State, personally appeared (your name) _____

_____ known to me to be the person described in and who executed the foregoing instrument, and who acknowledged to me that **(check one)** he/ she did so freely and voluntarily and for the uses and purposes therein mentioned.

WITNESS my hand and official seal.

NOTARY PUBLIC

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

VERIFICATION OF CO-PETITIONER

STATE OF NEVADA)
)
COUNTY OF _____)

I, (co-petitioner's name) _____, being first duly sworn under penalty of perjury, hereby depose and say:

That I am the Co-Petitioner in the within action; that I have read the foregoing Petition For Appointment of Guardian(s) and know the contents thereof; that the same is true of my knowledge except as to those matters therein stated upon information and belief and as to those matters, I believe them to be true.

Co-Petitioner

SIGNED and SWORN to before me by (Co-Petitioner's name) _____

on the ____ day of _____, ____.

NOTARY PUBLIC

ACKNOWLEDGMENT OF CO-PETITIONER

STATE OF NEVADA)
)
COUNTY OF _____)

On this ____ day of _____, _____, before me, the undersigned Notary Public in and for the said County and State, personally appeared (co-petitioner's name)

_____ known to me to be the person described in and who executed the foregoing instrument, and who acknowledged to me that **(check one)**

he/ she did so freely and voluntarily and for the uses and purposes therein mentioned.

WITNESS my hand and official seal.

NOTARY PUBLIC

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

Code:
(Your name) _____
(Your address) _____

(Telephone) _____

In Proper Person

IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
IN AND FOR THE COUNTY OF _____

In the Matter of the Guardianship of)
 the person,)
 the estate,)
 the person and estate.)
of:)
_____,)
An Adult.)

CASE NO. _____
DEPT. NO: _____

ORDER APPOINTING GUARDIAN(S)

UPON REVIEW of the verified Petition for Appointment of Guardian(s) submitted by the Petitioner(s), the same having come before the above-entitled Court, and it appearing to the satisfaction of the Court that proper Notice of hearing of this matter has been duly given in the manner required by law; that all allegations contained in the verified petition are true and correct, and that the Ward is a resident of the State of _____ with the Ward appearing with the Ward not appearing, but excused, and good cause appearing therefore;

NOW THEREFORE, IT IS HEREBY ORDERED that the Petitioner, (your name) _____ and Co-Petitioner (co-petitioner's name) _____ are appointed Guardian(s) of the Ward's (ward's name) _____ (check one person/ estate person and estate.

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

IT IS FURTHER ORDERED that Letters of Guardianship shall issue to the Guardian(s) upon the administration of the oath of office as required by law.

IT IS FURTHER ORDERED that (check one)

no guardianship of the estate is granted; therefore, no bond or blocked account is required.

guardianship of the estate is granted, but no bond or blocked account is required at this time.

(your name) _____ and (co-petitioner's name) _____ shall post a bond in the sum of \$ _____, either jointly or individually.

the Ward's funds shall be placed into a blocked account at a financial institution.

IT IS FURTHER ORDERED that

this guardianship is not over the estate; therefore, no accountings are required.

this guardianship is a summary administration and therefore no annual accounting is required.

the guardian and co-guardian shall file an accounting every _____ years, beginning _____.

the guardian and co-guardian shall file an accounting one time each year, beginning _____.

IT IS FURTHER ORDERED that the Guardian(s) shall enjoy all normal powers conferred by the Nevada Revised Statutes to take those steps necessary to preserve the real and/or personal property of the Ward of this Court as indicated above.

IT IS FURTHER ORDERED that Guardian(s) (check one)

are not granted special powers pursuant to NRS 159.117 through 159.175.

are granted special powers as follows (see NRS 159.117 through 159.175 for

the only special powers that may be ordered): _____