



8. (a) Name \_\_\_\_\_  
 Post Office Address \_\_\_\_\_  
 age \_\_\_\_\_ years, relationship \_\_\_\_\_ occupation \_\_\_\_\_  
 is qualified and willing to act as guardian of the respondent's (estate) (estates and person).
- (b) \_\_\_\_\_ of \_\_\_\_\_  
 age \_\_\_\_\_ years (a)(an) \_\_\_\_\_ is qualified and willing to act as  
 guardian of the respondent's person only.
- (c) The guardianship be for the limited purpose of: \_\_\_\_\_  
 \_\_\_\_\_
- (d) The guardian, if appointed, is authorized to place the ward in a residential facility, as follows: \_\_\_\_\_  
 \_\_\_\_\_
- (e) The duration of the term of guardianship should be \_\_\_\_\_
- (f) (An)(No) authorization to appraise goods and chattels issue to \_\_\_\_\_  
 \_\_\_\_\_

**PETITIONER ASKS:**

- (a) \_\_\_\_\_ be adjudged a disabled person
- (b) Guardian(s) be appointed for the purpose and terms as above set forth. Notice to Chief Attorney of the Administrator of Veteran's Affairs (is) (is not) required. Respondent has (a) (no) safety deposit box at \_\_\_\_\_ at \_\_\_\_\_.

Name _____	Petitioner _____
Attorney for Petitioner	Petitioner's Signature
Address _____	Address _____
City, State Zip _____	City, State Zip _____
Telephone _____	Telephone _____

Signed and sworn to before me this \_\_\_\_\_ 20\_\_\_\_\_  
 \_\_\_\_\_

NOTARY PUBLIC