

**IN THE SUPREME COURT OF THE STATE OF NEVADA**

IN THE MATTER OF THE GUARDIANSHIP  
OF THE PERSONS: M. F. M. AND M. G. M.,  
PROTECTED MINORS.

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Electronically Filed  
Aug 09 2021 03:55 p.m.  
Elizabeth A. Brown  
Clerk of Supreme Court

ERIN NEWPORT,

Appellant,

vs.

MONTRAIL GREEN; AND JERMIA  
COAXUM-GREEN,

Respondents.

Case No. 82469

**APPEAL**

From the Eighth Judicial District Court, Clark County  
The Honorable Linda Marquis, District Judge  
District Court Case No.: G-19-052440-M

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**APPELLANT APPENDIX VOLUME I**

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*Attorneys for Appellant*

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I	Declaration of Petitioner Jermia Coaxum Per NRS 159.044(m), Dated October 30, 2019	AA010– AA011
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II	Citation to Appear and Show Cause, Dated October 23, 2020	AA140– AA141
I	Citation to Appear and Show Cause, Dated October 30, 2019	AA012– AA014
I	Declaration of Petitioner Jermia Coaxum Per NRS 159.044(m), Dated October 30, 2019	AA010– AA011
I	Declaration of Petitioner Montrail Green Per NRS 159.044(m), Dated October 30, 2019	AA008– AA009

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IV	Notice of Entry of Order of Findings of Fact, Dated January 27, 2021	AA339– AA347
IV	Notice of Entry of Order of Findings of Fact, Dated January 27, 2021	AA348– AA357
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I	Order to Appoint State Investigator, Dated November 20, 2019	AA034– AA035
I	Petition for Appointment of Guardian Over Two Children at Application for an Order Shortening Time, Dated October 30, 2019	AA001– AA007
II	Petition to Terminate Guardianship, Dated October 21, 2020	AA084– AA088
I	Re-Notice of Certificate of Mailing and Returned Receipts, Dated January 9, 2020	AA044– AA069
I	Re-Notice of Petition for Appointment of Guardian Over Two Children, Dated December 9, 2019	AA039– AA040

IV	Request for Authorization to Proceed in Proper Person; Waiver of Appeal Bond; and to Transmit Entire Record on File, Dated February 8, 2021	AA359
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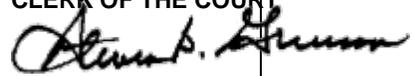
## CERTIFICATE OF SERVICE

Pursuant to NRAP 25, I certify that I am an employee of Morris Law Center and that on this 9<sup>th</sup> day of August, 2021, I served a true and correct copy of the foregoing **APPELLANT'S APPENDIX VOLUME I** as follows:

- by placing same to be deposited for mailing in the United States Mail, in a sealed envelope upon which first class postage was prepaid in Las Vegas, Nevada; and/or
- to be sent via facsimile (as a courtesy only); and/or
- to be hand-delivered to the attorneys at the address listed below:
- to be submitted to the above-entitled Court for electronic filing and service upon the Court's Service List for the above-referenced case.

John F. Schaller  
Patricia H. Warnock  
John Buchmiller & Associates  
400 S 4<sup>th</sup> St., #500  
Las Vegas, NV 89101

By: Anna M. Hepler  
An employee of Morris Law Center



1 **PAG**  
2 **PATRICIA WARNOCK, ESQ.**  
Nevada Bar #14432  
3 **SETH STRICKLAND, ESQ.**  
Nevada Bar #14768  
4 **JOHN BUCHMILLER & ASSOCIATES**  
400 South Fourth Street, Suite 500  
5 Las Vegas, Nevada  
6 Phone: (702) 793-4023  
7 Fax: (702) 493-4001  
8 Patricia@BuchmillerLaw.com  
*Attorneys for Petitioners*

CASE NO: G-19-052440-M  
Department: To be determined

9 EIGHTH JUDICIAL DISTRICT COURT  
10 FAMILY DIVISION  
11 COUNTY OF CLARK, STATE OF NEVADA

12 In the Matter of the Guardianship of the  
13 Persons:

14 MALAN FAITH MCCALLISTER and  
15 MARIAH GRACE MCCALLISTER,

Proposed Protected Minors.

CASE NO:

DEPT NO:

16 **PETITION FOR APPOINTMENT OF GUARDIAN OVER TWO CHILDREN AND**  
17 **APPLICATION FOR AN ORDER SHORTENING TIME**

18 **NOW COMES** the Petitioners, MONTRAIL GREEN and JERMIA COAXUM  
19 (“Petitioner” and “Petitioners”), by and through their legal counsel PATRICIA WARNOCK, ESQ.  
20 and SETH STRICKLAND, ESQ., of JOHN BUCHMILLER & ASSOCIATES, LLC, and files  
21 this **PETITION FOR APPOINTMENT OF GUARDIAN OVER TWO CHILDREN** to be  
22 appointed the Guardian over MALAN FAITH MCCALLISTER and MARIAH GRACE  
23 MCCALLISTER (collectively, “Proposed Protected Minors”). In accordance with NRS 159A.044,  
24 Petitioner alleges as follows:  
25  
26

27 Petitioner is Montrail Green, date of birth May 3, 1991. He resides at 8904 Goldstone,  
28 89143, in the County of Clark, City of Las Vegas, State of Nevada.

1 Co-Petitioner is Jermia Coaxum, date of birth is December 6, 1993. She resides at 8904  
2 Goldstone, 89143, in the County of Clark, City of Las Vegas, State of Nevada.

3 Neither Petitioner have been convicted of a crime of moral turpitude, a crime involving  
4 domestic violence or a crime involving the abuse, neglect, exploitation, isolation or abandonment  
5 of a child, his spouse, his parent or any other adult.  
6

7 Neither Petitioner have ever been convicted of a felony, neither Petitioner has filed for  
8 bankruptcy within the past seven years, and neither Petitioner is a party to any pending criminal  
9 or civil litigation.  
10

11 The Proposed Protected Minors are Malan Faith McCallister and Mariah Grace McCallister.  
12 Both Malan and Mariah were born on September 3, 2014. They are twins. They are currently five  
13 years of age. The Proposed Protected Minors will attain the age of 18 on September 3, 2032. They  
14 are not anticipated to need guardianship after attaining the age of majority.

15 Since their birth in 2014, Malan and Mariah have been residents of the State of Nevada.  
16 Currently, they reside with Petitioner at his residence located at 8904 Goldstone Avenue, 89143  
17 in the County of Clark, City of Las Vegas, State of Nevada.  
18

19 Malan and Mariah are not members of a federally recognized tribe, nor are they citizens of  
20 any other country.

21 Malan and Mariah share a common parent of their mother, Erin Newport (“Erin”). Erin’s  
22 last known residential address is 4840 Partegus Street, 89031 in the County of Clark, City of North  
23 Las Vegas, State of Nevada.  
24

25 At this time, it is unknown whether Erin consents to the proposed guardianship.

26 Malan and Mariah also share a common parent of Ryan McCallister (“Ryan”). Ryan is  
27 their biological father, however he is not listed on either child’s birth certificate and there has never  
28

1 been a court order regarding child support, custody, or a finding of paternity. Ryan has never been  
2 a primary caregiver for the children, nor has he ever fulfilled any substantial custodial  
3 responsibilities.

4 Ryan is currently incarcerated in Indian Springs, with a mailing address of 1117101 P.O.  
5 Box 208SDCC, Indian Springs, Nevada, 89070.  
6

7 Ryan has consented to the proposed guardianship of the Petitioners over Malan and Mariah.

8 Before Malan and Mariah came under the care of Petitioners in or around May 2019, the  
9 primary caregiving responsibilities were satisfied by the children's family members. After they  
10 were born in 2014, Malan and Mariah moved in with their great-Aunt, Winifred McCallister, until  
11 she passed away in 2017. From 2017 to May 2019, they were living with their maternal grandfather  
12 Kelly Newport, who is no longer able to care for them due to his health issues. Although they  
13 have never really lived with their mother or father, there are not any current court orders  
14 concerning custody of Malan and Mariah McCallister.  
15

16 In addition to Malan and Mariah's father's incarceration, their mother, Erin, has been  
17 unable to provide regular care to her children because of her illicit and transient lifestyle. Since  
18 Malan and Mariah's birth, Erin has engaged herself in prostitution and fraudulent activity  
19 involving credit cards. Additionally, Erin is addicted to and regularly abuses prescription  
20 medication such as oxycodone and other opioids. Additionally, Ryan, their father, has been  
21 incarcerated since just before or just after the birth of Malan and Mariah. It is because of this  
22 behavior that all parental responsibilities for Malan and Mariah have gone to various members of  
23 their family.  
24

25 At this time, Petitioners are the best persons to be awarded guardianship status over Malan  
26 and Mariah. Petitioner and his fiancé, Co-Petitioner Jermia Coaxum, can offer a nurturing  
27  
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**DECLARATION OF PATRICIA WARNOCK, ESQ., IN SUPPORT OF APPLICATION**  
**FOR AN ORDER SHORTENING TIME**

I, PATRICIA WARNOCK, ESQ., declare under penalty of perjury:

1. I am the attorney of record in this case. I am in good standing with the Nevada State Bar, and licensed to practice.
2. Petitioner, namely Montrail Green, is employed as a trucker and will be leaving December 1<sup>st</sup>, 2019, for training. Training will last about 2-3 months.
3. If a hearing is set in the normal course, there is a strong possibility Montrail Green will not be available to attend it.
4. Petitioners would like an Order Shortening Time to be issued so that they both can attend the soon-to-be set hearing in this matter.

**DATED** this 30<sup>th</sup> day of October, 2019.

Submitted by:

---

/S/Patricia H. Warnock  
PATRICIA WARNOCK, ESQ.  
Nevada Bar # 14432  
SETH STRICKLAND, ESQ.  
Nevada Bar #  
JOHN BUCHMILLER & ASSOCIATES  
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[Patricia@Buchmillerlaw.com](mailto:Patricia@Buchmillerlaw.com)  
*Attorneys for Petitioner*

1 **OST**

2 **PATRICIA WARNOCK, ESQ.**

3 Nevada Bar #14432

4 **SETH STRICKLAND, ESQ.**

5 Nevada Bar #14768

6 **JOHN BUCHMILLER & ASSOCIATES**

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8 Las Vegas, Nevada

9 Phone: (702) 793-4023

10 Fax: (702) 493-4001

11 Patricia@BuchmillerLaw.com

12 *Attorneys for Petitioners*

13  
14  
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EIGHTH JUDICIAL DISTRICT COURT  
FAMILY DIVISION  
COUNTY OF CLARK, STATE OF NEVADA

In the Matter of the Guardianship of the  
Persons:

CASE NO:

MALAN FAITH MCCALLISTER and  
MARIAH GRACE MCCALLISTER,

DEPT NO:

Proposed Protected Minors.

**ORDER SHORTENING TIME**

Upon application of the Movant, and good cause appearing therefore:

**IT IS HEREBY ORDERED** that the time for hearing Petitioner’s Petition for  
Appointment of Guardian Over Two Children is hereby shortened and shall be heard on the  
\_\_\_\_\_ day of \_\_\_\_\_, 2019, at the hour of \_\_\_\_:\_\_\_\_ .m. before the Eighth Judicial  
District Court – Family Division located at The Family Courts and Services Center, 601 N.  
Pecos Road, Las Vegas, Nevada 89101.

**DATED** this \_\_\_\_\_ day of \_\_\_\_\_, 2019.

\_\_\_\_\_  
DISTRICT COURT JUDGE

1 *Respectfully Submitted By:*

2 /S/Patricia H. Warnock

3 PATRICIA WARNOCK, ESQ.

Nevada Bar # 14432

4 SETH STRICKLAND, ESQ.

Nevada Bar #

5 JOHN BUCHMILLER & ASSOCIATES

6 500 S. Fourth Street, Suite 500

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8 [Patricia@Buchmillerlaw.com](mailto:Patricia@Buchmillerlaw.com)

*Attorneys for Petitioner*

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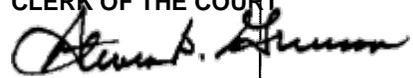
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CASE NO: G-19-052440-M  
Department: To be determined

1 **DECL**  
2 **PATRICIA WARNOCK, ESQ.**  
Nevada Bar #14432  
3 **SETH STRICKLAND, ESQ.**  
Nevada Bar # 14768  
4 **JOHN BUCHMILLER & ASSOCIATES**  
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5 Las Vegas, Nevada  
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7 Fax: (702) 493-4001  
Patricia@BuchmillerLaw.com  
8 *Attorneys for Petitioners*

9 EIGHTH JUDICIAL DISTRICT COURT  
10 FAMILY DIVISION  
11 COUNTY OF CLARK, STATE OF NEVADA

12 In the Matter of the Guardianship of the  
Persons:  
13 MALAN MCCALLISTER and MARIAH  
14 MCCALLISTER,  
15 Proposed Protected Minors.

CASE NO:  
  
DEPT NO:

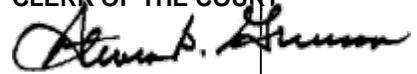
16 **DECLARATION OF PETITIONER PER NRS 159.044(m)**

17 STATE OF NEVADA )  
18 )SS  
19 COUNTY OF CLARK )

20 MONTRAIL GREEN, under penalty of perjury and saying that he has personal knowledge of  
21 and is competent to testify to the following facts, states and declares:  
22

- 23 1. I am the Uncle to Malan and Mariah McCallister. Co-Petitioner Jermia Coxum is  
24 my fiancé, and will therefore soon be their Aunt-in-law. Before they started living  
25 with us, their Maternal Grandfather was caring for them. He is unable to continue  
26 taking care of the girls due to his failing health.  
27  
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CASE NO: G-19-052440-M  
Department: To be determined

1 **DECL**  
2 **PATRICIA WARNOCK, ESQ.**  
Nevada Bar #14432  
3 **SETH STRICKLAND, ESQ.**  
Nevada Bar # 14768  
4 **JOHN BUCHMILLER & ASSOCIATES**  
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7 Patricia@BuchmillerLaw.com  
8 *Attorneys for Petitioners*

9 EIGHTH JUDICIAL DISTRICT COURT  
10 FAMILY DIVISION  
11 COUNTY OF CLARK, STATE OF NEVADA

12 In the Matter of the Guardianship of the  
Persons:  
13 MALAN MCCALLISTER and MARIAH  
14 MCCALLISTER,  
15 Proposed Protected Minors.

CASE NO:  
DEPT NO:

16 **DECLARATION OF PETITIONER PER NRS 159.044(m)**

17 STATE OF NEVADA )  
18 )SS  
19 COUNTY OF CLARK )

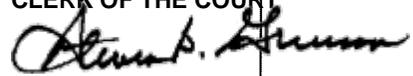
20 JERMIA COAXUM, under penalty of perjury and saying that she has personal knowledge of  
21 and is competent to testify to the following facts, states and declares:

- 22
- 23 1. I am the Montrail Green's fiancé. Montrail is uncle to Malan and Mariah  
24 McCallister. Before they started living with us, their Maternal Grandfather was  
25 caring for them. He is unable to continue taking care of the girls due to his failing  
26 health.  
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1           2.     As stated in the Petition, Montrail Green and I are the best family members to  
2                     care for Malan and Mariah McCallister, because we can offer a nurturing  
3                     environment in which they can thrive. Therefore, we should be awarded  
4                     guardianship status over them.  
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6 DATED this 28<sup>th</sup> day of October, 2019.

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8 JERMIA COAXUM  
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1 **CITA**  
2 **PATRICIA WARNOCK, ESQ.**  
Nevada Bar #14432  
3 **SETH STRICKLAND, ESQ.**  
Nevada Bar #14768  
4 **JOHN BUCHMILLER & ASSOCIATES**  
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8 *Attorneys for Petitioner Montrail Green*

9  
10 EIGHTH JUDICIAL DISTRICT COURT  
FAMILY DIVISION  
11 COUNTY OF CLARK, STATE OF NEVADA

12 In the Matter of the Guardianship of the  
13 Persons:

CASE NO: **G-19-052440-M**

14 MALAN FAITH MCCALLISTER and  
15 MARIAH GRACE MCCALLISTER,

DEPT NO: **B**

16 Proposed Protected Minors.

17  
18 **CITATION TO APPEAR AND SHOW CAUSE**

19 To: Malan McCallister (Proposed Protected Minor)

20 Mariah McCallister (Proposed Protected Minor)

21 Erin Newport (Mother)

22 Ryan McCallister (Father)

23 Ms. Kelly - Unknown Last Name - (Maternal Grandmother)

24 Mr. Kelly Newport (Paternal Grandfather)

25 Ryan McCallister, Sr. (Paternal Grandfather)

26 Patricia Horton (Paternal Grandmother)

1 Reann McCallister (Paternal Aunt – Ryan Jr.’s twin sister)

2 Montrail Green (Paternal Uncle – Petitioner)

3 Erin Newport’s (Minor) sister, name and address unknown

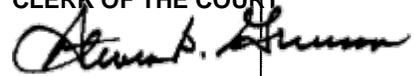
4  
5 To: All Other Relatives and/or Interested Parties

6 **Please Take Notice** that MONTRAIL GREEN has filed with the Clerk of the above-  
7 entitled Court a Petition for Appointment of Guardians Over Two Children. A hearing on the  
8 Petition is set for November 20, 2019 at ~~9:00 a.m.~~ **10:30 am**, in Department B of the  
9 above-entitled Court in the Clark County ~~Family Courthouse, 601 N. Pecos Rd., Las Vegas,~~  
10 **Regional Justice Center, 200 Lewis Ave, Las Vegas, NV 89101**  
11 Nevada 89101.

12 **You Are Hereby Notified That:**

- 13 1. A guardian may be appointed for the Proposed Protected Minors.
- 14 2. The Proposed Protected Minors’ rights may be affected as specified in this petition.
- 15 3. The Proposed Protect Minors have the right to appear at the hearing.
- 16 4. The Proposed Protected Minors have the right to be represented by an attorney, who  
17 may be appointed for the Proposed Ward by the court if the Proposed Ward is unable to  
18 retain one.
- 19 5. The Proposed Protected Minors’ rights and the rights of third parties may be affected  
20 by the revocation of any and all powers of attorney or temporary guardianships executed  
21 by the parent or parents of the Proposed Protected Minors.  
22  
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1 **CERT**  
2 **PATRICIA WARNOCK, ESQ.**  
3 Nevada Bar #14432  
4 **SETH STRICKLAND, ESQ.**  
5 Nevada Bar #14768  
6 **JOHN BUCHMILLER & ASSOCIATES**  
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12 *Attorneys for Petitioners*

8 EIGHTH JUDICIAL DISTRICT COURT  
9 FAMILY DIVISION  
10 COUNTY OF CLARK, STATE OF NEVADA

11 In the Matter of the Guardianship of the  
12 Persons:

CASE NO: G-19-052440-M

13 MALAN FAITH MCCALLISTER and  
14 MARIAH GRACE MCCALLISTER,

DEPT NO.: B

Proposed Protected Minors.

15 **CERTIFICATE OF MAILING**

16 Pursuant to N.R.C.P. 5(b), I verify that I am an employee of JOHN BUCHMILLER &  
17 ASSOCIATES, LLC, and that on the 7<sup>th</sup> day of November, 2019, I deposited for mailing at Las  
18 Vegas, Nevada, a true copy of the attached *Citation to Appear and Show Cause, Petition For*  
19 *Appointment of Guardian Over Two Children and Application for an Order Shortening Time,*  
20 *Montrail Green's Declaration of Petitioner Per NRS 159.044(m), and Jermia Coaxum's*  
21 *Declaration of Petitioner Per NRS 159.044(m)* to the following individuals at their last known  
22 addresses, with postage prepaid thereon:  
23

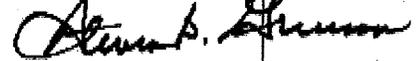
- 24 1) Patricia Horton  
25 3674 Santa Sabrina  
26 Las Cruces, NM 88012  
27

- 1 2) Montrail Green  
2 8904 Goldstone  
3 Las Vegas, NV 89143  
4  
5 3) Ryan McCallister  
6 1117101 P.O. Box 208SDCC  
7 Indian Springs, NV 89070  
8  
9 4) Kelly Newport  
10 5500 Vegas Drive #1043  
11 Las Vegas, NV 89108  
12  
13 5) Erin Newport  
14 C/O Kelly Newport  
15 5500 Vegas Drive #1043  
16 Las Vegas, NV 89108  
17  
18 6) ReAnn McCallister  
19 2293 Exeter Dr., Apt. D  
20 Las Vegas, NV 89156  
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22  
23  
24  
25  
26  
27

DATED this 19<sup>th</sup> day of November, 2019.

/S/ PATRICIA WARNOCK, ESQ.

PATRICIA WARNOCK, ESQ.  
Nevada Bar # 14432  
Patricia@Buchmillerlaw.com  
SETH STRICKLAND, ESQ.  
Nevada Bar # 14768  
Seth@BuchmillerLaw.com  
400 S. Fourth Street, Suite 500  
Las Vegas, NV 89101  
(702) 793-4023 (Phone/Text)



1 CITA

2 PATRICIA WARNOCK, ESQ.

Nevada Bar #14432

3 SETH STRICKLAND, ESQ.

Nevada Bar #14768

4 JOHN BUCHMILLER & ASSOCIATES

400 South Fourth Street, Suite 500

5 Las Vegas, Nevada

6 Phone: (702) 793-4023

Fax: (702) 493-4001

7 Patricia@BuchmillerLaw.com

8 Attorneys for Petitioner Montrail Green

9  
10 EIGHTH JUDICIAL DISTRICT COURT  
11 FAMILY DIVISION  
12 COUNTY OF CLARK, STATE OF NEVADA

13 In the Matter of the Guardianship of the  
14 Persons:

15 MALAN FAITH MCCALLISTER and  
16 MARIAH GRACE MCCALLISTER,

Proposed Protected Minors.

CASE NO: **G-19-052440-M**

DEPT NO: **B**

17  
18 CITATION TO APPEAR AND SHOW CAUSE

19 To: Malan McCallister (Proposed Protected Minor)

20 Mariah McCallister (Proposed Protected Minor)

21 Erin Newport (Mother)

22 Ryan McCallister (Father)

23 Ms. Kelly - Unknown Last Name - (Maternal Grandmother)

24 Mr. Kelly Newport (Paternal Grandfather)

25 Ryan McCallister, Sr. (Paternal Grandfather)

26 Patricia Horton (Paternal Grandmother)

1 Reann McCallister (Paternal Aunt – Ryan Jr.’s twin sister)

2 Montrail Green (Paternal Uncle – Petitioner)

3 Erin Newport’s (Minor) sister, name and address unknown

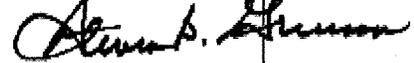
4  
5 To: All Other Relatives and/or Interested Parties

6 **Please Take Notice** that MONTRAIL GREEN has filed with the Clerk of the above-  
7 entitled Court a Petition for Appointment of Guardians Over Two Children. A hearing on the  
8 Petition is set for November 20, 2019 at ~~9:00 a.m.~~ **10:30 am**, in Department **B** of the  
9 above-entitled Court in the Clark County ~~Family Courthouse, 601 N. Decatur Rd., Las Vegas,~~  
10 **Regional Justice Center, 200 Lewis Ave, Las Vegas, NV 89101**  
11 ~~Nevada 89101.~~

12 **You Are Hereby Notified That:**

- 13 1. A guardian may be appointed for the Proposed Protected Minors.
- 14 2. The Proposed Protected Minors’ rights may be affected as specified in this petition.
- 15 3. The Proposed Protect Minors have the right to appear at the hearing.
- 16 4. The Proposed Protected Minors have the right to be represented by an attorney, who
- 17 may be appointed for the Proposed Ward by the court if the Proposed Ward is unable to
- 18 retain one.
- 19
- 20 5. The Proposed Protected Minors’ rights and the rights of third parties may be affected
- 21 by the revocation of any and all powers of attorney or temporary guardianships executed
- 22 by the parent or parents of the Proposed Protected Minors.
- 23
- 24
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1 **PAG**  
2 **PATRICIA WARNOCK, ESQ.**  
Nevada Bar #14432  
3 **SETH STRICKLAND, ESQ.**  
Nevada Bar #14768  
4 **JOHN BUCHMILLER & ASSOCIATES**  
400 South Fourth Street, Suite 500  
5 Las Vegas, Nevada  
6 Phone: (702) 793-4023  
7 Fax: (702) 493-4001  
8 Patricia@BuchmillerLaw.com  
*Attorneys for Petitioners*

CASE NO: G-19-052440-M  
Department: To be determined

9 EIGHTH JUDICIAL DISTRICT COURT  
10 FAMILY DIVISION  
11 COUNTY OF CLARK, STATE OF NEVADA

12 In the Matter of the Guardianship of the  
13 Persons:

14 MALAN FAITH MCCALLISTER and  
15 MARIAH GRACE MCCALLISTER,

Proposed Protected Minors.

CASE NO:

DEPT NO:

16 **PETITION FOR APPOINTMENT OF GUARDIAN OVER TWO CHILDREN AND**  
17 **APPLICATION FOR AN ORDER SHORTENING TIME**

18 **NOW COMES** the Petitioners, MONTRAIL GREEN and JERMIA COAXUM  
19 (“Petitioner” and “Petitioners”), by and through their legal counsel PATRICIA WARNOCK, ESQ.  
20 and SETH STRICKLAND, ESQ., of JOHN BUCHMILLER & ASSOCIATES, LLC, and files  
21 this **PETITION FOR APPOINTMENT OF GUARDIAN OVER TWO CHILDREN** to be  
22 appointed the Guardian over MALAN FAITH MCCALLISTER and MARIAH GRACE  
23 MCCALLISTER (collectively, “Proposed Protected Minors”). In accordance with NRS 159A.044,  
24 Petitioner alleges as follows:  
25  
26

27 Petitioner is Montrail Green, date of birth May 3, 1991. He resides at 8904 Goldstone,  
28 89143, in the County of Clark, City of Las Vegas, State of Nevada.

1 Co-Petitioner is Jermia Coaxum, date of birth is December 6, 1993. She resides at 8904  
2 Goldstone, 89143, in the County of Clark, City of Las Vegas, State of Nevada.

3 Neither Petitioner have been convicted of a crime of moral turpitude, a crime involving  
4 domestic violence or a crime involving the abuse, neglect, exploitation, isolation or abandonment  
5 of a child, his spouse, his parent or any other adult.  
6

7 Neither Petitioner have ever been convicted of a felony, neither Petitioner has filed for  
8 bankruptcy within the past seven years, and neither Petitioner is a party to any pending criminal  
9 or civil litigation.  
10

11 The Proposed Protected Minors are Malan Faith McCallister and Mariah Grace McCallister.  
12 Both Malan and Mariah were born on September 3, 2014. They are twins. They are currently five  
13 years of age. The Proposed Protected Minors will attain the age of 18 on September 3, 2032. They  
14 are not anticipated to need guardianship after attaining the age of majority.

15 Since their birth in 2014, Malan and Mariah have been residents of the State of Nevada.  
16 Currently, they reside with Petitioner at his residence located at 8904 Goldstone Avenue, 89143  
17 in the County of Clark, City of Las Vegas, State of Nevada.  
18

19 Malan and Mariah are not members of a federally recognized tribe, nor are they citizens of  
20 any other country.  
21

22 Malan and Mariah share a common parent of their mother, Erin Newport (“Erin”). Erin’s  
23 last known residential address is 4840 Partegus Street, 89031 in the County of Clark, City of North  
24 Las Vegas, State of Nevada.

25 At this time, it is unknown whether Erin consents to the proposed guardianship.

26 Malan and Mariah also share a common parent of Ryan McCallister (“Ryan”). Ryan is  
27 their biological father, however he is not listed on either child’s birth certificate and there has never  
28

1 been a court order regarding child support, custody, or a finding of paternity. Ryan has never been  
2 a primary caregiver for the children, nor has he ever fulfilled any substantial custodial  
3 responsibilities.

4 Ryan is currently incarcerated in Indian Springs, with a mailing address of 1117101 P.O.  
5 Box 208SDCC, Indian Springs, Nevada, 89070.

6 Ryan has consented to the proposed guardianship of the Petitioners over Malan and Mariah.

7 Before Malan and Mariah came under the care of Petitioners in or around May 2019, the  
8 primary caregiving responsibilities were satisfied by the children's family members. After they  
9 were born in 2014, Malan and Mariah moved in with their great-Aunt, Winifred McCallister, until  
10 she passed away in 2017. From 2017 to May 2019, they were living with their maternal grandfather  
11 Kelly Newport, who is no longer able to care for them due to his health issues. Although they  
12 have never really lived with their mother or father, there are not any current court orders  
13 concerning custody of Malan and Mariah McCallister.

14 In addition to Malan and Mariah's father's incarceration, their mother, Erin, has been  
15 unable to provide regular care to her children because of her illicit and transient lifestyle. Since  
16 Malan and Mariah's birth, Erin has engaged herself in prostitution and fraudulent activity  
17 involving credit cards. Additionally, Erin is addicted to and regularly abuses prescription  
18 medication such as oxycodone and other opioids. Additionally, Ryan, their father, has been  
19 incarcerated since just before or just after the birth of Malan and Mariah. It is because of this  
20 behavior that all parental responsibilities for Malan and Mariah have gone to various members of  
21 their family.

22 At this time, Petitioners are the best persons to be awarded guardianship status over Malan  
23 and Mariah. Petitioner and his fiancé, Co-Petitioner Jermia Coaxum, can offer a nurturing  
24

1 environment in which Malan and Mariah can thrive. Especially during these early years,  
2 Petitioners have the capability to fulfill all of the responsibilities of guardian for the two girls in  
3 the way that their grandparents and parents no longer can.  
4

5 **WHEREFORE**, Petitioner prays for an Order of this court which:

6 1. Grants the Petitioners Montrail Green and Jermia Coaxum guardianship over the  
7 Proposed Protected Minors, Malan and Mariah McCallister;

8 2. For such other and further relief as the court may deem proper and just in the  
9 premises.  
10

11 **APPLICATION FOR ORDER SHORTENING TIME**

12 **PURSUANT TO EDCR 5.513**

13 Petitioner Montrail Green and Jermia Coaxum, by and through their Counsel of Record  
14 PATRICIA WARNOCK, ESQ. of the law firm JOHN BUCHMILLER & ASSOCIATES, LLC,  
15 files this *Application for an Order Shortening Time* pursuant to EDCR 5.513, and requests this  
16 Court shorten the time in which the Petitioner's Petition for Appointment of Guardian Over Two  
17 Children is heard. This application is based upon the pleadings and papers on file and the  
18 Declaration of Patricia Warnock, Esq., attached to this Motion.  
19

20 **DATED** this 30<sup>th</sup> day of October, 2019.

21 Submitted by:

22  
23  
24 /S/Patricia H. Warnock  
25 PATRICIA WARNOCK, ESQ.  
26 Nevada Bar # 14432  
27 SETH STRICKLAND, ESQ.  
28 Nevada Bar #  
JOHN BUCHMILLER & ASSOCIATES  
500 S. Fourth Street, Suite 500  
Las Vegas, NV 89101

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(702)793-4023 (Ph) (702) 493-4001 (F)  
Patricia@Buchmillerlaw.com  
*Attorneys for Petitioner*

---

**DECLARATION OF PATRICIA WARNOCK, ESQ., IN SUPPORT OF APPLICATION**  
**FOR AN ORDER SHORTENING TIME**

I, PATRICIA WARNOCK, ESQ., declare under penalty of perjury:

1. I am the attorney of record in this case. I am in good standing with the Nevada State Bar, and licensed to practice.
2. Petitioner, namely Montrail Green, is employed as a trucker and will be leaving December 1<sup>st</sup>, 2019, for training. Training will last about 2-3 months.
3. If a hearing is set in the normal course, there is a strong possibility Montrail Green will not be available to attend it.
4. Petitioners would like an Order Shortening Time to be issued so that they both can attend the soon-to-be set hearing in this matter.

**DATED** this 30<sup>th</sup> day of October, 2019.

Submitted by:

---

/S/Patricia H. Warnock  
PATRICIA WARNOCK, ESQ.  
Nevada Bar # 14432  
SETH STRICKLAND, ESQ.  
Nevada Bar #  
JOHN BUCHMILLER & ASSOCIATES  
500 S. Fourth Street, Suite 500  
Las Vegas, NV 89101  
(702)793-4023 (Ph) (702) 493-4001 (F)  
Patricia@Buchmillerlaw.com  
*Attorneys for Petitioner*

1 **OST**

2 **PATRICIA WARNOCK, ESQ.**

Nevada Bar #14432

3 **SETH STRICKLAND, ESQ.**

Nevada Bar #14768

4 **JOHN BUCHMILLER & ASSOCIATES**

400 South Fourth Street, Suite 500

5 Las Vegas, Nevada

6 Phone: (702) 793-4023

Fax: (702) 493-4001

7 Patricia@BuchmillerLaw.com

8 *Attorneys for Petitioners*

9 EIGHTH JUDICIAL DISTRICT COURT  
10 FAMILY DIVISION  
11 COUNTY OF CLARK, STATE OF NEVADA

12 In the Matter of the Guardianship of the  
13 Persons:

14 MALAN FAITH MCCALLISTER and  
15 MARIAH GRACE MCCALLISTER,

Proposed Protected Minors.

CASE NO:

DEPT NO:

17 **ORDER SHORTENING TIME**

18 Upon application of the Movant, and good cause appearing therefore:

19 **IT IS HEREBY ORDERED** that the time for hearing Petitioner's Petition for  
20 Appointment of Guardian Over Two Children is hereby shortened and shall be heard on the  
21 \_\_\_\_\_ day of \_\_\_\_\_, 2019, at the hour of \_\_\_\_:\_\_\_\_.m. before the Eighth Judicial  
22 District Court – Family Division located at The Family Courts and Services Center, 601 N.  
23 Pecos Road, Las Vegas, Nevada 89101.

25 **DATED** this \_\_\_\_\_ day of \_\_\_\_\_, 2019.

27 \_\_\_\_\_  
28 DISTRICT COURT JUDGE

1 *Respectfully Submitted By:*

2 /S/Patricia H. Warnock

3 PATRICIA WARNOCK, ESQ.

4 Nevada Bar # 14432

5 SETH STRICKLAND, ESQ.

6 Nevada Bar #

7 JOHN BUCHMILLER & ASSOCIATES

8 500 S. Fourth Street, Suite 500

9 Las Vegas, NV 89101

10 (702)793-4023 (Ph) (702) 493-4001 (F)

11 Patricia@Buchmillerlaw.com

12 *Attorneys for Petitioner*

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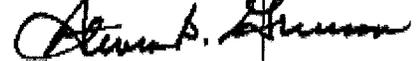
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CASE NO: G-19-052440-M  
Department: To be determined

1 **DECL**  
2 **PATRICIA WARNOCK, ESQ.**  
Nevada Bar #14432  
3 **SETH STRICKLAND, ESQ.**  
Nevada Bar # 14768  
4 **JOHN BUCHMILLER & ASSOCIATES**  
400 South Fourth Street, Suite 500  
5 Las Vegas, Nevada  
6 Phone: (702) 793-4023  
7 Fax: (702) 493-4001  
8 Patricia@BuchmillerLaw.com  
Attorneys for Petitioners

9 EIGHTH JUDICIAL DISTRICT COURT  
10 FAMILY DIVISION  
11 COUNTY OF CLARK, STATE OF NEVADA

12 In the Matter of the Guardianship of the  
Persons:  
13 MALAN MCCALLISTER and MARIAH  
14 MCCALLISTER,  
15 Proposed Protected Minors.

CASE NO:  
  
DEPT NO:

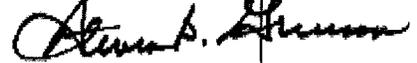
16 **DECLARATION OF PETITIONER PER NRS 159.044(m)**

17 STATE OF NEVADA )  
18 )SS  
19 COUNTY OF CLARK )

20  
21 MONTRAIL GREEN, under penalty of perjury and saying that he has personal knowledge of  
22 and is competent to testify to the following facts, states and declares:

- 23 1. I am the Uncle to Malan and Mariah McCallister. Co-Petitioner Jermia Coxum is  
24 my fiancé, and will therefore soon be their Aunt-in-law. Before they started living  
25 with us, their Maternal Grandfather was caring for them. He is unable to continue  
26 taking care of the girls due to his failing health.  
27  
28





CASE NO: G-19-052440-M  
Department: To be determined

1 **DECL**  
2 **PATRICIA WARNOCK, ESQ.**  
Nevada Bar #14432  
3 **SETH STRICKLAND, ESQ.**  
Nevada Bar # 14768  
4 **JOHN BUCHMILLER & ASSOCIATES**  
5 400 South Fourth Street, Suite 500  
Las Vegas, Nevada  
6 Phone: (702) 793-4023  
7 Fax: (702) 493-4001  
Patricia@BuchmillerLaw.com  
8 *Attorneys for Petitioners*

9 EIGHTH JUDICIAL DISTRICT COURT  
10 FAMILY DIVISION  
11 COUNTY OF CLARK, STATE OF NEVADA

12 In the Matter of the Guardianship of the  
13 Persons:  
14 MALAN MCCALLISTER and MARIAH  
MCCALLISTER,  
15 Proposed Protected Minors.

CASE NO:

DEPT NO:

16 **DECLARATION OF PETITIONER PER NRS 159.044(m)**

17 STATE OF NEVADA )  
18 )SS  
19 COUNTY OF CLARK )

20 JERMIA COAXUM, under penalty of perjury and saying that she has personal knowledge of  
21 and is competent to testify to the following facts, states and declares:  
22

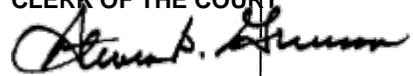
- 23 1. I am the Montrail Green's fiancé. Montrail is uncle to Malan and Mariah  
24 McCallister. Before they started living with us, their Maternal Grandfather was  
25 caring for them. He is unable to continue taking care of the girls due to his failing  
26 health.  
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1           2.     As stated in the Petition, Montrail Green and I are the best family members to  
2                    care for Malan and Mariah McCallister, because we can offer a nurturing  
3                    environment in which they can thrive. Therefore, we should be awarded  
4                    guardianship status over them.  
5

6 DATED this 28<sup>th</sup> day of October, 2019.

7   
8 JERMIA COAXUM

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1 **CITA**

2 **PATRICIA WARNOCK, ESQ.**

3 Nevada Bar #14432

4 **SETH STRICKLAND, ESQ.**

5 Nevada Bar #14768

6 **JOHN BUCHMILLER & ASSOCIATES**

7 400 South Fourth Street, Suite 500

8 Las Vegas, Nevada

9 Phone: (702) 793-4023

10 Fax: (702) 493-4001

11 Patricia@BuchmillerLaw.com

12 *Attorneys for Petitioner Montrail Green*

13  
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EIGHTH JUDICIAL DISTRICT COURT  
FAMILY DIVISION  
COUNTY OF CLARK, STATE OF NEVADA

In the Matter of the Guardianship of the  
Persons:

CASE NO: **G-19-052440-M**

MALAN FAITH MCCALLISTER and  
MARIAH GRACE MCCALLISTER,

DEPT NO: **B**

Proposed Protected Minors.

**CITATION TO APPEAR AND SHOW CAUSE**

To: Malan McCallister (Proposed Protected Minor)

Mariah McCallister (Proposed Protected Minor)

Erin Newport (Mother)

Ryan McCallister (Father)

Ms. Kelly - Unknown Last Name - (Maternal Grandmother)

Mr. Kelly Newport (Paternal Grandfather)

Ryan McCallister, Sr. (Paternal Grandfather)

Patricia Horton (Paternal Grandmother)

1 Reann McCallister (Paternal Aunt – Ryan Jr.’s twin sister)

2 Montrail Green (Paternal Uncle – Petitioner)

3 Erin Newport’s (Minor) sister, name and address unknown

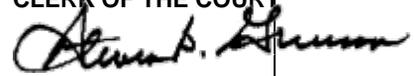
4  
5 To: All Other Relatives and/or Interested Parties

6 **Please Take Notice** that MONTRAIL GREEN has filed with the Clerk of the above-  
7 entitled Court a Petition for Appointment of Guardians Over Two Children. A hearing on the  
8 Petition is set for November 20, 2019 at ~~9:00 a.m.~~ **10:30 am**, in Department B of the  
9 above-entitled Court in the Clark County ~~Family Courthouse, 601 N. Pecos Rd., Las Vegas,~~  
10 **Regional Justice Center, 200 Lewis Ave, Las Vegas, NV 89101**  
11 Nevada 89101.

12 **You Are Hereby Notified That:**

- 13 1. A guardian may be appointed for the Proposed Protected Minors.
- 14 2. The Proposed Protected Minors’ rights may be affected as specified in this petition.
- 15 3. The Proposed Protect Minors have the right to appear at the hearing.
- 16 4. The Proposed Protected Minors have the right to be represented by an attorney, who  
17 may be appointed for the Proposed Ward by the court if the Proposed Ward is unable to  
18 retain one.
- 19 5. The Proposed Protected Minors’ rights and the rights of third parties may be affected  
20 by the revocation of any and all powers of attorney or temporary guardianships executed  
21 by the parent or parents of the Proposed Protected Minors.  
22  
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1 **ORDR**

2  
3 **DISTRICT COURT**  
4 **CLARK COUNTY, NEVADA**

5  
6 In the Matter of the Guardianship  
7 of:

8  
9 Mariah Grace McCallister,  
10 Malan Faith McCallister,  
11 Protected Minor(s)

Case No.: G-19-052440-M

Department: B

Return Hearing: February 25,  
2020 at 9:30 a.m.

12  
13 **ORDER TO APPOINT INVESTIGATOR**

14  
15 This matter has been reviewed by the Court. The Court, having  
16 jurisdiction of the subject matter, finds an investigation is required in this  
17 matter.

18 **IT IS HEREBY ORDERED:**

- 19 1. The Court appoints the following as investigator in this matter:  
20 Kate McCloskey, State Guardianship Compliance Officer, or  
21 designee  
22 201 S. Carson Street, Suite 250  
23 Carson City, NV 89701-4702  
24 Phone: 775-684-1783  
25 Fax: 775-684-1723
- 26 2. The State Guardianship Compliance Officer shall conduct an  
27 investigation into the Protected Person's personal circumstances  
28 including, but not limited to, the Protected Person's medical and  
psychiatric/psychological condition, care and maintenance,  
educational status, placement, and financial status.

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3. Specifically, the State Guardianship Compliance Officer shall: run a background check on every person involved in this matter, view all homes for suitability, speak with the Proposed Protected Minors, and review medical records.
  4. Upon presentation of this Order to any hospital, medical care facility, health care provider, educational institution, human service agency, financial institution, or other agency or individual providing placement, care, treatment, services, or benefits to the Protected Person, including records of protected health information under the provision of the Federal Health Insurance Portability and Accountability Act of 1996, the State Guardianship Compliance Officer shall be authorized to access, review, and/or copy any record relating to the Protected Person, within the scope of this investigation.
  5. The State Guardianship Compliance Officer shall file a written report with the Court, documenting the results of this investigation. The investigative report shall be sent to the parties in this matter, by the State Guardianship Compliance Officer.

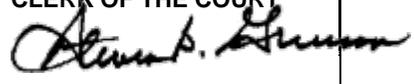
20 **IT IS SO ORDERED.**

21 Dated this 20<sup>th</sup> day of November, 2019.

*Linda Marquis*

DISTRICT COURT JUDGE

LINDA MARQUIS



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NEO

**DISTRICT COURT  
CLARK COUNTY, NEVADA  
\*\*\***

In the Matter of the Guardianship of:  
Mariah Grace McCallister, Malan Faith  
McCallister, Protected Minor(s)

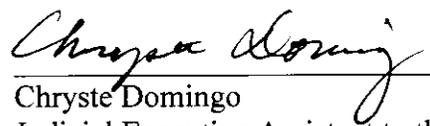
Case No.: G-19-052440-M  
Department B

**NOTICE OF ENTRY OF ORDER**

TO ALL INTERESTED PARTIES:

**PLEASE TAKE NOTICE** that an Order was entered in the above-entitled matter on November 20, 2019, a true and correct copy of which is attached hereto.

Dated this 26th day of November, 2019.



Chryste Domingo  
Judicial Executive Assistant to the  
HONORABLE LINDA MARQUIS

**CERTIFICATE OF SERVICE**

I hereby certify that on the above file stamped date:

E-Served pursuant to NEFCR 9 on November 26, 2019, or placed in the folder(s) located in the Clerk's Office of, the following attorneys:

Seth Michael Strickland, Esquire

Patricia W. Warnock, Esquire

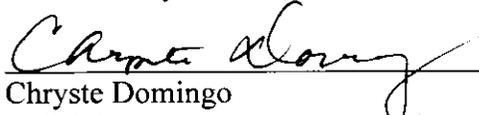
I mailed, via first-class mail, postage fully prepaid, the foregoing NOTICE OF ENTRY OF ORDER to:

Jermia Coaxum  
8904 Goldstone  
Las Vegas NV 89143

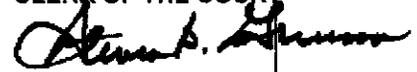
Erin Newport  
C/O Kelly Newport  
5500 Vegas Dr., #1043  
Las Vegas, NV 89108

Montrail Green  
8904 Goldstone  
Las Vegas NV 89143

State Guardianship Compliance Officer  
201 S. Carson St. Ste. 250  
Carson City, NV 89701-4702



Chryste Domingo  
Judicial Executive Assistant to the  
HONORABLE LINDA MARQUIS



1 **ORDR**

2  
3 **DISTRICT COURT**  
4 **CLARK COUNTY, NEVADA**

5  
6 In the Matter of the Guardianship  
7 of:

8  
9 Mariah Grace McCallister,  
10 Malan Faith McCallister,  
11 Protected Minor(s)

Case No.: G-19-052440-M

Department: B

Return Hearing: February 25,  
2020 at 9:30 a.m.

12  
13 **ORDER TO APPOINT INVESTIGATOR**

14  
15 This matter has been reviewed by the Court. The Court, having  
16 jurisdiction of the subject matter, finds an investigation is required in this  
17 matter.

18 **IT IS HEREBY ORDERED:**

- 19 1. The Court appoints the following as investigator in this matter:  
20 Kate McCloskey, State Guardianship Compliance Officer, or  
21 designee  
22 201 S. Carson Street, Suite 250  
23 Carson City, NV 89701-4702  
24 Phone: 775-684-1783  
25 Fax: 775-684-1723
- 26 2. The State Guardianship Compliance Officer shall conduct an  
27 investigation into the Protected Person's personal circumstances  
28 including, but not limited to, the Protected Person's medical and  
psychiatric/psychological condition, care and maintenance,  
educational status, placement, and financial status.

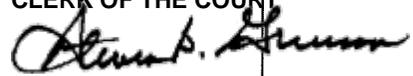
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3. Specifically, the State Guardianship Compliance Officer shall: run a background check on every person involved in this matter, view all homes for suitability, speak with the Proposed Protected Minors, and review medical records.
  4. Upon presentation of this Order to any hospital, medical care facility, health care provider, educational institution, human service agency, financial institution, or other agency or individual providing placement, care, treatment, services, or benefits to the Protected Person, including records of protected health information under the provision of the Federal Health Insurance Portability and Accountability Act of 1996, the State Guardianship Compliance Officer shall be authorized to access, review, and/or copy any record relating to the Protected Person, within the scope of this investigation.
  5. The State Guardianship Compliance Officer shall file a written report with the Court, documenting the results of this investigation. The investigative report shall be sent to the parties in this matter, by the State Guardianship Compliance Officer.

20 **IT IS SO ORDERED.**

21 Dated this 20<sup>th</sup> day of November, 2019.

22 *Linda Marquis*  
23 **DISTRICT COURT JUDGE** *LM*

24 **LINDA MARQUIS**  
25  
26  
27  
28



1 **NOTC**  
2 **PATRICIA WARNOCK, ESQ.**  
3 Nevada Bar #14432  
4 Patricia@BuchmillerLaw.com  
5 **SETH STRICKLAND, ESQ.**  
6 Nevada Bar #14768  
7 Seth@BuchmillerLaw.com  
8 **JOHN BUCHMILLER & ASSOCIATES**  
9 400 South Fourth Street, Suite 500  
10 Las Vegas, Nevada  
11 Phone: (702) 793-4023  
12 Fax: (702) 493-4001  
13 *Attorneys for Petitioner Montrail Green*

14 EIGHTH JUDICIAL DISTRICT COURT  
15 FAMILY DIVISION  
16 COUNTY OF CLARK, STATE OF NEVADA

17 In the Matter of the Guardianship of the  
18 Persons:  
19 MALAN MCCALLISTER and MARIAH  
20 MCCALLISTER,  
21 Proposed Protected Minors.

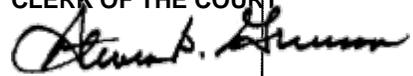
22 CASE NO: D-12-470938-P  
23 DEPT NO: J  
24 HEARING DATE:  
25 TIME:

26 **RE-NOTICE OF PETITION FOR APPOINTMENT OF GUARDIAN OVER TWO**  
27 **CHILDREN**

28 **TO: Patricia Horton; Montrail Green; Jermia Coaxum; Ryan McAllister Jr.; Kelly  
Newport; Erin Newport; Ryan McAllister Sr.; ReAnn McAllister; William B. Cary; Leah D.  
Cary; Cindy Bean; Joy Newport.**

YOU AND EACH OF YOU, WILL PLEASE TAKE NOTICE that the undersigned will  
bring this Petition on for hearing before the Family Court Dept. B on the \_\_\_\_\_ day of  
\_\_\_\_\_, 2019, at \_\_\_\_ o'clock \_\_.m. of said day, located in Courtroom 10A  
of the Regional Justice Center, 200 Lewis Ave., Las Vegas, NV 89155.





1 **CERT**

2 **PATRICIA WARNOCK, ESQ.**

3 Nevada Bar #14432

4 Patricia@BuchmillerLaw.com

5 **SETH STRICKLAND, ESQ.**

6 Nevada Bar #14768

7 Seth@BuchmillerLaw.com

8 **JOHN BUCHMILLER & ASSOCIATES**

9 400 South Fourth Street, Suite 500

10 Las Vegas, Nevada

11 Phone: (702) 793-4023

12 Fax: (702) 493-4001

13 Patricia@BuchmillerLaw.com

14 *Attorneys for Petitioners Montrail Green and Jermia Coaxum*

15 EIGHTH JUDICIAL DISTRICT COURT  
16 FAMILY DIVISION  
17 COUNTY OF CLARK, STATE OF NEVADA

18 In the Matter of the Guardianship of the  
19 Persons:

20 MALAN MCCALLISTER and MARIAH  
21 MCCALLISTER,

22 Proposed Protected Minors.

CASE NO: G-19-052440-M

DEPT NO: J

HEARING DATE: JANUARY 9, 2020

TIME: 10:30AM

23 **CERTIFICATE OF MAILING**

24 A COPY OF the foregoing *Clerk's Notice of Hearing, Re-Notice of Re-Notice of Petition*  
25 *for Appointment of Guardian Over Two Children, Notice to Vacate December 12, 2019 Hearing,*  
26 *Citation to Appear and Show Cause, Petition For Appointment of Guardian Over Two Children*  
27 *and Application for an Order Shortening Time, Montrail Green's Declaration of Petitioner Per*  
28 *NRS 159.044(m), and Jermia Coaxum's Declaration of Petitioner Per NRS 159.044(m)* were  
served today via certified return receipt mailing to the following addresses:

- 1) Patricia Horton  
3674 Santa Sabina Ave.  
Las Cruces, NM 88012
  - 2) Montrail Green  
8904 Goldstone Ave.  
Las Vegas, NV 89143
  - 3) Jermia Coaxum  
8904 Goldstone Ave.  
Las Vegas, NV 89143
  - 4) Ryan McAllister Jr.  
1117101 P.O. Box 208SDCC  
Indian Springs, NV 89070
  - 5) Kelly Newport  
1816 Soto Ln.  
North Las Vegas, NV 89032
  - 6) Joy Anne Newport  
1816 Soto Ln.  
North Las Vegas, NV 89032
  - 7) Erin Newport  
6006 Belleau Wood Ln.  
Sacramento, CA 95822
  - 8) Ryan McCallister Sr.  
819 Red Sox Ave.  
North Las Vegas, NV 89030
  - 9) ReAnn McCallister  
2293 Exeter Dr., Apt. D  
Las Vegas, NV 89156
  - 10) William Cary  
4928 Crystal Breeze Ln.  
North Las Vegas, NV 89031
  - 11) Leah Cary  
4928 Crystal Breeze Ln.  
North Las Vegas, NV 89031
- ///  
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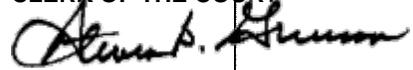
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12) Cindy Bean  
3708 Colfax Circle  
Las Vegas, NV 89084

13) Cindy Bean  
6916 Dipper Ave.  
North las Vegas, NV, 89084

DATED this 10<sup>th</sup> day of December, 2019.

/S/ SETH STRICKLAND  
An Employee of John Buchmiller & Associates



1 **CERT**

2 **PATRICIA WARNOCK, ESQ.**

3 Nevada Bar #14432

4 Patricia@BuchmillerLaw.com

5 **SETH STRICKLAND, ESQ.**

6 Nevada Bar #14768

7 Seth@BuchmillerLaw.com

8 **JOHN BUCHMILLER & ASSOCIATES**

9 400 South Fourth Street, Suite 500

10 Las Vegas, Nevada

11 Phone: (702) 793-4023

12 Fax: (702) 493-4001

13 Patricia@BuchmillerLaw.com

14 Attorneys for Petitioners Montrail Green and Jermia Coaxum

15 EIGHTH JUDICIAL DISTRICT COURT  
16 FAMILY DIVISION  
17 COUNTY OF CLARK, STATE OF NEVADA

18 In the Matter of the Guardianship of the  
19 Persons:

20 MALAN MCCALLISTER and MARIAH  
21 MCCALLISTER,

22 Proposed Protected Minors.

CASE NO: G-19-052440-M

DEPT NO: J

HEARING DATE: JANUARY 9, 2020

TIME: 10:30AM

23 **RE-NOTICE OF CERTIFICATE OF MAILING AND RETURNED RECEIPTS**

24 A COPY OF the foregoing *Clerk's Notice of Hearing, Re-Notice of Re-Notice of Petition*  
25 *for Appointment of Guardian Over Two Children, Notice to Vacate December 12, 2019 Hearing,*  
26 *Citation to Appear and Show Cause, Petition For Appointment of Guardian Over Two Children*  
27 *and Application for an Order Shortening Time, Montrail Green's Declaration of Petitioner Per*  
28 *NRS 159.044(m), and Jermia Coaxum's Declaration of Petitioner Per NRS 159.044(m)* were  
served on December 10, 2020 via certified return receipt mailing to the following addresses:

- 1) Patricia Horton  
3674 Santa Sabina Ave.  
Las Cruces, NM 88012
- 2) Montrail Green  
8904 Goldstone Ave.  
Las Vegas, NV 89143
- 3) Jermia Coaxum  
8904 Goldstone Ave.  
Las Vegas, NV 89143
- 4) Ryan McAllister Jr.  
1117101 P.O. Box 208SDCC  
Indian Springs, NV 89070
- 5) Kelly Newport  
1816 Soto Ln.  
North Las Vegas, NV 89032
- 6) Joy Anne Newport  
1816 Soto Ln.  
North Las Vegas, NV 89032
- 7) Erin Newport  
6006 Belleau Wood Ln.  
Sacramento, CA 95822
- 8) Ryan McCallister Sr.  
819 Red Sox Ave.  
North Las Vegas, NV 89030
- 9) ReAnn McCallister  
2293 Exeter Dr., Apt. D  
Las Vegas, NV 89156
- 10) William Cary  
4928 Crystal Breeze Ln.  
North Las Vegas, NV 89031
- 11) Leah Cary  
4928 Crystal Breeze Ln.  
North Las Vegas, NV 89031
- ///
- ///
- ///

1 12) Cindy Bean  
2 3708 Colfax Circle  
3 Las Vegas, NV 89084

4 13) Cindy Bean  
5 6916 Dipper Ave.  
6 North las Vegas, NV, 89084

7 *See Exhibit A.*

8 Also attached are the signed receipts returned to-date, *see* Exhibit B, and one envelope  
9 returned in its entirety, *see* Exhibit C.

10 DATED this 9<sup>th</sup> day of January, 2020.

11  
12 **Respectfully Submitted By:**

13 /S/ SETH STRICKLAND, ESQ.  
14 PATRICIA WARNOCK, ESQ.  
15 Nevada Bar # 14432  
16 Patricia@Buchmillerlaw.com  
17 SETH STRICKLAND, ESQ.  
18 Nevada Bar # 14768  
19 seth@buchmillerlaw.com  
20 400 S. Fourth Street, Suite 500  
21 Las Vegas, NV 89101  
22 (702) 278-9268 (Phone/Text)  
23  
24  
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# EXHIBIT A

# EXHIBIT A

■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ryan McAllister Jr.  
1117101 P.O. Box 208SDCC  
Indian Springs, NV 89070



9590 9402 3134 7166 6533 80

2. Article Number (Transfer from service label)

7018 0040 0000 8259 2178

PS Form 3811, July 2015 PSN 7530-02-000-9058

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

7018 0040 0000 8259 2178



Ryan McAllister Jr.  
1117101 P.O. Box 208 SDCC  
Indian Springs, NV

7018 0040 0000 8259 2178

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee \$ \_\_\_\_\_

Extra Services & Fees (check box; add fee as appropriate)

- Return Receipt (hardcopy) \$ \_\_\_\_\_
- Return Receipt (electronic) \$ \_\_\_\_\_
- Certified Mail Restricted Delivery \$ \_\_\_\_\_
- Adult Signature Required \$ \_\_\_\_\_
- Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

Sent To: Ryan McAllister Jr.  
Street and Apt. No., or P.O. Box No.: 1117101 P.O. Box 208SDCC  
City, State, ZIP+4®: Indian Springs, NV 89070

Postmark Here

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

LIER & ASSOCIATES, LLC  
 1500 Street, Suite 500  
 Las Vegas, Nevada 89101

- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
 William Cary  
 4928 Crystal Breeze Ln  
 North Las Vegas, NV 89031



9590 9402 3134 7166 6549 74

2. Article Number (Transfer from service label)  
 7018 0040 0000 8259 2239

**X**  Registered Addressee

B. Received by (Printed Name) C. Date of Delivery

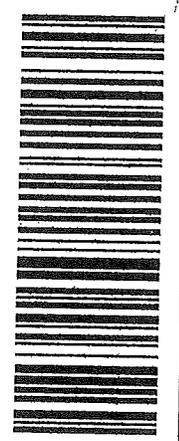
D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input checked="" type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7018 0040 0000 8259 2239



William Cary  
 4928 Crystal Breeze Ln  
 North Las Vegas, NV 89031

7018 0040 0000 8259 2239

U.S. Postal Service™  
 CERTIFIED MAIL®  
 Domestic Mail Only

OFFICIAL USE

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Certified Mail (electronic)	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$

Sent To: William Cary  
 Street and Apt. No., or PO Box No.: 4928 Crystal Breeze Ln  
 City, State, ZIP+4®: North Las Vegas, NV

Postmark Here

- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
 Re Ann McAllister  
 2293 Exeter Dr, Apt. D  
 Las Vegas, NV 89156



9590 9402 3134 7166 6549 81

2. Article Number (Transfer from service label)  
 7018 0040 0000 8259 2222

PS Form 3811, July 2015 PSN 7530-02-000-9058

**A. Addressee**

B. Received by (Printed Name)

C. Date of Delivery

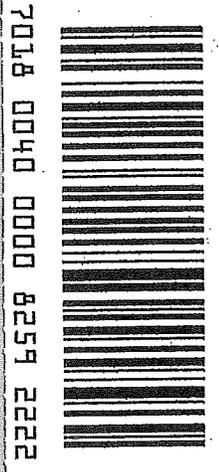
D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input checked="" type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

Domestic Return Receipt

LEER & ASSOCIATES, INC.  
 Street, Suite 500  
 as, Nevada 89101



7018 0040 0000 8259 2222

Re Ann McAllister  
 2293 Exeter Dr, Apt. D  
 Las Vegas, NV

7018 0040 0000 8259 2222

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee \$ \_\_\_\_\_

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postage \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

Postmark Here

Sent to **Re Ann McAllister**  
 Street and Apt. No. or P.O. Box No. **2293 Exeter Dr, Apt. D**  
 City, State, ZIP+4® **Las Vegas, NV 89156**

PS Form 3800, April 2015 PSN 7530-02-000-9058 See Reverse for Instructions

Leah Cary, Suite 500  
Nevada 89101

Attach this card to the back of the mailpiece,  
or on the front if space permits.

1. Article Addressed to:  
**Leah Cary**  
**4928 Crystal Breeze Ln.**  
**North Las Vegas, NV 89031**

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No



9590 9402 3134 7166 6549 67

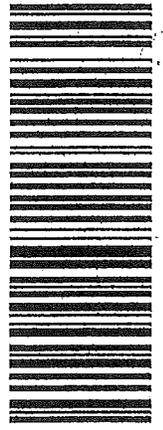
2. Article Number (Transfer from service label)  
**7018 0040 0000 8259 2246**

3. Service Type
- Adult Signature
  - Adult Signature Restricted Delivery
  - Certified Mail®
  - Certified Mail Restricted Delivery
  - Collect on Delivery
  - Collect on Delivery Restricted Delivery
  - Insured Mail
  - Insured Mail Restricted Delivery (over \$500)
  - Priority Mail Express®
  - Registered Mail™
  - Registered Mail Restricted Delivery
  - Return Receipt for Merchandise
  - Signature Confirmation™
  - Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7018 0040 0000 8259 2246



**Leah Cary**  
**4928 Crystal**  
**North Las Vegas**

7018 0040 0000 8259 2246

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
*Domestic Mail Only*

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee \$ \_\_\_\_\_

Extra Services & Fees (check box, add fees as appropriate)

- Return Receipt (hardcopy) \$ \_\_\_\_\_
- Return Receipt (electronic) \$ \_\_\_\_\_
- Certified Mail Restricted Delivery \$ \_\_\_\_\_
- Adult Signature Required \$ \_\_\_\_\_
- Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

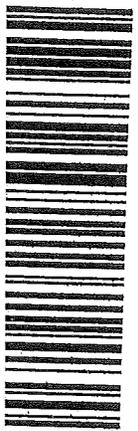
Sent To **Leah Cary**

Street and Apt. No., or PO Box No. **4928 Crystal Breeze Ln.**

City, State, ZIP+4® **North Las Vegas, NV 89031**

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

Postmark Here



7912 6528 0000 8259 2161

Terria Coaxum  
8904 Goldstone Ave  
Las Vegas, NV 89143

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)  
**OFFICIAL USE**

Certified Mail Fee \$ \_\_\_\_\_

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ \_\_\_\_\_

Return Receipt (electronic) \$ \_\_\_\_\_

Certified Mail Restricted Delivery \$ \_\_\_\_\_

Adult Signature Required \$ \_\_\_\_\_

Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage Here \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

Sent To Terria Coaxum  
 Street and PO Box No. 8904 Goldstone Ave.  
 City, State, ZIP+4® Las Vegas, NV 89143

PS Form 3811, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7018 0040 0000 8259 2161

■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
Terria Coaxum  
8904 Goldstone Ave.  
Las Vegas, NV 89143

9590 9402 3134 7166 6534 03

2. Article Number (Transfer from service label)  
 7018 0040 0000 8259 2161

PS Form 3811, July 2015 PSN 7530-02-000-9053

3. Service Type  
 Certified Mail®  
 Adult Signature  
 Adult Signature Restricted Delivery  
 Registered Mail™  
 Registered Mail Restricted Delivery  
 Priority Mail Express®

4.  Certified Mail®  
 Certified Mail Restricted Delivery  
 Collect on Delivery  
 Collect on Delivery Restricted Delivery  
 Signature Confirmation™  
 Signature Confirmation Restricted Delivery  
 Insured Mail  
 Insured Mail Restricted Delivery (over \$500)

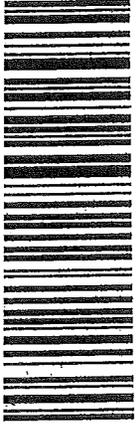
Domestic Return Receipt

D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

B. Received by (Printed Name)

C. Date of Delivery

Las Vegas, Nevada 89101



7018 0040 0000 8259 2154

Montrail Green  
8904 Goldstone Ave.  
Las Vegas, NV

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)  
OFFICIAL USE

Certified Mail Fee \$ \_\_\_\_\_

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ \_\_\_\_\_

Return Receipt (electronic) \$ \_\_\_\_\_

Certified Mail Restricted Delivery \$ \_\_\_\_\_

Adult Signature Required \$ \_\_\_\_\_

Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage Here \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

Sent To Montrail Green

Street and Apt. No., or PO Box No. 8904 Goldstone Ave.

City, State, ZIP+4® Las Vegas, NV 89143

PS Form 3811, July 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7018 0040 0000 8259 2154

■ Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:  
Montrail Green  
8904 Goldstone Ave.  
Las Vegas, NV 89143

9590 9402 3134 7166 6534 10

2. Article Number (Transfer from service label)  
7018 0040 0000 8259 2154

PS Form 3811, July 2015 PSN 7530-02-000-9053

D. Is delivery address different from item 1?  Yes  No  
If YES, enter delivery address below:

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Registered Mail Restricted Delivery  
 Certified Mail®  
 Certified Mail Restricted Delivery  
 Return Receipt for Merchandise  
 Return Receipt  
 Adult Signature Restricted Delivery  
 Adult Signature  
 Collect on Delivery  
 Collect on Delivery Restricted Delivery  
 Signature Confirmation™  
 Signature Confirmation Restricted Delivery  
 Insured Mail (over \$500)  
 Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

1111 Street, Suite 500  
Las Vegas, Nevada 89101

7018 0040 0000 8259 2215



Print your name and address on the reverse so that we can return the card to you.  
 Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
 Ryan McAllister Sr.  
 819 Red Sox Ave.  
 North Las Vegas, NV 89030

2. Article Number (Transfer from service label)  
 7018 0040 0000 8259 2215

PS Form 3811, July 2015 PSN 7530-02-000-9053

Agent  
 Addressee

B. Received by (Printed Name) \_\_\_\_\_ C. Date of Delivery \_\_\_\_\_

D. Is delivery address different from Item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input checked="" type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

Domestic Return Receipt

Ryan McAllister  
819 Red Sox  
North Las Vegas

7018 0040 0000 8259 2215

U.S. Postal Service™  
 CERTIFIED MAIL® RECEIPT  
 Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee \$ \_\_\_\_\_

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postage \$ \_\_\_\_\_

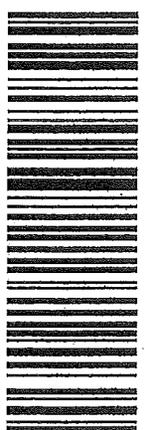
Total Postage and Fees \$ \_\_\_\_\_

Sent To Ryan McAllister Sr.  
 Street and Apt. No. or PO Box No. 819 Red Sox Ave.  
 City, State, ZIP+4® North Las Vegas NV 89030

PS Form 3800, April 2015 PSN 7530-01-000-9047 See Reverse for Instructions

Postmark Here

gas, Nevada 89101



7018 0040 0000 8259 2208

Erin Newport  
6006 Belleau  
Sacramento, CA

1/24/11

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®  
OFFICIAL USE

Certified Mail Fee \$ \_\_\_\_\_

Extra Services & Fees (check box, add fee as appropriate):

Return Receipt (hardcopy) \$ \_\_\_\_\_

Return Receipt (electronic) \$ \_\_\_\_\_

Certified Mail Restricted Delivery \$ \_\_\_\_\_

Adult Signature Required \$ \_\_\_\_\_

Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

Sent To  
Erin Newport  
Street and Apt. No., or PO Box No.  
6006 Belleau Wood Ln.  
City, State, ZIP+4®  
Sacramento, CA 95822

PS Form 3811, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7018 0040 0000 8259 2208

PS Form 3811, July 2015 PSN 7530-02-000-9053

1. Article Addressed to:  
Erin Newport  
6006 Belleau Wood Ln  
Sacramento CA 95822

2. Article Number (Transfer from service label)  
7018 0040 0000 8259 2208

3. Service Type  
 Certified Mail®  
 Certified Mail Restricted Delivery  
 Adult Signature  
 Adult Signature Restricted Delivery  
 Registered Mail®  
 Registered Mail Restricted Delivery  
 Priority Mail Express®  
 Return Receipt (hardcopy)  
 Return Receipt (electronic)

4. Is delivery address different from item 1?  
Yes  No

If YES, enter delivery address below:

B. Received by (Printed Name)  
C. Date of Delivery

A. Addressee

Domestic Return Receipt (over \$500)  
 Insured Mail Restricted Delivery  
 Signature Confirmation  
 Collect on Delivery Restricted Delivery  
 Certified Mail Restricted Delivery  
 Return Receipt (hardcopy)

AA055

UCHMILLER & ASSOCIATES, LLC  
 S. 4th Street, Suite 500  
 Las Vegas, Nevada 89101



7018 0040 0000 8259 2192

Joy Anne Newport  
 1816 Soto Ln.  
 North Las Vegas

PS Form 3811, July 2015 PSN 7530-02-000-9053

1. Article Addressed to:  
 Attach this card to the back of the mailpiece, or on the front if space permits.  
 Print your name and address on the reverse so that we can return the card to you.

2. Article Number (Transfer from service label)  
 7018 0040 0000 8259 2192

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Adult Signature Restricted Delivery  
 Certified Mail®  
 Certified Mail Restricted Delivery  
 Return Receipt for Merchandise  
 Return Receipt  
 Collect on Delivery  
 Insured Mail (over \$500)  
 Restricted Delivery  
 Signature Confirmation  
 Restricted Delivery

D. Is delivery address different from item 1? Yes  No

If YES, enter delivery address below:

B. Received by (Printed Name)  
 C. Date of Delivery

Agent Addressee

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)  
**OFFICIAL USE**

Certified Mail Fee \$ \_\_\_\_\_  
 Extra Services & Fees (check box, add fee as appropriate)  
 Return Receipt (hardcopy) \$ \_\_\_\_\_  
 Return Receipt (electronic) \$ \_\_\_\_\_  
 Certified Mail Restricted Delivery \$ \_\_\_\_\_  
 Adult Signature Required \$ \_\_\_\_\_  
 Adult Signature Restricted Delivery \$ \_\_\_\_\_  
 Postage \$ \_\_\_\_\_  
 Total Postage and Fees \$ \_\_\_\_\_

Postmark Here

Sent To Joy Anne Newport  
 Street and Apt. No., or PO Box No. 1816 Soto Ln.  
 City, State, ZIP+4® North Las Vegas, NV 89032  
 PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7018 0040 0000 8259 2192



7018 0040 0000 8259 2185

Kelly Newport  
1816 Soto Ln.  
North Las Vegas, NV 89032

PS Form 3811, July 2015 PSN 7530-02-000-9053

1. Article Addressed to: Kelly Newport  
1816 Soto Ln.  
North Las Vegas NV 89032

2. Article Number (Transfer from service label)  
7018 0040 0000 8259 2185

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Registered Mail™ Restricted Delivery  
 Certified Mail®  
 Adult Signature Restricted Delivery  
 Certified Mail® Restricted Delivery  
 Collect on Delivery  
 Collect on Delivery Restricted Delivery  
 Return Receipt (hardcopy)  
 Return Receipt (electronic)  
 Certified Mail Restricted Delivery  
 Adult Signature Required  
 Adult Signature Restricted Delivery

4. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

5. Addressee  
 B. Received by (Printed Name)  
 C. Date of Delivery

6. Domestic Return Receipt

7018 0040 0000 8259 2185

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

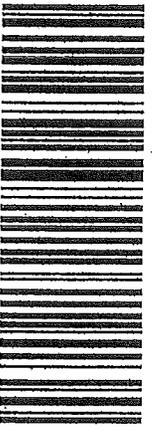
Postmark Here

Sent To Kelly Newport  
 Street and Apt. No., PO Box No. 1816 Soto Ln.  
 City, State, ZIP+4® North Las Vegas, NV 89032

See Reverse for Instructions

4th Street, Suite 500  
Vegas, Nevada 89101

DOMESTIC MAIL



7018 0040 0000 8259 2147

Patricia Horton  
3674 Santa Sa  
Las Cruces, NM

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage Here \$

Total Postage and Fees \$

Sent to Patricia Horton  
 Street, or PO Box No. 3674 Santa Sabina Ave  
 City, State, ZIP+4 Las Cruces NM 89012  
 PS Form 3811, April 2015 PSN 7590-02-000-9058 See Reverse for Instructions

7018 0040 0000 8259 2147

PS Form 3811, July 2015 PSN 7590-02-000-9058

2 Article Number (Transfer from service label)  
7018 0040 0000 8259 2147

9590 9402 3134 7166 6534 27

Patricia Horton  
3674 Santa Sabina Ave.  
Las Cruces, NM 89012

1. Article Addressed to:  
 Attach this card to the back of the mailpiece, or on the front if space permits.  
 so that we can return the card to you.

3. Service Type  
 Adult Signature Restricted Delivery  
 Adult Signature Restricted Delivery  
 Certified Mail®  
 Certified Mail Restricted Delivery  
 Collect on Delivery  
 Collect on Delivery Restricted Delivery  
 Signature Confirmation™  
 Signature Confirmation Restricted Delivery  
 Return Receipt (hardcopy)  
 Return Receipt (electronic)  
 Registered Mail™  
 Registered Mail Restricted Delivery  
 Priority Mail Express®

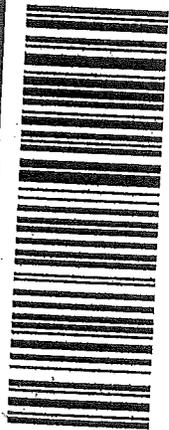
D. Is delivery address different from item 1? Yes  No  If YES, enter delivery address below:

B. Received by (Printed Name)  
C. Date of Delivery

Agent  
 Addressee

Domestic Return Receipt

Las Vegas, Nevada 89101



7018 0040 0000 8259 2253

Cindy Dean  
3708 Colfax Circle  
Las Vegas, NV 89084

PS Form 3811, July 2015 PSN 7530-02-000-9053

1. Article Addressed to:  
Cindy Dean  
3708 Colfax Circle  
Las Vegas, NV 89084

2. Article Number (Transfer from service label)  
7018 0040 0000 8259 2253

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Registered Mail Restricted Delivery  
 Certified Mail®  
 Certified Mail Restricted Delivery  
 Collect on Delivery  
 Collect on Delivery Restricted Delivery  
 Signature Confirmation™  
 Signature Confirmation Restricted Delivery  
 Return Receipt for Merchandise  
 Return Receipt for Delivery  
 Insured Mail (over \$500)  
 Insured Mail Restricted Delivery  
 Restricted Delivery

D. Is delivery address different from item 1? Yes  No   
 If YES, enter delivery address below:

B. Received by (Printed Name)  
 C. Date of Delivery

Domestic Return Receipt

7018 0040 0000 8259 2253

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)  
 Return Receipt (hardcopy) \$  
 Return Receipt (electronic) \$  
 Certified Mail Restricted Delivery \$  
 Adult Signature Required \$  
 Adult Signature Restricted Delivery \$

Postmark  
Here

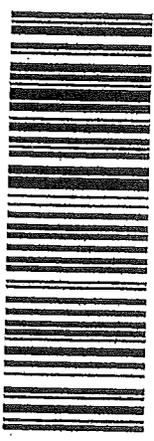
Postage \$

Total Postage and Fees \$

Sent To  
Cindy Dean  
3708 Colfax Circle  
Las Vegas, NV 89084

AA059

S. 4th Street, Suite 500  
Las Vegas, Nevada 89101



7018 0040 0000 8259 2260

U.S. Postal Service  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only  
For delivery information, visit our website at [www.usps.com](http://www.usps.com)  
**OFFICIAL USE**

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
 Return Receipt (hardcopy) \$  
 Return Receipt (electronic) \$  
 Certified Mail Restricted Delivery \$  
 Adult Signature Required \$  
 Adult Signature Restricted Delivery \$  
 Postage \$  
 Total Postage and Fees \$

Postmark  
Here

Sent To Cindy Bear  
 Street and Apt. No. 6916 Dipper Ave.  
 City, State, ZIP+4® North Las Vegas, NV 89084  
 PS Form 3811, April 2015 PSN 7530-02-000-9055 See Reverse for Instructions

Cindy Bear  
6916 Dipper Ave.  
North Las Vegas, NV 89084

1. Article Addressed to:  
 Cindy Bear  
 6916 Dipper Ave.  
 North Las Vegas, NV 89084

2. Article Number (Transfer from service label)  
 7018 0040 0000 8259 2260

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Registered Mail Restricted Delivery  
 Certified Mail®  
 Certified Mail Restricted Delivery  
 Return Receipt (hardcopy)  
 Collect on Delivery  
 Insured Mail  
 Insured Mail Restricted Delivery (over \$500)  
 Restricted Delivery

4. Domestic Return Receipt

D. Is delivery address different from item 1? Yes  No

If YES, enter delivery address below:

B. Received by (Printed Name)  
 Addressee  
 Agent

C. Date of Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9055

# **EXHIBIT B**

# **EXHIBIT B**

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																	
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee																	
1. Article Addressed to: Ryan McAllister Jr. 1117101 P.O. Box 208SDCC Indian Springs, NV 89070	B. Received by (Printed Name) Terry Hill	C. Date of Delivery 12/16/19																
2. Article Number (Transfer from service label) 7018 0040 0000 8259 2178	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No																	
PS Form 3811, July 2015 PSN 7530-02-000-9053	3. Service Type <table border="0" style="width: 100%;"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input checked="" type="checkbox"/> Return Receipt for Merchandise™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>		<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input checked="" type="checkbox"/> Return Receipt for Merchandise™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																	
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																	
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																	
<input type="checkbox"/> Certified Mail Restricted Delivery	<input checked="" type="checkbox"/> Return Receipt for Merchandise™																	
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™																	
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																	
<input type="checkbox"/> Insured Mail																		
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																		

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p><i>[Handwritten Signature]</i></p>																
<p>1. Article Addressed to:</p> <p><i>Jermia Coaxum</i> <i>8904 Goldstone Ave.</i> <i>Las Vegas, NV 89143</i></p>  <p>9590 9402 3134 7166 6534 03</p>	<p>B. Received by (Printed Name)</p> <p>C. Date of Delivery <i>12/30/19</i></p>																
<p>2. Article Number (Transfer from service label)</p> <p>7018 0040 0000 8259 2161</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>																
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input checked="" type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input checked="" type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input checked="" type="checkbox"/> Return Receipt for Merchandise																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>W. Cary</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to:</p> <p><i>William Cary</i>  <i>4928 Crystal Breeze Ln</i>  <i>North Las Vegas, NV 89031</i></p>	<p>B. Received by (Printed Name) <i>W. Cary</i> C. Date of Delivery <i>12/19/19</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p>
 9590 9402 3134 7166 6549 74	<p>3. Service Type</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Adult Signature</li> <li><input type="checkbox"/> Adult Signature Restricted Delivery</li> <li><input checked="" type="checkbox"/> Certified Mail®</li> <li><input type="checkbox"/> Certified Mail Restricted Delivery</li> <li><input type="checkbox"/> Collect on Delivery</li> <li><input type="checkbox"/> Collect on Delivery Restricted Delivery</li> <li><input type="checkbox"/> Insured Mail</li> <li><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</li> <li><input type="checkbox"/> Priority Mail Express®</li> <li><input type="checkbox"/> Registered Mail™</li> <li><input type="checkbox"/> Registered Mail Restricted Delivery</li> <li><input checked="" type="checkbox"/> Return Receipt for Merchandise</li> <li><input type="checkbox"/> Signature Confirmation™</li> <li><input type="checkbox"/> Signature Confirmation Restricted Delivery</li> </ul>
<p>2. Article Number (Transfer from service label)</p> <p><i>7018 0040 0000 8259 2239</i></p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053 <span style="float: right;">Domestic Return Receipt</span></p>	

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Re Ann McAllister  
2293 Exeter Dr, Apt. D  
Las Vegas, NV 89156



9590 9402 3134 7166 6549 81

2. Article Number (Transfer from service label)

7018 0040 0000 8259 2222

PS Form 3811, July 2015 PSN 7530-02-000-9059

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

*Re Ann M*

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

12-16

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

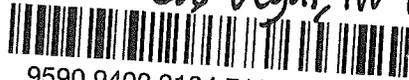
Domestic Return Receipt

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Leah Cary  
4928 Crystal Bruce Ln.  
North Las Vegas, NV 89031



9590 9402 3134 7166 6549 67

2. Article Number (Transfer from service label)

7018 0040 0000 8259 2246

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X Leah Cary

- Agent
- Addressee

B. Received by (Printed Name)

Leah Cary

C. Date of Delivery

12/19/19

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
Montrail Green  
8904 Goldstone Ave.  
Las Vegas, NV 89143



9590 9402 3134 7166 6534 10

2. Article Number (Transfer from service label)  
7018 0040 0000 8259 2154

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
*[Handwritten Signature]*  Agent  Addressee

B. Received by (Printed Name) \_\_\_\_\_ C. Date of Delivery  
12/30/19

D. Is delivery address different from item 1?  Yes  No  
If YES, enter delivery address below: \_\_\_\_\_

3. Service Type
- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                               | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery           | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®                    | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery            | <input checked="" type="checkbox"/> Return Receipt for Merchandise  |
| <input type="checkbox"/> Collect on Delivery                           | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery       | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail                                  |   |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) |   |

# EXHIBIT C

# EXHIBIT C

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cindy Bean  
 6916 Dipper Ave. 89084  
 North Las Vegas, NV 89084



9590 9402 3134 7166 6549 43

2. Article Number (Transfer from service label)

7018 0040 0000 8259 2260

PS Form 3811, July 2015 PSN 7530-02-000-9058

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

- D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

North Las Vegas, NV 89084

6916 Dipper Ave.

851 CB 1  
 RETURN TO SENDER  
 ATTEMPTED - NOT KNOWN  
 UNABLE TO FORWARD  
 0112/23/19  
 EC: 89161620725  
 2194335973-0254

RTS  
 Address See  
 Envelope

7018 0040 0000 8259 2260



400 S 4th Street, Suite 300  
 Las Vegas, Nevada 89101

AA069

890738.082

0621