PART II. Declaration of Circumstances/Hardship that Make Electronic Service Impossible

COMPLETE PART II **ONLY** IF YOU ARE REQUESTING THE COURT TO APPROVE NON-ELECTRONIC SERVICE PROCEDURES (POSTCARD NOTICE) FOR YOU.

I have unique circumstances that make electronic service impossible or an undue hardship. I understand that the Court will take up my request up in the near future and that the Court may require additional information from me to address my request. I understand that the Court has exclusive authority to determine whether and how I will continue to receive service of filings in this case.

Please specify your individual circumstances that make electronic service an impossibility or an undue hardship (attach additional pages if necessary): (PSW)

I am 62 with medical conditions including high blood pressure & arthritis. I have no computer access nor e-mail. Creating these items would cause personal distress & financial hardship. Further, if the court denies this request it will be in violation of NV Elder abuse laws, NEV. REV. STAT § 200.592 (6) "older person...", & "vulnerable person..." 1.(6) and 4.(a)

Name: (Please print legibly) Paula S. Westerman

Telephone Number:

Mailing Address: P.O. Box 1550
Yerington, NV 89447-1550

I understand that if my address changes, it is my responsibility to notify the Court in writing at the below address of my new address, and that if I fail to do so, I will nevertheless be deemed to have notice of documents and all subsequent Orders and other filings in this case.

I declare to the best of my ability pursuant to 28 U.S.C. § 1746, that the above is true and correct. (PSW)

Signature: Paula S Westerman

Executed on date: 5-1-2019

Continuation Request for Postcard Notice and any changes of mailing address:

U.S. District Court Clerk, Attn: 3:73-cv-00127-MMD-WGC Notice Clerk
Bruce R. Thompson U.S. Courthouse
400 S. Virginia Street, Room #301
Reno, Nevada 89501

FILED
ENTERED
RECEIVED
SERVED ON
COUNSEL/PARTIES OF RECORD
MAY - 2 2019
CLERK US DISTRICT COURT
DISTRICT OF NEVADA
BY: DEPUTY

Please keep a copy of this Order and the completed Form for your files.

Exhibit A