

1 **ORDA**

2 *Name:* \_\_\_\_\_

3 *Address:* \_\_\_\_\_

4 *Telephone:* \_\_\_\_\_

5 *Email Address:* \_\_\_\_\_

6 **DISTRICT COURT**  
7 **CLARK COUNTY, NEVADA**

8  
9 In the Matter of Confidentiality Pursuant to NRS  
10 247.530 & 250.130.

Case No: \_\_\_\_\_

Department No: \_\_\_\_\_

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12  
13 **AFFIDAVIT REQUESTING CONFIDENTIALITY**  
14 **PURSUANT TO NRS 247 & 250**

15 STATE OF NEVADA )  
16 ) SS.  
17 COUNTY OF CLARK )

18 I, *(your name)* \_\_\_\_\_, declare under the laws of State of  
19 Nevada under penalty of perjury that:

20 1. That *(non-profit's name)* \_\_\_\_\_ is a non-profit  
21 entity in Nevada that qualifies to have personal information in the records of the County  
22 Recorder and County Assessor kept confidential pursuant to NRS 247.540 and NRS 250.140  
23 because it maintains a confidential location for the purpose of providing shelter to victims of  
24 domestic violence.  
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2. As a result of its status as a non-profit entity in Nevada that maintains a confidential location, there is or has been contact with individuals who are suspected of crimes, have been convicted of crimes, and are on probation/parole for crimes.

3. That as a result, there is exposure to possible retribution, retaliation, threats, harassment, or violence by these negatively affected individuals or their associates.

4. That this exposure creates a special risk of harm to the non-profit entity.

5. That for the non-profit's protection, it is necessary to keep confidential its address, phone number, and email address.

6. Additionally, I have the following justification(s): *(Optional: Include any further justification)*

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7. That the address(es), telephone number(s), and email address(es) of the entity for which this confidentiality shall attach are:

*Address(es):*

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*Phone No.(s):*

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*Email(s):*

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8. That the instrument number(s) and parcel number(s) for the above-referenced addresses(s) are:

*Instrument No.(s):*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Parcel No.(s):*

\_\_\_\_\_  
\_\_\_\_\_

Pursuant to NRS 53.045, I declare under the law of the State of Nevada that the foregoing is true and correct.

*Your signature:* \_\_\_\_\_  
*Your name:* \_\_\_\_\_  
*Non-profit name:* \_\_\_\_\_

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC in and for the  
County of Clark, State of Nevada.