

PET

Name

Address

City, State, Zip Code

Telephone number/E-mail Address

IN PROPER PERSON

DISTRICT COURT

CLARK COUNTY, NEVADA

In the Matter of the Estate of:)

)

) Case No. P _____

)

) Dept. No. PC-1

)

Deceased.)

EX PARTE PETITION FOR ORDER TO RELEASE MEDICAL RECORDS

Petitioner, _____,

appearing in Proper Person, respectfully alleges and shows as follows:

1. Petitioner is the _____ (how related) of Decedent _____ (decedent's name) and resides at _____.

2. Decedent died on the ____ day of _____, 20____, in _____ and, on the date of death, Decedent was a resident of Clark County, Nevada. A certified copy of Decedent's death certificate will be submitted upon receipt. Jurisdiction is proper in this proceeding.

1 3. The names, relationships, ages of minors and residence
2 addresses of all the devisees, legatees, heirs, and next-of-kin
3 of Decedent, so far as known to Petitioner, are:

4
5 (Below Must Include: Legally Married Spouse And All Children, Even If Estranged or out
6 of State And You as Petitioner Stating All Relationships, adult or minor and Addresses
7 (if unknown put last address or unknown)

Name ↓	Relationship/Age ↓	Address ↓
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8 1.

9 2.

10 3.

11 4.

12 5.

13 6.

14
15
16 4. Petitioner is seeking medical records from (list names &
17 addresses of all medical facilities and doctors from whom you are seeking records) _____

18 _____
19 _____
20 _____
21 _____
22 _____

23 **WHEREFORE,** Petitioner prays:

24 That the Court make and enter its order directing the
25 officers of (list names & addresses of all medical facilities and doctors from whom you are
26 seeking records) _____

27 _____
28 _____

to release Decedent's medical records to _____

(name and address).

DATED THIS _____ day of _____, 20____.

Signature of Petitioner

VERIFICATION

STATE OF NEVADA)
) ss
COUNTY OF CLARK)

_____, being first duly sworn, declares
under penalty of perjury as follows:

I am the Petitioner in the above-entitled action. I have
read the foregoing Ex Parte Petition for Order to Release
Medical Records, and know the contents thereof. The Petition is
true of my own knowledge except as to those matters that are
stated on information and belief, and as to those matters, I
believe them to be true.

DATED THIS _____ day of _____, 20____.

Signature of Petitioner