

1 Case No.

2 Dept. No. I

3 The undersigned hereby affirms this document
4 Does not contain a social security number.

5
6 IN THE TENTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
7 IN AND FOR THE COUNTY OF CHURCHILL
8

9
10 _____
11 Plaintiff,

12 vs.

13 _____
14 Defendant.

OPPOSITION TO

Insert Name of Motion you're Opposing

15 (Insert your name) _____, the (check one box for you)

16 Plaintiff / Defendant / Other (specify) _____ in this case, opposes the

17 (insert name of Motion you're opposing) _____, which was

18 filed by (insert other side's name) _____, the (check one box

19 for other side) Plaintiff / Defendant / Other (specify) _____ in this

20 case.

21
22 My Opposition is based upon and supported by the following Memorandum of Points and
23 Authorities, the pleadings and papers on file with the Court, the attached Declaration and exhibits,
24 and any argument the Court may allow at the time of the hearing.
25
26
27
28

1 **MEMORANDUM OF POINTS AND AUTHORITIES**

2 I oppose the Motion on file with the Court for the following reasons and based upon the
3 facts, law, and legal analysis below:
4

5 _____
6 _____
7 _____
8 _____
9 _____
10 _____
11 _____

12 For the reasons stated above, the Court should deny the pending Motion.
13

14 DATED _____, 20____.
15

16 I declare under penalty of perjury under the law of
17 the State of Nevada that the foregoing is true and
18 correct.

19 _____
Signature

20 _____
Printed Name

21 *Mailing Address:*

22 *City State Zip Code:*
23
24
25
26
27
28

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on *(insert date document was served)* _____,

I served the above *(insert name of document)* Opposition to _____,

pursuant to NRCP 5(b), by depositing a copy of the same in the United States Mail in

_____, Nevada, postage prepaid, to the address(es) listed below *(insert names and mailing*

addresses of opposing parties' attorneys, or opposing parties directly if no attorneys):

DATED _____, 20_____.

I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct.

Signature of Person Mailing Document

Printed Name of Person Mailing Document

DECLARATION

STATE OF NEVADA)
) ss.
COUNTY OF _____)

Declarant, (*insert your name*) _____ swears and affirms under penalty of perjury that the following assertions are true and correct.

1. Declarant submits this Declaration in support of the Opposition to (*insert name of Motion you're opposing*) _____ filed by (*insert name of party filing Opposition*) _____, the (*check one box*)

Plaintiff / Defendant / Other (*specify*) _____ in this case.

2. Declarant is competent to be a witness to the matters stated in this Declaration and could and would testify to those matters in a court of law, under oath, subject to the penalty of perjury.

3. Declarant has personal knowledge of the facts and circumstances set forth below gained through _____

except where specifically stated upon information and belief.

4. Based upon Declarant's personal knowledge, Declarant states as follows:

DATED _____, 20____.

I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct, per NRS 53.045.

Signature of Declarant

Printed Name of Person Mailing