

## IN THE SUPREME COURT OF THE STATE OF NEVADA

### INDICATE FULL CAPTION:

IN THE MATTER OF THE GUARDIANSHIP  
OF THE PERSON AND ESTATE OF: MAE R.  
BROWN, ADULT PROPOSED PROTECTED  
PERSON

SHAWNTINA BROWN-PALMORE,  
Appellant,

vs.

MAE R. BROWN, AND TYRESE BROWN,  
Respondents.

No. 82935

### DOCKETING STATEMENT CIVIL APPEALS

Electronically Filed  
Jun 23 2021 02:50 p.m.  
Elizabeth A. Brown  
State of Nevada Supreme Court

### GENERAL INFORMATION

Appellants must complete this docketing statement in compliance with NRAP 14(a). The purpose of the docketing statement is to assist the Supreme Court in screening jurisdiction, identifying issues on appeal, assessing presumptive assignment to the Court of Appeals under NRAP 17, scheduling cases for oral argument and settlement conferences, classifying cases for expedited treatment and assignment to the Court of Appeals, and compiling statistical information.

### WARNING

This statement must be completed fully, accurately and on time. NRAP 14(c). The Supreme Court may impose sanctions on counsel or appellant if it appears that the information provided is incomplete or inaccurate. *Id.* Failure to fill out the statement completely or to file it in a timely manner constitutes grounds for the imposition of sanctions, including a fine and/or dismissal of the appeal.

A complete list of the documents that must be attached appears as Question 27 on this docketing statement. Failure to attach all required documents will result in the delay of your appeal and may result in the imposition of sanctions.

This court has noted that when attorneys do not take seriously their obligations under NRAP 14 to complete the docketing statement properly and conscientiously, they waste the valuable judicial resources of this court, making the imposition of sanctions appropriate. See KDI Sylvan Pools v. Workman, 107 Nev. 340, 344, 810 P.2d 1217, 1220 (1991). Please use tab dividers to separate any attached documents.

1. Judicial District 8th - Family Department B  
County Clark Judge Linda Marquis  
District Ct. Case No. G-21-054599-A

**2. Attorney filing this docketing statement:**

Attorney Theodore M. Medlyn, Esq. - #15284 Telephone (702) 240.5191

Firm Bowen Law Offices

Address 9960 W. Cheyenne Ave., Suite 250  
Las Vegas, Nevada 89129

Under Lead Partner - Jerome R. Bowen, Esq. - #4540

Client(s) Shawntina Brown-Palmore

If this is a joint statement by multiple appellants, add the names and addresses of other counsel and the names of their clients on an additional sheet accompanied by a certification that they concur in the filing of this statement.

**3. Attorney(s) representing respondents(s):**

Attorney Frank J. Toti, Esq. - #5804 Telephone (702) 364.1603

Firm The Law Offices of Frank J. Toti, Esq.

Address 6900 Westcliff Dr., Suite 500  
Las Vegas, NV 89145

Client(s) Tyrese Brown

Attorney Scott Cardenas, Esq. - #14851 Telephone (702) 386-1539

Firm The Legal Aid Center of Southern Nevada

Address 725 E. Charleston Blvd.  
Las Vegas, NV 89104

Client(s) Mae R. Brown (Deceased)

(List additional counsel on separate sheet if necessary)

**4. Nature of disposition below (check all that apply):**

- |   |   |
|---|---|
| <input type="checkbox"/> Judgment after bench trial         | <input checked="" type="checkbox"/> Dismissal:  |
| <input type="checkbox"/> Judgment after jury verdict        | <input type="checkbox"/> Lack of jurisdiction   |
| <input type="checkbox"/> Summary judgment                   | <input type="checkbox"/> Failure to state a claim   |
| <input type="checkbox"/> Default judgment                   | <input type="checkbox"/> Failure to prosecute   |
| <input type="checkbox"/> Grant/Denial of NRCP 60(b) relief  | <input checked="" type="checkbox"/> Other (specify): <u>NRS159.044 Physicians Certificate</u> |
| <input type="checkbox"/> Grant/Denial of injunction         | <input type="checkbox"/> Divorce Decree:  |
| <input type="checkbox"/> Grant/Denial of declaratory relief | <input type="checkbox"/> Original <input type="checkbox"/> Modification                       |
| <input type="checkbox"/> Review of agency determination     | <input type="checkbox"/> Other disposition (specify): _____                                   |

**5. Does this appeal raise issues concerning any of the following?**

- ☐ Child Custody
- ☐ Venue
- ☐ Termination of parental rights

**6. Pending and prior proceedings in this court.** List the case name and docket number of all appeals or original proceedings presently or previously pending before this court which are related to this appeal:

- 1) G-21-054632-A - Filed by Tyrese Brown on 04/08/21  
- Consolidated into G-21-054599-A
- 2) G-21-054970-A - Filed by Shawntina Brown-Palmore  
- Voluntarily dismissed (Deceased)

**7. Pending and prior proceedings in other courts.** List the case name, number and court of all pending and prior proceedings in other courts which are related to this appeal (e.g., bankruptcy, consolidated or bifurcated proceedings) and their dates of disposition:

- 1) A-21-836433-C - 8th Judicial District Court Department 01  
- action for declaratory and injunctive relief regarding cremation between Appellant and Respondant Tyrese

**8. Nature of the action.** Briefly describe the nature of the action and the result below:

- The Matter came before the Court on petition for Temporary and Permanent Guardianship related to the Proposed Protected Person Mae R. Brown. Petitioner/Appellant Shawntina alleges abuse, isolation, and wrongful conduct of Respondant Tyrese Brown. (Filed 03/31/21)
- Respondant Tyrese Brown brought a cross-petition requesting his own Guardianship, citing Power of Attorney. (Filed 04/08/21)
- Proposed protected Person's Counsel the Legal Aid Center of Southern Nevada moved to dismiss both actions for lack of a Physicians Certificate. (Filed 04/30/21) Appellant's Counsel argued they had sufficiently complied with NRS 159.044 to survive dismissal. (Filed 05/02/21) (Hearing 05/06/21)
- The Court determined it lacked the authority not to dismiss the case. (Order 5/14/21)

**9. Issues on appeal.** State concisely the principal issue(s) in this appeal (attach separate sheets as necessary):

- A) Can a District Court 1) open Discovery or 2) its own Investigation into a Guardianship Matter where a Petition does not satisfy all requirements of NRS 159.044?
- B) Is it proper for a District Court to dismiss an action when Petitioner alleges facts indicating that information necessary under NRS 159.044 is not "ascertain(able) or obtain(able)"?

**10. Pending proceedings in this court raising the same or similar issues.** If you are aware of any proceedings presently pending before this court which raises the same or similar issues raised in this appeal, list the case name and docket numbers and identify the same or similar issue raised:

Counsel is unaware of similar issues pending before the Nevada Supreme Court.

It is upon information and belief that the issue of NRS 159.044 Dismissal for lack of Physicians Certificate is too common in the 8th Judicial District Court to properly enumerate for the Courts consideration.

**11. Constitutional issues.** If this appeal challenges the constitutionality of a statute, and the state, any state agency, or any officer or employee thereof is not a party to this appeal, have you notified the clerk of this court and the attorney general in accordance with NRAP 44 and NRS 30.130?

☒ N/A

☐ Yes

☐ No

If not, explain:

**12. Other issues.** Does this appeal involve any of the following issues?

☐ Reversal of well-settled Nevada precedent (identify the case(s))

☐ An issue arising under the United States and/or Nevada Constitutions

☐ A substantial issue of first impression

☒ An issue of public policy

☐ An issue where en banc consideration is necessary to maintain uniformity of this court's decisions

☐ A ballot question

If so, explain: This case concerns inherent and statutory authority of the courts in the Administration of Guardianships.  
The case addresses the misuses of Guardianship precedent and artificial hurdles to evade Judicial oversight and subject vulnerable persons to isolation and exploitation.

**13. Assignment to the Court of Appeals or retention in the Supreme Court.** Briefly set forth whether the matter is presumptively retained by the Supreme Court or assigned to the Court of Appeals under NRAP 17, and cite the subparagraph(s) of the Rule under which the matter falls. If appellant believes that the Supreme Court should retain the case despite its presumptive assignment to the Court of Appeals, identify the specific issue(s) or circumstance(s) that warrant retaining the case, and include an explanation of their importance or significance:

Appellant believes the matter is appropriate for subparagraph 12 of NRAP 17. A ruling on the applicability of the clause in NRS 159.044 and defining the scope of a Guardianship Court's authority would have statewide implication.

This case also touches tangentially on multiple matters of statewide importance previously before the court in the:

"Final Report; Nevada Supreme Court's Commission to Study the Administration of Guardianships in Nevada's Courts [Administrative Docket Number 5071] September 2016"

**14. Trial.** If this action proceeded to trial, how many days did the trial last? N/A

Was it a bench or jury trial? N/A

**15. Judicial Disqualification.** Do you intend to file a motion to disqualify or have a justice recuse him/herself from participation in this appeal? If so, which Justice?

## TIMELINESS OF NOTICE OF APPEAL

**16. Date of entry of written judgment or order appealed from** May 14, 2021

If no written judgment or order was filed in the district court, explain the basis for seeking appellate review:

N/A

**17. Date written notice of entry of judgment or order was served** N/A

Was service by:

☐ Delivery

☐ Mail/electronic/fax

**18. If the time for filing the notice of appeal was tolled by a post-judgment motion (NRCP 50(b), 52(b), or 59)**

(a) Specify the type of motion, the date and method of service of the motion, and the date of filing.

☐ NRCP 50(b)      Date of filing N/A

☐ NRCP 52(b)      Date of filing N/A

☐ NRCP 59      Date of filing N/A

**NOTE: Motions made pursuant to NRCP 60 or motions for rehearing or reconsideration may toll the time for filing a notice of appeal. See AA Primo Builders v. Washington, 126 Nev. \_\_\_, 245 P.3d 1190 (2010).**

(b) Date of entry of written order resolving tolling motion N/A

(c) Date written notice of entry of order resolving tolling motion was served N/A

Was service by:

☐ Delivery

☐ Mail

**19. Date notice of appeal filed** May 14, 2021

If more than one party has appealed from the judgment or order, list the date each notice of appeal was filed and identify by name the party filing the notice of appeal:

N/A

**20. Specify statute or rule governing the time limit for filing the notice of appeal, e.g., NRAP 4(a) or other**

NRAP 4(a)(1)

### **SUBSTANTIVE APPEALABILITY**

**21. Specify the statute or other authority granting this court jurisdiction to review the judgment or order appealed from:**

(a)

☒ NRAP 3A(b)(1)

☐ NRS 38.205

☐ NRAP 3A(b)(2)

☐ NRS 233B.150

☐ NRAP 3A(b)(3)

☐ NRS 703.376

☐ Other (specify) \_\_\_\_\_

(b) Explain how each authority provides a basis for appeal from the judgment or order:

An Order Denying is a final Judgement under NRAP 3A(b)(1).

**22. List all parties involved in the action or consolidated actions in the district court:**

(a) Parties:

- 1) Shawntina Brown-Palmore
- 2) Tyrese Brown
- 3) Mae R. Brown (Deceased)

(b) If all parties in the district court are not parties to this appeal, explain in detail why those parties are not involved in this appeal, *e.g.*, formally dismissed, not served, or other:

Mae R. Brown has passed away on June 11, 2021

**23. Give a brief description (3 to 5 words) of each party's separate claims, counterclaims, cross-claims, or third-party claims and the date of formal disposition of each claim.**

Shawntina Brown-Palmore -- Guardianship over Adult: Mae R. Brown  
Tyrese Brown -- Guardianship over Adult: Mae R. Brown  
Mae R. Brown (through counsel) - Objection to Guardianship(s)

**24. Did the judgment or order appealed from adjudicate ALL the claims alleged below and the rights and liabilities of ALL the parties to the action or consolidated actions below?**

☒ Yes

☐ No

**25. If you answered "No" to question 24, complete the following:**

(a) Specify the claims remaining pending below:

N/A

(b) Specify the parties remaining below:

N/A

(c) Did the district court certify the judgment or order appealed from as a final judgment pursuant to NRCP 54(b)?

☐ Yes

☐ No

(d) Did the district court make an express determination, pursuant to NRCP 54(b), that there is no just reason for delay and an express direction for the entry of judgment?

☐ Yes

☐ No

**26. If you answered "No" to any part of question 25, explain the basis for seeking appellate review (e.g., order is independently appealable under NRAP 3A(b)):**

N/A

**27. Attach file-stamped copies of the following documents:**

- The latest-filed complaint, counterclaims, cross-claims, and third-party claims
- Any tolling motion(s) and order(s) resolving tolling motion(s)
- Orders of NRCP 41(a) dismissals formally resolving each claim, counterclaims, cross-claims and/or third-party claims asserted in the action or consolidated action below, even if not at issue on appeal
- Any other order challenged on appeal
- Notices of entry for each attached order

## VERIFICATION

I declare under penalty of perjury that I have read this docketing statement, that the information provided in this docketing statement is true and complete to the best of my knowledge, information and belief, and that I have attached all required documents to this docketing statement.

Shawntina Brown-Palmore

Name of appellant

Theodore M. Medlyn - #15284

Name of counsel of record

06/18/2021

Date

Signature of counsel of record

Clark County, Nevada

State and county where signed

## CERTIFICATE OF SERVICE

I certify that on the 21st day of June, 2021, I served a copy of this completed docketing statement upon all counsel of record:

☐ By personally serving it upon him/her; or

☒ By mailing it by first class mail with sufficient postage prepaid to the following address(es): (NOTE: If all names and addresses cannot fit below, please list names below and attach a separate sheet with the addresses.) **Via E-Service with E-flex NV Supreme Court**

Frank Toti, Esq.  
frank@fjtesq.com

Scott Cardena, Esq.  
scardenas@lacsns.org

Dated this 21st day of June, 2021

/s/ Trish Wilcox

Signature

# **EXHIBIT 1**

*Shawntina Brown-Palmore*  
CLERK OF THE COURT

VDSM  
JEROME BOWEN, ESQ.  
Nevada Bar No. 4540  
THEODORE M. MEDLYN, ESQ.  
Nevada Bar No. 15284  
**BOWEN LAW OFFICES**  
9960 W. Cheyenne Ave., Suite 250  
Las Vegas, Nevada 89129  
Telephone: (702) 240-5191  
Facsimile: (702) 240-5797  
twilcox@lwlawfirm.com  
*Attorneys for Petitioner Shawntina Brown-Palmore*

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

In the Matter of the Guardianship of The  
Person and Estate of:

Case No.: G-21-054970-A  
Dept. No.: B

MAE R. BROWN,

No Hearing Requested

An Adult Proposed Protected Person

**NOTICE AND ORDER OF VOLUNTARY DISMISSAL**

Upon the matter falling moot as the Proposed Protected Person has deceased,  
and pursuant to NRCP 41(a), that no responsive pleadings having been served in the  
above-mentioned matter, Plaintiff hereby dismisses its request for Guardianship  
without prejudice.

DATED this 19th day of June, 2021.

**BOWEN LAW OFFICES**

*JM*  
JEROME R. BOWEN, ESQ.  
Nevada Bar No. 4540  
THEODORE M. MEDLYN, ESQ.  
Nevada Bar No. 15284  
9960 W. Cheyenne Ave., Suite 250  
Las Vegas, Nevada 89129  
ATTORNEY FOR PLAINTIFF

**BOWEN LAW OFFICES**  
Conquistador Plaza  
9960 W. Cheyenne Ave., Suite 250  
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702-240-5191 FAX: 702-240-5797

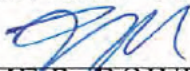
**ORDER**

IT IS HEREBY ORDERED that the above-entitled action is dismissed without prejudice.

DATED this \_\_\_\_ day of \_\_\_\_\_, 2021.

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

Submitted by:  
**BOWEN LAW OFFICES**



JEROME R. BOWEN, ESQ.  
Nevada Bar No. 4540  
THEODORE M. MEDLYN, ESQ.  
Nevada Bar No. 15284  
*ATTORNEY FOR PLAINTIFF*

Dated this 15th day of June, 2021



**BFA 0F8 76C6 8E31**  
**Linda Marquis**  
**District Court Judge**

1 **CSERV**

2  
3 DISTRICT COURT  
CLARK COUNTY, NEVADA

4  
5  
6 In the Matter of the Guardianship CASE NO: G-21-054970-A  
7 of:  
8 Mae Brown, Protected Person(s)  
9

DEPT. NO. Department B

10 **AUTOMATED CERTIFICATE OF SERVICE**

11 This automated certificate of service was generated by the Eighth Judicial District  
12 Court. The foregoing Voluntary Dismissal was served via the court's electronic eFile system  
to all recipients registered for e-Service on the above entitled case as listed below:

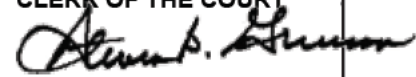
13 Service Date: 6/15/2021

14 Jerome Bowen twilcox@lvlawfirm.com

15 Raelene Jemison rjemison@lvlawfirm.com

16 Theodore Medlyn tmedlyn@lvlawfirm.com  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

# **EXHIBIT 2**



1 **PET**

2 JEROME BOWEN, ESQ.

3 Nevada Bar No. 4540

4 THEODORE M. MEDLYN, ESQ.

5 Nevada Bar No. 15284

6 **BOWEN LAW OFFICES**

7 9960 W. Cheyenne Ave., Suite 250

8 Las Vegas, Nevada 89129

9 Telephone: (702) 240-5191

10 Facsimile: (702) 240-5797

11 twilcox@lvlawfirm.com

12 *Attorneys for Petitioner Shawntina Brown-Palmore*

CASE NO: G-21-054970-A  
Department: To be determined

13 **DISTRICT COURT - FAMILY DIVISION**  
14 **CLARK COUNTY, NEVADA**

15 In the Matter of the Guardianship of The  
16 Person and Estate of:

17 MAE R. BROWN,

18 An Adult Proposed Protected Person

Case No.:

Dept. No.:

Hearing Requested

19 **PETITION FOR APPOINTMENT OF GUARDIAN OVER AN ADULT &**

20 **MOTION FOR EMERGENCY TEMPORARY GUARDIANSHIP**

21 Petitioner, Shawntina Brown-Palmore, is seeking to be appointed as Guardian  
22 over the Person and Estate of the proposed protected person, Mae R. Brown,  
23 Petitioner's biological mother, age 78 years, DOB: 02/20/1943. The address(s) of the  
24 proposed protected person is 233 13<sup>th</sup> Street #309, Las Vegas, NV 89101; Kindred  
25 Hospital, 5110 Sahara Ave., Las Vegas, NV 89146; Desert Springs Hospital (Room  
26 244), 2075 E. Flamingo Road, Las Vegas, NV 89119. In accordance with Chapter 159  
27 of the Nevada Revised Statutes, Petitioner makes the following representations to this  
28

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Conquistador Plaza  
9960 W. Cheyenne Ave., Suite 250  
Las Vegas, Nevada 89129  
(702) 240-5191 Fax (702) 240-5797

1 Honorable Court:

2 **Information Regarding the Proposed Protected Person**

3  
4 1. **Adult's full legal name:** Mae R. Brown

5 2. **Adult's Date of birth:** 02/20/1943; current age: 78 years.

6  
7 3. **Adult's residence & mailing address:**

8 233 13<sup>th</sup> Street #309, Las Vegas, NV 89101.

9  
10 4. **Residency:** The adult in need of a guardianship has been a resident of the  
11 State of Nevada since approximately 2009, Petitioner herein, at the above address  
12 since approximately April 15, 2010. The adult in need of Guardianship is presently  
13 located at: Desert Springs Hospital (Room 244), 2075 E. Flamingo Road, Las Vegas,  
14 NV 89119.

15  
16 5. **Caregiver:** The adult in need of a guardianship is currently in the Care  
17 of Dr. Jennifer Harrison at Desert Springs Hospital.

18  
19 The Proposed Protected Person's Son Tyrese Brown has an Alleged Power of  
20 Attorney for both financial and medical purposes.

21  
22 The Proposed Protected Person was Previously in the negligent care of Kindred  
23 Inpatient Rehabilitation Center located at 5110 W Sahara Ave, Las Vegas, NV 89146.

24  
25 6. **Need for Guardianship:** The Proposed Protected Person has been  
26 isolated and did not receive adequate care due to the willful and/or negligent conduct  
27 of Tyrese Brown. Guardianship is necessary to set aside the Powers of Attorney and  
28

1 ensure Mae R. Brown receives adequate care Administered by Shawntina Palimore-  
2 Brown with the consent of the other members of the Family as a “committee” as they  
3 have always done prior to Tyrese’s Conduct.

4 7. **Medicaid:** The adult in need of a guardianship has received Medicaid.

5 8. **Immediate Need:** The adult needs immediate medical attention.  
6  
7 Specifically, Tyrese has failed to treat her for a prolapsed uterus and had a bedsore  
8 which was all the way to the bone and caked in feces when she was transferred from  
9 Kindred to her current location of Desert Springs Hospital.

10  
11 It is upon information and belief that there are also discrepancies in Mae R.  
12 Brown’s Financial Accounts, caused by Tyrese’s misfeasance of his alleged Powers  
13 of Attorney.

14  
15 9. **Need for Permanent Guardianship:** The adult needs a guardian to  
16 assure she is in a safe living situation, to assure she has access to medical and that her  
17 finances are protected and managed and that she is protected from potential abuse.

18  
19 10. **Alternatives:** The following less restrictive alternatives have been tried  
20 before filing this request:

21  
22 ☐ Supported Decision Making Agreement

23 X Power of Attorney – There is indicia it was fraudulently or coercively  
24 induced; Further, Tyrese has failed to adequately provide ordinary care,  
25 has isolated and abused Mae R. Brown

26  
27 ☐ Power of Attorney for People with Intellectual Disabilities  
28

☐ Representative Payee Designation

☒ Microboard / Circle of Friends

☐ Other:

11. **Powers Requested:** If appointed as guardian, the specific powers that Petitioner would need would be medical power of attorney and authorization to approve upon the Proposed Protected Person. Guardian would also need to be the authorized representative for adult, access her Medicaid, authority to manage her remaining finances.

12. **Voting Rights:** The adult should keep her right to vote after she regains her full faculties.

13. **Firearms/Guns:** The adult should retain her right to own a firearm after regaining her full faculties.

14. **Driving:** The adult should not be allowed to drive.

15. **Party to Litigation:** The adult in need of a guardian has had several prior Criminal Charges relating to her mental illness, but has no current pending criminal or civil cases.

16. **Initiating Lawsuit:** This guardianship is not sought for the purpose of initiating a lawsuit.

17. **Abuse/Neglect Report:** The guardianship **IS requested** because of an investigation of abuse, neglect, exploitation, isolation or abandonment of the adult.

18. **Documents:** The adult executed the following documents, copies of

which will be filed with this Petition: (*check all that apply*)

☐ Written nomination of guardian. The nominated guardian is (*name of person nominated to serve as guardian*) \_\_\_\_\_

*NOTICE: The Court will check the Nevada Secretary of State Lockbox to determine if a guardian has already been designated by the proposed protected person.*

☒ Durable power of attorney for financial matters. The agent is **Tyrese Brown**

☒ Durable power of attorney for health care. The agent is **Tyrese Brown**

☐ Revocable or living trust. The agent is (unknown)

☐ None of the above.

☐ Unknown if the adult has executed any of the above documents.

These Documents appear to have been fraudulently executed, coercively induced, or otherwise improperly obtained by Tyrese Brown. Tyrese Brown has breached fiduciary duties in regards to his principal and Petitioner hereby brings a request under NRS 162A.330 to Review Tyrese's Powers of Attorney and his conduct thereunder, and fashion appropriate relief including restitution, penalty, and/or sanction.

19. **Assets:** The value of the proposed protected person's assets is estimated at: More than \$10,000.

**Petitioner's Information**

20. **Full legal name:** Shawntina Brown-Palmore

21. **Date of Birth & Age:** DOB: 2/20/1943; age 78 years.

22. **Relationship to adult in need of guardian:** Petitioner is the biological daughter of the adult in need of guardianship, Mae R. Brown.

23. **Petitioner's residence and mailing address:** 6408 Steamship Court, Las Vegas, NV 89130.

24. **Nomination of Guardian:** I want to be the guardian over the adult. I am competent and capable of acting as guardian of the proposed protected person and consent to act in this capacity.

25. **Nevada residency:** November 17, 1990

26. **Qualifications:** Shawntina Brown-Palmore:

- has not been convicted of a crime of moral turpitude, a crime involving domestic violence or a crime involving the abuse, neglect, exploitation, isolation or abandonment of a child, his or her spouse, his or her parent or any other adult;
- has never been convicted of a felony;
- has never been suspended for misconduct or disbarred from the practice of law, the practice of accounting or any other profession which involves the management or sale of money, investments, securities or real property and requires licensure in Nevada or any other state;
- has not filed for bankruptcy;

- is not party to pending criminal or civil litigation.
- is a retired Civil Engineer of 30 years.

**General Information**

27. **Compensation:** Petitioner is not currently receiving compensation for services as a guardian to more than one protected person who is not related to him/her by blood or marriage.

28. **Certificate of Incapacity:** A Physician's Certificate of Incapacity is being filed concurrently, executed June 7, 2021.

29. **Confidential Information Sheet:** A copy of the following forms of identification will be filed with the Confidential Information Sheet:

- a. For Petitioner Shawntina Brown-Palmore, a valid driver's license;  
and
- b. For the Proposed Protected Person, a Social Security Number  
and/or Valid Identification Card.

30. **Plan of Care:** I acknowledge that the Plan of Care must be completed and filed within 60 days of being appointed as guardian.

31. **Monthly Budget:** Petitioner acknowledges that the Monthly Budget for the Proposed Protected Person must be completed and filed for guardianship over the estate.

32. **Exhibit A: Information Regarding the Adult's Estate** is attached hereto as Exhibit A.

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Las Vegas, Nevada 89129  
(702) 240-5191 Fax (702) 240-5797

33. **Exhibit B: List of All of Adult's Relatives Entitled to Notice** is attached hereto as Exhibit B.

34. **Blocked Account:** Petitioner requests that the funds not be placed into a blocked account.

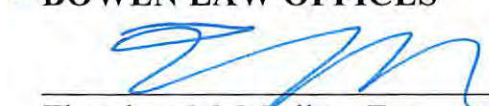
35. **Bond:** Petitioner requests that the Court waive the need for posting a bond.

WHEREFORE, Petitioner prays that:

- 1) this general guardianship be granted, and
- 2) for an EMERGENCY Temporary Guardianship to be granted to ensure the Protected Person's immediate medication and ensure attendance at an Evidentiary Hearing, and
- 3) Review Tyrese's Powers of Attorney and his Conduct thereunder Pursuant to NRS 162A.330
- 4) for such other and further relief as the Court may deem just and proper.

DATED this 10<sup>th</sup> day of June, 2021.

**BOWEN LAW OFFICES**

  
Theodore M. Medlyn, Esq.  
Nevada Bar No. 15284

*Attorney for Petitioner Shawntina Brown-Palmore*

**BOWEN LAW OFFICES**  
Conquistador Plaza  
9960 W. Cheyenne Ave., Suite 250  
Las Vegas, Nevada 89129  
(702) 240-5191 Fax (702) 240-5797

## VERIFICATION

I, Shawntina Brown-Palmore, declare under penalty of perjury that I am the Petitioner in the within action; that I have read the foregoing Petition For Appointment of Guardian Of an Adult and know the contents thereof; that the same is true and correct of my own knowledge except as to those matters therein stated upon information and belief and as to those matters, I believe them to be true.

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

DATED this 10 day of June, 2021.

*Shawntina Brown-Palmore*

Shawntina Brown-Palmore

**EXHIBIT A: Information Regarding the Proposed Protected Person's Estate**

1. The proposed protected person (*check all that apply*)

☐ Has no assets or income

X Has assets and income (*listed below*)

☐ Is entitled or will be entitled to assets or income (*listed below*)

2. The proposed protected person receives income from the following:

(*including all income, e.g. Social Security, Department of Veteran's Affairs, pensions, etc. If none, write "N/A."*)

Source of Income:	Amount of Monthly Income:
1. United Food & Commercial Workers	\$200.00
2. Social Security	\$985.00
<b>Total:</b>	<b>\$1,185.00</b>

3. A Representative Payee does not receive benefits on behalf of the proposed protected person.

4. The proposed protected person's assets are:

Description of Asset:	Fair Market Value:
Assorted alleged bank accounts	Estimated between \$10,000 \$20,000

**EXHIBIT B: List All of the Adult's Relatives Entitled to Notice**

All persons/entities entitled to Notice of the Petition, including those within the second degree of consanguinity are as follows:

<i>Daughter</i> Shawntina Brown-Palmore 6408 Steamship Court Las Vegas, NV 89130	<i>Son</i> Keenan C. Brown 1531 Elizabeth Ave. Trenton, NJ 08629
<i>Son</i> Keith A. Brown 11221 Apple Valley Drive Frisco, TX 75033	<i>Son</i> Tyrese D. Brown 3821 Marsh Sparrow Ln. North Las Vegas, NV 89084
<i>Son</i> Clayton Brown 1531 Elizabeth Ave. Trenton, NJ 08529	<i>Son</i> Jerry E. Brown 3615 Mangum Rd., Houston, TX 77092
<i>Step-Son</i> LaMont D. Brown 5435 Scherr Drive Jefferson, MO 65109	<i>Son-in-law</i> L.V. Palmore 6408 Steamship Court Las Vegas, NV 89130
<i>Daughter-in-law</i> Sal Brown 11221 Apple Valley Drive Frisco, TX 75033	<i>Grandson</i> Demitrius Palmore 6408 Steamship Court Las Vegas, NV 89130
<i>Grandson</i> Wesley A. Yarborough 1545 Delucchi, Unit H Reno, NV 89502	<i>Grandson</i> Qaadir Brown 1531 Elizabeth Ave. Trenton, NJ 08529
<i>Grandson</i> Kamal Brown 1531 Elizabeth Ave. Trenton, NJ 08529	<i>Grandson</i> Quinton Brown 3821 Marsh Sparrow Lane North Las Vegas, NV 89084
<i>Grandson</i> Rafeeq Brown 1531 Elizabeth Ave. Trenton, NJ 08529	<i>Grandson</i> Dante Yell 3821 Marsh Sparrow Lane North Las Vegas, NV 89084
<i>Granddaughter</i> Ananda Palmore 6408 Steamship Court	<i>Granddaughter</i> Azia Brown 3821 Marsh Sparrow Lane

**BOWEN LAW OFFICES**  
 Conquistador Plaza  
 9960 W. Cheyenne Ave., Suite 250  
 Las Vegas, Nevada 89129  
 (702) 240-5191 Fax (702) 240-5797

Las Vegas, NV 89130	North Las Vegas, NV 89084
<i>Granddauther</i> Quaadrya Brown 1531 Elizabeth Ave. Trenton, NJ 08529	<i>Granddaughter</i> Sharisse A. Yarborough 421 S. Oil Lantern Lane Las Vegas, NV 89145
<i>Granddaughter</i> Ebonie Palmore 6408 Steamship Court Las Vegas, NV 89130	<i>Granddaughter</i> Olivia Brown 1531 Elizabeth Ave. Trenton, NJ 08529
<i>Granddaughter</i> Angelica Brown 1531 Elizabeth Ave. Trenton, NJ 08529	<i>Granddaughter</i> Drew Brown 1531 Elizabeth Ave. Trenton, NJ 08529

# **EXHIBIT 3**

*Heather S. Smith*

CLERK OF THE COURT

**ORDR**

Scott Cardenas, Esq.  
Nevada Bar No. 14851  
[scardenas@lacsnc.org](mailto:scardenas@lacsnc.org)

**LEGAL AID CENTER OF  
SOUTHERN NEVADA, INC.**

725 E. Charleston Blvd  
Las Vegas, NV 89104  
Telephone: (702) 386-1539  
Facsimile: (702) 386-1539

*Attorney for Mae Brown, Adult Proposed Protected Person*

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

In the Matter of the Guardianship of the Person  
and Estate of:

**Case No.: G-21-054632-A  
Dept. No.: B**

Mae Brown,

Adult Proposed Protected Person.

**ORDER DISMISSING GUARDIANSHIP PETITION**

WHEREAS, the Petition for Appointment of Guardian filed by Shawntina Brown-Palmore in case number G-21-054599-A on March 31, 2021, and the Petition for Appointment of Guardian filed by Tyrese Brown in this case on April 08, 2021, came on for hearing before this Court on May 06, 2021, with Mae Brown, the proposed protected person, appearing by and through her counsel, Scott Cardenas, Esq., of Legal Aid Center of Southern Nevada, Inc.; Shawntina Palmore Brown appearing via video and by and through her counsel Theodore Medlyn; and Tyrese Brown appearing in person and by and through his counsel Frank Toti; and

WHEREAS, this Court, having reviewed the papers and pleadings on file and having heard the arguments and representations of counsel and the parties as warranted, finds good cause appearing, therefore;

**IT IS HEREBY ORDERED** that the Petition for Appointment of Guardian is **DENIED** without prejudice because a physician's certificate was not filed.

**IT IS FURTHER ORDERED** that this case (G-21-054632-A) and the related case (G-21-054599-A) shall be consolidated into the lower case number. All future matters shall be filed into the lower case number.

**IT IS FURTHER ORDERED** that Scott Cardenas, Esq. and Legal Aid Center of Southern Nevada be relieved as counsel for Mae Brown pursuant to NRS 159.0485(2)(a).

**IT IS SO ORDERED.**

DISTRICT COURT JUDGE

**Dated this 14th day of May, 2021**

Juda Marguis

Submitted By:

**LEGAL AID CENTER OF  
SOUTHERN NEVADA, INC.**

**70A E73 F51C 1402**  
**Linda Marquis**  
**District Court Judge**

*/s/ Scott Cardenas, Esq.*

Scott Cardenas, Esq.  
Nevada Bar No. 14851  
[scardenas@lacsns.org](mailto:scardenas@lacsns.org)

**LEGAL AID CENTER OF  
SOUTHERN NEVADA, INC.**

725 E. Charleston Blvd

Las Vegas, NV 89104

Telephone: (702) 386-1539

Facsimile: (702) 386-1539

*Attorney for Mae Brown, Adult Proposed Protected Person*

1 *Approved as to form and content:*  
2 Law Office of Frank J. Toti

3 /s/ Frank J. Toti, Esq.  
4 Frank J. Toti, Esq.  
5 6900 Westcliff Drive, #500  
6 Las Vegas, NV 89145  
7 *Attorney for Tyrese Brown*

8 *Approved as to form and content:*  
9 Bowen Law Offices

10 /s/ Theodore M. Medlyn, Esq.  
11 Theodore M. Medlyn, Esq.  
12 9960 W. Cheyenne Ave., Suite 250  
13 Las Vegas, NV 89129  
14 *Attorney for Shawntina Brown*

**From:** Frank Toti, Esq <[frank@fjtesq.com](mailto:frank@fjtesq.com)>

**Sent:** Wednesday, May 12, 2021 2:54 PM

**To:** Theodore Medlyn <[tmedlyn@lvlawfirm.com](mailto:tmedlyn@lvlawfirm.com)>; Scott Cardenas <[SCardenas@lacs.org](mailto:SCardenas@lacs.org)>

**Cc:** Raelene Jemison <[RJemison@lvlawfirm.com](mailto:RJemison@lvlawfirm.com)>

**Subject:** RE: Mae Brown Guardianship - Proposed Orders

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Thanks scott

**Frank J Toti Esquire !**

**Nevada Board Certified Family Law Specialist**

**LL.M ADR**

**6900 Westcliff Drive #500**

**Las Vegas Nevada 89145**

**702.364.1604**

**From:** Theodore Medlyn <[tmedlyn@lvlawfirm.com](mailto:tmedlyn@lvlawfirm.com)>  
**Sent:** Wednesday, May 12, 2021 2:28 PM  
**To:** Scott Cardenas <[SCardenas@lacs.org](mailto:SCardenas@lacs.org)>; Frank Toti, Esq <[frank@fitesq.com](mailto:frank@fitesq.com)>  
**Cc:** Raelene Jemison <[RJemison@lvlawfirm.com](mailto:RJemison@lvlawfirm.com)>  
**Subject:** RE: Mae Brown Guardianship - Proposed Orders

That is how I remember it, you may affix my electronic signature.

Yours,



**Theodore M. Medlyn, Esq.**  
**BOWEN LAW OFFICES**  
9960 W. Cheyenne Ave., Suite 250  
Las Vegas, Nevada 89129  
(702) 240-5191; Fax: (702) 240-5797  
[tmedlyn@lvlawfirm.com](mailto:tmedlyn@lvlawfirm.com) | [lvlawfirm.com](http://lvlawfirm.com)

#### **A Message to our Clients Amid the COVID-19 Pandemic**

As we continue to adapt to the COVID-19 Coronavirus outbreak and with both mandates and precautions, we are providing a brief update on our operations. To ensure the safety of our clients and employees part of our workforce has shifted to remote operations.

Please be patient with us as we will do our best to maintain business continuity and operations. We have established remote work capabilities, which enable our attorneys and limited staff to continue to be responsive to our clients needs throughout any closures that may take place. We remain reachable by email as normal, and we will continue to have full access to our systems and voicemail, and although all face-to-face meetings may need to be postponed or scheduled on an as needed basis, please know that with our systems in place we stand ready to assist you with any challenges you are facing or questions you have.

We realize each client, each business, and each industry will feel the effects in different ways, and our attorneys are prepared to try to minimize the effects in any way we can. Our thoughts are with everyone impacted by this pandemic, and we wish for everyone to remain healthy and safe as we work through these challenging times. We are all in this together, and we will get through it together.

**CONFIDENTIALITY NOTICE:** The information contained in this e-mail transmission (including any attachments) is CONFIDENTIAL and PRIVILEGED and contains ATTORNEY WORK PRODUCT, and it is intended for the personal and confidential use of only the recipient(s) named above. The information contained in this electronic mail message is confidential information that may be covered by the Electronic Communications Privacy Act, 18 U.S.C. Sections 2510-2521. This is a confidential document that contains private material that may constitute trade secrets, and as such is privileged and confidential. IF THE READER IS NOT THE DESIGNATED RECIPIENT, or an employee or agent responsible for delivering it to the designated recipient(s), YOU ARE HEREBY NOTIFIED THAT YOU HAVE RECEIVED THIS TRANSMISSION IN ERROR AND ANY REVIEW, COPYING, DISSEMINATION OR DISTRIBUTION OF IT IS STRICTLY PROHIBITED. If you have received this communication in error, please notify us immediately by telephone (collect) at **702-240-5191**. Thank you.

1 **CSERV**

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

5  
6 In the Matter of the Guardianship of: CASE NO: G-21-054632-A  
7 DEPT. NO. Department B  
8 Mae Brown, Protected Person(s)

9  
10 **AUTOMATED CERTIFICATE OF SERVICE**

11 This automated certificate of service was generated by the Eighth Judicial District  
12 Court. The foregoing Order was served via the court's electronic eFile system to all  
13 recipients registered for e-Service on the above entitled case as listed below:

14 Service Date: 5/14/2021

15 Frank Toti	frank@fjtesq.com
16 Jerome Bowen	twilcox@lvlawfirm.com
17 Marina Valdez	Marina@fjtesq.com
18 Scott Cardenas	scardenas@lacs.org
19 Rose Reinosa	rreinosa@lacs.org
20 Raelene Jemison	rjemison@lvlawfirm.com
21 Theodore Medlyn	tmedlyn@lvlawfirm.com

22  
23  
24  
25  
26  
27  
28

# **EXHIBIT 4**

*Heather S. Lavin*  
CLERK OF THE COURT

**ORDR**

Scott Cardenas, Esq.  
Nevada Bar No. 14851  
[scardenas@lacsns.org](mailto:scardenas@lacsns.org)

**LEGAL AID CENTER OF  
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725 E. Charleston Blvd  
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Telephone: (702) 386-1539  
Facsimile: (702) 386-1539

*Attorney for Mae Brown, Adult Proposed Protected Person*

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

In the Matter of the Guardianship of the Person  
and Estate of:

Mae Brown,

Adult Proposed Protected Person.

**Case No.: G-21-054599-A  
Dept. No.: B**

**ORDER DISMISSING GUARDIANSHIP PETITION**

WHEREAS, the Petition for Appointment of Guardian filed by Shawntina Brown-Palmore in this case on March 31, 2021, and the Petition for Appointment of Guardian filed by Tyrese Brown in case number G-21-054632 on April 08, 2021, came on for hearing before this Court on May 06, 2021, with Mae Brown, the proposed protected person, appearing by and through her counsel, Scott Cardenas, Esq., of Legal Aid Center of Southern Nevada, Inc.; Shawntina Palmore Brown appearing via video and by and through her counsel Theodore Medlyn; and Tyrese Brown appearing in person and by and through his counsel Frank Toti; and

WHEREAS, this Court, having reviewed the papers and pleadings on file and having heard the arguments and representations of counsel and the parties as warranted, finds good cause appearing, therefore;

**IT IS FURTHER ORDERED** that this case (G-21-054599-A) and the related case (G-21-054632-A) shall be consolidated into the lower case number. All future matters shall be filed into the lower case number.

**IT IS SO ORDERED.**

Juda Margolis

**5B8 D81 AF9B 84E9**  
**Linda Marquis**  
**District Court Judge**

1 *Approved as to form and content:*  
2 Law Office of Frank J. Toti

3 /s/ Frank J. Toti, Esq.  
4 Frank J. Toti, Esq.  
5 6900 Westcliff Drive, #500  
6 Las Vegas, NV 89145  
7 *Attorney for Tyrese Brown*

8 *Approved as to form and content:*  
9 Bowen Law Offices

10 /s/ Theodore M. Medlyn, Esq.  
11 Theodore M. Medlyn, Esq.  
12 9960 W. Cheyenne Ave., Suite 250  
13 Las Vegas, NV 89129  
14 *Attorney for Shawntina Brown*

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Thanks scott

**Frank J Toti Esquire !**

**Nevada Board Certified Family Law Specialist**

**LL.M ADR**

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**Las Vegas Nevada 89145**

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Yours,



**Theodore M. Medlyn, Esq.**  
**BOWEN LAW OFFICES**  
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We realize each client, each business, and each industry will feel the effects in different ways, and our attorneys are prepared to try to minimize the effects in any way we can. Our thoughts are with everyone impacted by this pandemic, and we wish for everyone to remain healthy and safe as we work through these challenging times. We are all in this together, and we will get through it together.

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1 **CSERV**

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

5  
6 In the Matter of the Guardianship CASE NO: G-21-054599-A  
7 of:  
8 Mae Brown, Protected Person(s)  
9

DEPT. NO. Department B

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17 Marina Valdez Marina@fjtesq.com

18 Scott Cardenas scardenas@lacsns.org

19 Rose Reinosa rreinosa@lacsns.org

20 Raelene Jemison rjemison@lvlawfirm.com

21 Theodore Medlyn tmedlyn@lvlawfirm.com  
22  
23  
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27  
28

# **EXHIBIT 5**

*Heather L. Smith*  
CLERK OF THE COURT

COURT CODE: PAG  
Your Name: TYRESE BROWN  
Address: 3821 MARSH SPARRORW LN  
City, State, Zip: N LAS VEGAS NV 89084  
Telephone: 7024599001  
Email Address: drkbrn23@cox.net  
Self-Represented

**DISTRICT COURT  
CLARK COUNTY, NEVADA**

In the Matter of the Guardianship of:

- ☐ Person  
☐ Estate  
☒ Person and Estate

of:

MAE R. BROWN

*(name of adult alleged to need a guardian)*

*A Proposed Protected Person.*

CASE NO.: 6-21-054632-A

DEPT: IBD

**PETITION FOR APPOINTMENT OF GUARDIAN(S) OVER ADULT**

Petitioner(s) (first petitioner's name) TYRESE BROWN and  
(second petitioner's name; or "n/a" if only one) ANNAZETTE WATTS  
request the Court approve a guardianship for the above-named adult. In accordance with  
Chapter 159 of the Nevada Revised Statutes, Petitioner(s) respectfully represents the following  
to this Honorable Court:

**Information Regarding the Proposed Protected Person**  
*(the person you are seeking a guardianship over, or the "adult")*

1. Adult's full legal name: MAE R. BROWN
2. Adult's date of birth: 02/20/1943; current age: 78
3. Address. Adult's residence address:  
233 N 13th St Apt #309  
Address  
LAS VEGAS NV 89101  
City, State, Zip Code

Adult's mailing address (if different than residence address):

3821 MARSH SPARROW LN

Address

N LAS VEGAS NV 89084

City, State, Zip Code

4. **Residency.** The adult named above has been a resident of the State of (state) NEVADA since (date) APRIL 2010 and has lived at the above address since (date) APRIL 2010.

5. **Caretaker.** The adult in need of a guardianship is currently under the care of:

TYRESE BROWN

Name

3821 MARSH SPARROW LN

Address

N LAS VEGAS NV 89084

City, State, Zip Code

The care provider above is caring for the adult because:

My mother is unable to care for herself and has been diagnosed with having advanced stage dementia, diabetes and is said to be failing by doctors.

6. **Medicaid.** Does the adult receive Medicaid, or has the adult ever received Medicaid?

(☒ check one)

☐ Yes

☒ No

7. **Need for Guardianship.** The adult needs a guardian because (explain in detail):

She is currently a patient at Kindred Hospital suffering from advanced stage dementia, too weak to get out of bed or sit upright, & in failing health. Unable to recognize family, also has an intestinal infection, Clostridioides difficile (C Diff) unable to control her bowel movements & is in almost constant pain. She has a prolapsed uterus & other issues related to diabetes. She had a surgery while in Sunrise hospital the surgeon recommended against but my siblings insisted it be done. Now they're wanting her to have another surgery for the prolapsed uterus that the doctors are saying will not help or heal her. I am trying to prevent undue suffering of my mother from excessive procedures in her last day's.

8. **Alternatives.** What less restrictive alternatives have been tried before filing this request?

(☒ *check all that apply*)

- ☐ Supported Decision Making Agreement
- ☒ Power of Attorney
- ☐ Power of Attorney for People with Intellectual Disabilities
- ☐ Representative Payee Designation
- ☐ Microboard / Circle of Friends
- ☐ Other: \_\_\_\_\_

Explain why the items marked above are not working:

Family members insisting my mother be put through unnecessary surgical procedures at 78 years old and failing health. Family ignoring POA.

9. **Powers Requested.** If appointed, what specific powers, if any, would the guardian need?  
(*explain if the guardian will need the ability to manage investments, loans, handle business transactions, sell property, etc.*)

Any and all powers needed to make the best decisions necessary on her behalf medical, financial and final.

10. **Voting Rights:** (☒ *check one*)

- ☐ The adult should keep his/her right to vote.
- ☒ The adult does not have the mental capacity to vote because he/she cannot communicate, with or without accommodations, a specific desire to participate in the voting process.

11. **Firearms/Guns:** (☒ *check one*)

- ☐ The adult should be allowed to possess a firearm.
- ☒ The adult should not be allowed to possess a firearm. The adult is a danger to him/herself or others because of a mental condition, or the adult does not have the capacity to contract or manage his/her own affairs because of a mental condition.

12. **Driving:** (☒ *check one*)

- ☐ The adult should be allowed to drive.
- ☒ The adult should not be allowed to drive.

13. The adult (☒ *check one*) ☐ is ☒ is not a party to any pending criminal or civil lawsuit.  
**Explain if the adult is a party to litigation:**

14. This guardianship (☒ *check one*) ☐ is ☒ is not sought for the purpose of initiating a lawsuit. **Explain if guardianship is sought to initiate lawsuit:**

15. **Abuse/Neglect Report:** (☒ *check one*)

☒ The guardianship IS NOT requested because of an investigation of abuse, neglect, exploitation, isolation or abandonment of the adult.

☐ The guardianship IS requested because of an investigation of abuse, neglect, exploitation, isolation or abandonment of the adult. The investigating agency is (name of agency) \_\_\_\_\_, which is (☒ *check one*) ☐ law enforcement ☐ a state agency ☐ a county agency.

16. **Documents.** The adult executed the following documents, copies of which will be filed with this Petition: (☒ *check all that apply*)

☐ Written nomination of guardian. The nominated guardian is (name of person nominated to serve as guardian) \_\_\_\_\_

*NOTICE: The Court will check the Nevada Secretary of State Lockbox to determine if a guardian has already been designated by the proposed protected person.*

☒ Durable power of attorney for financial matters. The agent is \_\_\_\_\_  
TYRESE BROWN

☒ Durable power of attorney for health care. The agent is \_\_\_\_\_  
TYRESE BROWN

☐ Revocable or living trust. The agent is \_\_\_\_\_

☐ None of the above.

☐ Unknown if the adult has executed any of the above documents.

**\*Copies of any of the above should be submitted confidentially to the Court for review.**

17. Assets. The value of the proposed person's assets is estimated at: (☒ check one)

☒ Less than \$10,000. If the guardianship is granted, the court should treat this case as "summary administration" and not require annual accountings or a final accounting.

☐ More than \$10,000.

### Information Regarding the Petitioner

18. Full legal name: TYRESE BROWN

19. Date of birth: 10/29/1964; current age: 57

20. Relationship to adult in need of a guardian: SON

If you are the spouse, the date of marriage was: (date) \_\_\_\_\_

21. Residence address:

3821 MARSH SPARRORW LN

Address

N LAS VEGAS NV 89084

City, State, Zip Code

Mailing address (if different than residence address):

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

22. Nomination of Guardian: (☒ check one)

☒ I want to be the guardian over the adult. I am competent and capable of acting as guardian of the proposed protected person and consent to act in this capacity.

☐ I do not want to be the guardian. Instead, the Court should appoint (insert name) \_\_\_\_\_ to be the guardian over the adult.

(if you selected this option, skip ahead to #31)

23. If you do not live in the State of Nevada: (☒ check one)

- ☐ A person or care provider in this State is providing continuing care and supervision for the adult;
- ☒ The adult is in a secured residential long-term care facility in this State;
- ☐ The guardian will move to the State of Nevada within 30 days of appointment; or
- ☐ The proposed protected person will move to the guardian's state of residence within 30 days of appointment.

[NOTE: If a nonresident is appointed as guardian for an adult, the guardian must designate a registered agent in the State of Nevada in the same manner as a represented entity pursuant to Nevada Revised Statutes Chapter 77.]

24. Qualifications. (Answer each item listed; "Has" answers must be explained)

The Petitioner: (☒ check one for each)

- ☐ has ☒ has not been convicted of a crime of moral turpitude, a crime involving domestic violence or a crime involving the abuse, neglect, exploitation, isolation or abandonment of a child, his or her spouse, his or her parent or any other adult.

Explain if Yes:

- ☐ has ☒ has never been convicted of a felony.

Explain if Yes: Petitioner was convicted of (describe conviction)

Petitioner (☒ check one) ☐ was / ☐ was not placed on parole and (☒ check one) ☐ was / ☐ was not placed on probation for that felony.

- ☐ has ☒ has never been suspended for misconduct or disbarred from the practice of law, the practice of accounting or any other profession which involves the management or sale of money, investments, securities or real property and requires licensure in Nevada or any other state.

Explain if Yes:

- ☐ has ☒ has not filed for bankruptcy within the past 7 years.

- ☐ is ☒ is not a party to pending criminal or civil litigation.

Explain if Yes:

**Information Regarding the Co-Petitioner**

☐ Not Applicable (check if there is only one proposed guardian, and go to #31)

25. Full legal name: ANNAZETTE WATTS.
26. Date of birth: 12/20/64; current age: 57.
27. Relationship to adult in need of a guardian: DAUGHTER-INLAW.  
If you are the spouse, the date of marriage was: (date) 5/4/99.
28. Residence address:

3821 MARSH SPARROW LN

Address

N LAS VEGAS NV 89084

City, State, Zip Code

Mailing address (if different than residence address):

Address

City, State, Zip Code

29. Nomination of Guardian: (☒ check one)
- ☒ I want to be the guardian over the adult. I am competent and capable of acting as guardian of the proposed protected person and consent to act in this capacity.
- ☐ I do not want to be the guardian. Instead, the Court should appoint (insert name) \_\_\_\_\_ to be the guardian over the adult.  
(if you selected this option, skip ahead to #31)
30. If you do not live in the State of Nevada: (☒ check one)
- ☐ A person or care provider in this State is providing continuing care and supervision for the adult;
- ☐ The adult is in a secured residential long-term care facility in this State;
- ☐ The guardian will move to the State of Nevada within 30 days of appointment; or
- ☐ The proposed protected person will move to the guardian's state of residence within 30 days of appointment.

[NOTE: If a nonresident is appointed as guardian for an adult, the guardian must designate a registered agent in the State of Nevada in the same manner as a represented entity pursuant to Nevada Revised Statutes Chapter 77.]

31. Qualifications. (Answer each item listed; "Has" answers must be explained)

The Co-petitioner: (☒ check one for each)

- ☐ has ☒ has not been convicted of a crime of moral turpitude, a crime involving domestic violence or a crime involving the abuse, neglect, exploitation, isolation or abandonment of a child, his or her spouse, his or her parent or any other adult.

**Explain if Yes:**

- ☐ has ☒ has never been convicted of a felony.

**Explain if Yes:** The Petitioner was convicted of (*describe conviction*)

The Petitioner (☒ check one) ☐ was / ☐ was not placed on parole and (☒ check one) ☐ was / ☐ was not placed on probation for that felony.

- ☐ has ☒ has never been suspended for misconduct or disbarred from the practice of law, the practice of accounting or any other profession which involves the management or sale of money, investments, securities or real property and requires licensure in Nevada or any other state.

**Explain if Yes:**

- ☐ has ☒ has not filed for bankruptcy within the past 7 years.

- ☐ is ☒ is not a party to pending criminal or civil litigation.

**Explain if Yes:**

### General Information

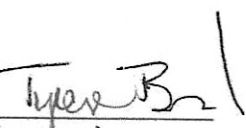
32. **Compensation.** Are you currently being paid for services as a guardian to more than one protected person who is not related to you by blood or marriage? (☒ check one):

- ☒ No, I am not being paid for services as a guardian.  
☐ Yes, I am being paid for services as a guardian.


33. **Certificate of Incapacity** must be filed showing the need for a guardianship over the proposed protected person. The Certificate must be completed and signed by one of the following:
- A physician who is licensed to practice medicine in this State or who is employed by the Department of Veterans' Affairs;
  - A governmental agency in this State which conducts investigations; or
  - Signed by any other person whom the court finds qualified to execute a certificate.
34. **Confidential Information Sheet – Guardianship** must be completed and filed. You must provide at least one form of identification (listed on the sheet) for each person.
35. **Plan of Care** must be completed and filed within 60 days of being appointed the guardian.
36. **Monthly Budget** must be completed and filed if you are requesting guardianship over the adult's estate.
37. **Exhibit A: List of All of the Adult's Relatives** must be completed and attached to petition.
38. **Exhibit B: Information Regarding the Adult's Estate** must be completed and attached to petition if you are requesting guardianship over the adult's estate. If you are appointed the Guardian, the Court will determine how to safeguard the protected person's funds. The Court will decide whether to:
- Require the funds to be placed into a blocked account.
  - Require you to obtain a bond in an amount equal to the total amount of the proposed protected person's liquid assets.
39. Attach any other documentation that supports your request for guardianship.
40. **Other:** In addition to the above, the Court should also consider (*explain anything else the judge should know when considering your request for guardianship*): \_\_\_\_\_

Petitioner(s) request that this guardianship be granted, that the relief requested be granted as stated herein, and for such other and further relief as the Court may deem just and proper.

DATED (month) APRIL (day) 07, 2021.

/s/ TYRESE BROWN   
(First Petitioner's Signature)

TYRESE BROWN  
(Printed Name)

/s/ ANNAZETTE WATTS   
(Second Petitioner's Signature)

ANNAZETTE WATTS  
(Printed Name)

**VERIFICATION**

I, (name of first petitioner) TYRESE BROWN, declare that I am the Petitioner in the within action; that I have read the foregoing Petition For Appointment of Guardians and know the contents thereof; that the same is true of my knowledge except as to those matters therein stated upon information and belief and as to those matters, I believe them to be true.

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

/s/ Tyrese Brown

FIRST PETITIONER'S SIGNATURE

**VERIFICATION**

I, (name of second petitioner) ANNAZETTE WATTS, declare that I am the Co-Petitioner in the within action; that I have read the foregoing Petition For Appointment of Guardians and know the contents thereof; that the same is true of my knowledge except as to those matters therein stated upon information and belief and as to those matters, I believe them to be true.

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

/s/ AnnaZette Watts

SECOND PETITIONER'S SIGNATURE

## EXHIBIT A: List All of the Adult's Relatives

### Spouse:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

### Parents:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

### Brothers and Sisters:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

### Grandparents:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

### Children:

Name: Lamont Brown

Address: \_\_\_\_\_

☒ Address Unknown ☐ Deceased

Name: Keenan Brown

Address: \_\_\_\_\_

☒ Address Unknown ☐ Deceased

Name: Clayton Brown

Address: \_\_\_\_\_

☒ Address Unknown ☐ Deceased

Name: Keith Brown

Address: 11221 APPLE VALLEY DR

FRISCO TX 75033

☐ Address Unknown ☐ Deceased

### Grandchildren:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

### Grandparents:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

## EXHIBIT A: List All of the Adult's Relatives

### Spouse:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

### Parents:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

### Brothers and Sisters:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

### Grandparents:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

### Children:

Name: Shawntina Brown-Palmore

Address: 6408 Steamship Ct

Las Vegas NV 89130

☐ Address Unknown ☐ Deceased

Name: Jerry Brown

Address: \_\_\_\_\_

☒ Address Unknown ☐ Deceased

Name: Anthony Brown

Address: \_\_\_\_\_

☒ Address Unknown ☐ Deceased

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

### Grandchildren:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

### Grandparents:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

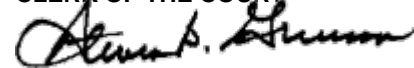
☐ Address Unknown ☐ Deceased

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☐ Deceased

# **EXHIBIT 6**



COURT CODE: PTGD  
Your Name: Shawntina Brown-Palmore  
Address: 6408 Steamship Court  
City, State, Zip: Las Vegas, NV 89130  
Telephone: (702) 471-0606  
Email Address: palmares@gmail.com  
Self-Represented

CASE NO: G-21-054599-A  
Department: To be determined

**DISTRICT COURT  
CLARK COUNTY, NEVADA**

In the Matter of the Guardianship of:

- ☐ Person  
☐ Estate  
☒ Person and Estate

of:

Mae R. Brown

*(name of adult who needs a guardian)*

A Proposed Protected Person.

CASE NO.: \_\_\_\_\_

DEPT: \_\_\_\_\_

**PETITION FOR APPOINTMENT OF GUARDIAN(S) OVER ADULT  
INCLUDING REQUEST FOR TEMPORARY GUARDIANSHIP**

Petitioner(s) *(first petitioner's name)* Shawntina Brown-Palmore and  
*(second petitioner's name; or "n/a" if only one)* \_\_\_\_\_

request the Court approve a guardianship for the above-named adult. In accordance with Chapter 159 of the Nevada Revised Statutes, Petitioner(s) respectfully represents the following to this Honorable Court:

**Information Regarding the Proposed Protected Person  
*(the person you are seeking a guardianship over, or the "adult")***

1. Adult's full legal name: Mae R. Brown.
2. Adult's date of birth: 02-20-1943; current age: 78.
3. Address. Adult's residence address:  
233 13th Street #309  
Address  
Las Vegas, NV 89101  
City, State, Zip Code

Adult's mailing address (*if different than residence address*):

Address

City, State, Zip Code

4. **Residency.** The adult named above has been a resident of the State of (*state*) Nevada since (*date*) \_\_\_\_\_ and has lived at the above address since (*date*) 2010.

5. **Caretaker.** The adult in need of a guardianship is currently under the care of:

Kindred Hospital

Name

5110 Sahara Ave.

Address

Las Vegas, NV

City, State, Zip Code

The care provider above is caring for the adult because:  
initially transfered for trake weening but health further compromised due to  
improper treatment, neglect, abuse and other injuires due to poor advocacy by  
hospital case worker.

6. **Medicaid.** Does the adult receive Medicaid, or has the adult ever received Medicaid?

(☒ *check one*)

☐ Yes

☒ No

7. **Immediate Need.** (☒ *check one and complete*)

☒ The adult needs immediate medical attention. specifically (*explain*)

Uterine prolapse and CDiff

but cannot obtain the necessary medical care because (*explain*)

Adult currently in facility that is not equiped for addressing medical infliction. Adult  
needs to be admitted to facility with surgical expertise.

☐ The adult cannot respond to a substantial and immediate risk of physical harm,  
specifically (*explain*)

but is unable to respond to the risk of harm because *(explain)*

- ☒ The adult is facing a substantial and immediate risk of financial harm, specifically *(explain)*

due to prolonged hospitalization, financial exploitation by Tyrese Brown, Ananzette Brown and Azia Brown

but is unable to respond to the risk of harm because *(explain)*

Prolonged physical incapacity resulting in hospitalization from 12-19-2020 to present

8. **Need for Permanent Guardianship.** The adult needs a guardian because *(explain why/if a guardian will be needed after the current emergency is over):*

rehabilitation may be required for adult to regain physical capacity

9. **Alternatives.** What less restrictive alternatives have been tried before filing this request?

☒ *check all that apply)*

- ☐ Supported Decision Making Agreement
- ☐ Power of Attorney
- ☐ Power of Attorney for People with Intellectual Disabilities
- ☐ Representative Payee Designation
- ☐ Microboard / Circle of Friends
- ☒ Other: Family accountability

Explain why the items marked above are not working:

Diplomatic family meetings addressing concerns collectively but unfortunately compromised by one member's rogue actions.

10. **Powers Requested.** If appointed, what specific powers, if any, would the guardian need? *(explain if the guardian will need the ability to manage investments, loans, handle business transactions, sell property, etc.)*

Medical, financial, ability to manage and handle all business transactions, ability to restrain persons from contact with mother, ability to demand/receive and verify mother's personal belongings and legal documents (e.g. driver's license, all forms of identification, social security cards, all bank information & cards, keys, clothing, all belongings & etc.), ability to assess/collect monetary value to items not returned and to time elapse relating to returned items

11. **Voting Rights:** (☒ *check one*)

- ☒ The adult should keep his/her right to vote.
- ☐ The adult does not have the mental capacity to vote because he/she cannot communicate, with or without accommodations, a specific desire to participate in the voting process.

12. **Firearms/Guns:** (☒ *check one*)

- ☐ The adult should be allowed to possess a firearm.
- ☐ The adult should not be allowed to possess a firearm. The adult is a danger to him/herself or others because of a mental condition, or the adult does not have the capacity to contract or manage his/her own affairs because of a mental condition.

13. **Driving:** (☒ *check one*)

- ☐ The adult should be allowed to drive.
- ☐ The adult should not be allowed to drive.

14. The adult (☒ *check one*) ☐ is ☒ is not a party to any pending criminal or civil lawsuit.

**Explain if the adult is a party to litigation:**

15. This guardianship (☒ *check one*) ☐ is ☒ is not sought for the purpose of initiating a lawsuit. **Explain if guardianship is sought to initiate lawsuit:**

16. **Abuse/Neglect Report:** (☒ *check one*)

- ☐ The guardianship **IS NOT requested** because of an investigation of abuse, neglect, exploitation, isolation or abandonment of the adult.
- ☒ The guardianship **IS requested** because of an investigation of abuse, neglect, exploitation, isolation or abandonment of the adult. The investigating agency is (*name of agency*) Adult Protective Services/Ombudsman, which is (☒ *check one*) ☐ law enforcement ☒ a state agency ☒ a county agency.

17. **Documents.** The adult executed the following documents, copies of which will be filed with this Petition: (☒ check all that apply)

☐ Written nomination of guardian. The nominated guardian is (name of person nominated to serve as guardian) \_\_\_\_\_.

*NOTICE: The Court will check the Nevada Secretary of State Lockbox to determine if a guardian has already been designated by the proposed protected person.*

☐ Durable power of attorney for financial matters. The agent is \_\_\_\_\_.

☐ Durable power of attorney for health care. The agent is \_\_\_\_\_.

☐ Revocable or living trust. The agent is \_\_\_\_\_.

☐ None of the above.

☒ Unknown if the adult has executed any of the above documents.

*\*Copies of any of the above should be submitted confidentially to the Court for review.*

18. **Assets.** The value of the proposed person's assets is estimated at: (☒ check one)

☐ Less than \$10,000. If the guardianship is granted, the court should treat this case as "summary administration" and not require annual accountings or a final accounting.

☒ More than \$10,000.

### Information Regarding the Petitioner

19. Full legal name: Shawntina Brown-Palmore.

20. Date of birth: 02-14-1962; current age: 59.

21. Relationship to adult in need of a guardian: natural daughter.

If you are the spouse, the date of marriage was: (date) \_\_\_\_\_.

22. Residence address:

6408 Steamship Court

Address

Las Vegas, NV 89130

City, State, Zip Code

Mailing address (if different than residence address):

Address

City, State, Zip Code

23. Nomination of Guardian: (☒ check one)

- ☒ I want to be the guardian over the adult. I am competent and capable of acting as guardian of the proposed protected person and consent to act in this capacity.
- ☐ I do not want to be the guardian. Instead, the Court should appoint (*insert name*) \_\_\_\_\_ to be the guardian over the adult.  
(if you selected this option, skip ahead to #32)

24. If you do not live in the State of Nevada: (☒ check one)

- ☐ A person or care provider in this State is providing continuing care and supervision for the adult;
- ☐ The adult is in a secured residential long-term care facility in this State;
- ☐ The guardian will move to the State of Nevada within 30 days of appointment; or
- ☐ The proposed protected person will move to the guardian's state of residence within 30 days of appointment.

[NOTE: If a nonresident is appointed as guardian for an adult, the guardian must designate a registered agent in the State of Nevada in the same manner as a represented entity pursuant to Nevada Revised Statutes Chapter 77.]

25. Qualifications. (Answer each item listed; "Has" answers must be explained)

The Petitioner: (☒ check one for each)

- ☐ has ☒ has not been convicted of a crime of moral turpitude, a crime involving domestic violence or a crime involving the abuse, neglect, exploitation, isolation or abandonment of a child, his or her spouse, his or her parent or any other adult.

**Explain if Yes:**

- ☐ has ☒ has never been convicted of a felony.

**Explain if Yes:** Petitioner was convicted of (*describe conviction*)

Petitioner (☒ check one) ☐ was / ☐ was not placed on parole and (☒ check one) ☐ was / ☐ was not placed on probation for that felony.

- ☐ has ☒ has never been suspended for misconduct or disbarred from the practice of law, the practice of accounting or any other profession which involves the management or sale of money, investments, securities or real property and requires licensure in Nevada or any other state.

**Explain if Yes:**

- ☐ has ☒ has not filed for bankruptcy within the past 7 years.
- ☐ is ☒ is not a party to pending criminal or civil litigation.

**Explain if Yes:**

### Information Regarding the Co-Petitioner

☒ Not Applicable (*check if there is only one proposed guardian, and go to #33*)

26. Full legal name: \_\_\_\_\_.
27. Date of birth: \_\_\_\_\_; current age: \_\_\_\_\_.
28. Relationship to adult in need of a guardian: \_\_\_\_\_.
- If you are the spouse, the date of marriage was: (*date*) \_\_\_\_\_.
29. Residence address:

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

Mailing address (*if different than residence address*):

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

30. Nomination of Guardian: (☒ *check one*)
- ☐ I want to be the guardian over the adult. I am competent and capable of acting as guardian of the proposed protected person and consent to act in this capacity.
- ☐ I do not want to be the guardian. Instead, the Court should appoint (*insert name*) \_\_\_\_\_ to be the guardian over the adult.
- (*if you selected this option, skip ahead to #32*)

31. **If you do not live in the State of Nevada:** (☒ *check one*)

- ☐ A person or care provider in this State is providing continuing care and supervision for the adult;
- ☐ The adult is in a secured residential long-term care facility in this State;
- ☐ The guardian will move to the State of Nevada within 30 days of appointment; **or**
- ☐ The proposed protected person will move to the guardian's state of residence within 30 days of appointment.

[NOTE: If a nonresident is appointed as guardian for an adult, the guardian must designate a registered agent in the State of Nevada in the same manner as a represented entity pursuant to Nevada Revised Statutes Chapter 77.]

32. **Qualifications. (Answer each item listed; "Has" answers must be explained)**

The Co-petitioner: (☒ *check one for each*)

- ☐ has ☐ has not been convicted of a crime of moral turpitude, a crime involving domestic violence or a crime involving the abuse, neglect, exploitation, isolation or abandonment of a child, his or her spouse, his or her parent or any other adult.

**Explain if Yes:**

- ☐ has ☐ has never been convicted of a felony.

**Explain if Yes:** The Petitioner was convicted of (*describe conviction*)

---

The Petitioner (☒ *check one*) ☐ was / ☐ was not placed on parole and (☒ *check one*) ☐ was / ☐ was not placed on probation for that felony.

- ☐ has ☐ has never been suspended for misconduct or disbarred from the practice of law, the practice of accounting or any other profession which involves the management or sale of money, investments, securities or real property and requires licensure in Nevada or any other state.

**Explain if Yes:**

- ☐ has ☐ has not filed for bankruptcy within the past 7 years.

- ☐ is ☐ is not a party to pending criminal or civil litigation.

**Explain if Yes:**

### General Information

33. **Compensation.** Are you currently being paid for services as a guardian to more than one protected person who is not related to you by blood or marriage? (☒ *check one*):

- ☒ No, I am not being paid for services as a guardian.  
☐ Yes, I am being paid for services as a guardian.

#### Notice:

You must try to notify the adult's relatives that you are applying for temporary guardianship. This includes the adult's spouse, brothers and sisters, children, grandchildren, parents, and grandparents. You can call or write/email/text them to let them know you are filing this paperwork.

Below, list who you contacted and what they said.

If there are people you did not contact (because you can't find them or because contacting them would put the adult in danger), you must list their names and the reason you did not contact them.

After you file this paperwork, you will have to notify them **again** by sending copies of your filed paperwork by certified mail or personal service.

34. **Notice to Relatives.** (☒ *check and complete the applicable sections with explanations*)

- ☒ I notified the following relatives by telephone or writing:  
(*list the people you did notify, when, and how*)

Name of Person Notified	Date Notified	How Contacted (Phone, Email)	Response ( <i>do they agree or not</i> )
LaMont D. Brown	03/30/21	Phone	Agree
Keenan C. Brown	03/30/21	Phone	Agree
Clayton E. Brown	03/30/21	Phone	Agree
Keith A. Brown	03/29/21	Phone	Agree
L.V. Palmore	03/29/21	Phone	Agree

- ☒ I did not notify the following relatives about the temporary guardianship because **the adult would be at immediate risk of physical, emotional and/or financial harm** if notice was provided before the court determines whether to appoint the temporary guardian (*list the people you did not notify because it would put the adult in danger*):

Name of Person Not Notified	Reason You Did Not Notify
Tyrese Brown	Historical risk of physical, emotional, financial harm

***\*\*You must notify the people above within 48 hours if you are appointed a temporary guardian.\*\****

- ☐ I did not notify the following relatives about the temporary guardianship because it **is not feasible/practical to notify them at this time** (*list any relatives you did not notify because you cannot or do not know where to find them*):

Name of Person Not Notified	Reason You Did Not Notify

***\*\*If you find the people above, you must notify them within 48 hours of finding them. If you can't find them, you will need to request the judge's permission to waive service on these people, or to serve them by publishing a notice in a newspaper instead.\*\****

35. I understand that if I am appointed a temporary guardian:
- The court will set a hearing within 10 days to decide whether to extend the temporary guardianship.
  - I will have to attempt in good faith to notify the adult's relatives and any other required person of the temporary guardianship and the hearing to extend the temporary guardianship. If I do not, the court can terminate the guardianship.
  - The court can extend the temporary guardianship only if there is clear and convincing evidence that the adult still needs a temporary guardian. If extended, the guardianship usually can only be extended for two 60-day periods.
36. **Certificate of Incapacity** must be filed showing the need for a guardianship over the proposed protected person. For a temporary guardianship, the certificate must show that the proposed protected person faces an immediate and substantial risk of physical or financial harm, or needs immediate medical attention, and is unable to respond to the risk of harm or obtain the medical care. The certificate must be completed and signed by one of the following:
- A physician who is licensed to practice medicine in this State or who is employed by the Department of Veterans' Affairs;
  - A governmental agency in this State which conducts investigations; or
  - Any other person whom the court finds qualified to execute a certificate.
37. **Confidential Information Sheet – Guardianship** must be completed and filed. You must provide at least one form of identification (listed on the sheet) for each person.
38. **Plan of Care** must be completed and filed within 60 days of being appointed the guardian.
39. **Monthly Budget** must be completed and filed if you are requesting guardianship over the adult's estate.
40. **Exhibit A: List of All of the Adult's Relatives** must be completed and attached to petition.

41. **Exhibit B: Information Regarding the Adult's Estate** must be completed and attached to petition if you are requesting guardianship over the adult's estate. If you are appointed the Guardian, the Court will determine how to safeguard the protected person's funds. The Court will decide whether to:
- Require the funds to be placed into a blocked account.
  - Require you to obtain a bond in an amount equal to the total amount of the proposed protected person's liquid assets.
42. Attach any other documentation that supports your request for guardianship.
43. **Other:** In addition to the above, the Court should also consider (*explain anything else the judge should know when considering your request for guardianship*):

Petitioner(s) requests that this guardianship be granted, that the relief requested be granted as stated herein, and for such other and further relief as the Court may deem just and proper.

DATED (*month*) March (*day*) 30, 20 21.

/s/ Shawntina Brown-Palmore  
(First Petitioner's Signature)

Shawntina Brown-Palmore  
(Printed Name)

/s/  
(Second Petitioner's Signature)

(Printed Name)

**VERIFICATION**

I, (*name of first petitioner*) Shawntina Brown-Palmore, declare that I am the Petitioner in the within action; that I have read the foregoing Petition For Appointment of Guardians and know the contents thereof; that the same is true of my knowledge except as to those matters therein stated upon information and belief and as to those matters, I believe them to be true.

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

/s/ Shawntina Brown-Palmore  
FIRST PETITIONER'S SIGNATURE

**VERIFICATION**

I, (*name of second petitioner*) \_\_\_\_\_, declare that I am the Co-Petitioner in the within action; that I have read the foregoing Petition For Appointment of Guardians and know the contents thereof; that the same is true of my knowledge except as to those matters therein stated upon information and belief and as to those matters, I believe them to be true.

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

/s/  
SECOND PETITIONER'S SIGNATURE

## EXHIBIT A: List All of the Adult's Relatives

### Spouse:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☒ Deceased

### Parents:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☒ Deceased

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☒ Deceased

### Brothers and Sisters:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☒ Deceased

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☒ Deceased

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☒ Deceased

### Grandparents:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☒ Deceased

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☒ Deceased

### Children:

Name: LaMont D. Brown

Address: 5435 Scherr Drive

Jefferson, Missouri 65109

☐ Address Unknown ☐ Deceased

Name: Keenan C. Brown

Address: 1531 Elizabeth Ave.

Trenton, NJ 08629

☐ Address Unknown ☐ Deceased

Name: Clayton E. Brown

Address: 1531 Elizabeth Ave.

Trenton, NJ 08629

☐ Address Unknown ☐ Deceased

Name: Keith A. Brown

Address: 11221 Apple Valley Drive

Frisco, Texas 75033

☐ Address Unknown ☐ Deceased

### Grandchildren:

Name: Wesley Yarborough

Address: 1545 Delucchi, Unit H

Reno, NV 89502

☐ Address Unknown ☐ Deceased

Name: Ananda Palmore

Address: 6408 Steamship Court. Las

Vegas, NV 89130

☐ Address Unknown ☐ Deceased

### Grandparents:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☒ Deceased

Name: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Address Unknown ☒ Deceased

**Complete this page only if you are requesting guardianship over the estate.**

**Complete this page only if you are requesting guardianship over the estate.**

- You will be required to file a detailed Inventory listing all of the protected person's assets within 60 days of your appointment.**