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.

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

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

Name ↓	**Relationship/Age ↓**	**Address ↓**
1.		
2.		
3.		
4.		
5.		
6.		

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

_____

_____

_____

_____

WHEREFORE, Petitioner prays:

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

_____

_____

_____

_____

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