

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

RQST
[NAME]
[FIRM NAME]
[BAR NUMBER]
[ADDRESS]
[CITY, STATE, ZIP CODE]
[PHONE, FAX]
[EMAIL ADDRESS]
Attorney for [PLAINTIFF/DEFENDANT]
or
In Proper Person

**DISTRICT COURT
FAMILY DIVISION
CLARK COUNTY, NEVADA**

[PLAINTIFF],

Plaintiff,

vs.

[DEFENDANT],

Defendant.

CASE NO:
DEPT. NO:

DATE OF HEARING:
TIME OF HEARING:

**REQUEST FOR SUBMISSION OF MOTION
OR COUNTERMOTION
WITHOUT ORAL ARGUMENT PURSUANT TO
EDCR 2.23 and 5.11(b)**

[PLAINTIFF/DEFENDANT’S NAME] filed a [TITLE OF PENDING MATTER] on [DATE].

The same is currently set for hearing on the _____ day of _____, 20 __, at the hour of _____ o’clock ____ .M., in Department _____.

[PLAINTIFF/DEFENDANT] requests that the hearing be vacated, and the matter submitted to the Court on the papers and decided without oral argument pursuant to EDCR 2.23 and 5.11(b), with a minute order being issued prior to the hearing date on the following grounds:

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

[PLAINTIFF/DEFENDANT] was served via U.S. Postal Service (Mail) at the following address: _____
_____;

Certificate of Service is attached as Exhibit 1; or

[PLAINTIFF/DEFENDANT] was personally served by [NAME OF PERSON DOING SERVICE] on [DATE] at the following address: _____
_____;

Affidavit of Service is attached as Exhibit 1; or

[PLAINTIFF/DEFENDANT] was served via electronic means: [Email address] and/or [Facsimile Transmission phone number] on [DATE]: copy of the Facsimile Transmission Sheet, and/or the Confirmation Receipt are attached as Exhibit 1.

[PLAINTIFF/DEFENDANT] was required to file a response, and has failed to respond within the procedurally allotted time ([DATE RESPONSE WAS DUE]), or at all. No request for extension was received or granted.

A proposed order is attached as Exhibit 2.

DATED this ___ day of _____, 20__.

Respectfully Submitted By:
[FIRM NAME IF REPRESENTED BY COUNSEL]

[NAME]
[ADDRESS]
[CITY, STATE, ZIP CODE]
[PHONE, FAX]
[EMAIL ADDRESS]
Attorney for [PLAINTIFF/DEFENDANT]
or
In Proper Person

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

CERT
[NAME]
[ADDRESS]
[CITY, STATE, ZIP CODE]
[PHONE, FAX]
[EMAIL ADDRESS]
Attorney for [PLAINTIFF/DEFENDANT]
or
In Proper Person

**DISTRICT COURT
FAMILY DIVISION
CLARK COUNTY, NEVADA**

[PLAINTIFF],

Plaintiff,

vs.

[DEFENDANT],

Defendant.

CASE NO:
DEPT. NO:

DATE OF HEARING:
TIME OF HEARING:

CERTIFICATE OF SERVICE

I hereby certify that service of the foregoing [PLAINTIFF/DEFENDANT’S] *Request for Submission of Motion or Countermotion Without Oral Argument Pursuant to EDCR 2.23 and 5.11(b)* was made on this _____ day of _____, 20___, pursuant to EDCR 7.26(b) & (c) via Electronic mail to [Email Address] and/or Facsimile Transmission to [AREA CODE - PHONE NUMBER] and/or by the U.S. Postal Service addressed as follows:

[NAME OF PARTY MAKING SERVICE]

P:\wp13\FORMS\LF0115.WPD