

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE GUARDIANSHIP)
)
OF _____,) Case No. PG
)
An incapacitated person)

PETITION FOR GUARDIANSHIP

COMES NOW (Petitioner) _____,
and in support of the Petition for Guardianship allege(s) and state(s) to the Court as follows:

1. THAT (Petitioner) _____ is the (relationship) _____ of the incapacitated person, and is/are concerned about the welfare of (Ward) _____, a resident of (city) _____, _____ County, Oklahoma, and is/are entitled to Petition this Court for appointment of Guardian over his/her person and estate.
2. That notice of this Petition should be given to the following individuals:

NAME/ADDRESS

RELATIONSHIP

Ward

Ward's _____

Ward's _____

3. That the proposed Ward is impaired by mental illness as defined by 43A Oklahoma Statutes §1-103 by reason of a (impairment) _____ and is thus unable to: 1) receive and evaluate information effectively and make and communicate responsible decisions, 2) meet the essential requirements for physical health and safety, 3) effectively manage medical treatment needs and 4) manage financial resources.
4. That Petitioner knows of no person or organization that has been nominated in writing to serve as Guardian of the prospective Ward.
5. That Petitioner is not aware of the identity of any attorney representing the prospective Ward.
6. That Petitioner(s) is/are a suitable person qualified to serve as Guardian as required by 30 Oklahoma Statutes §4-105 and is/are willing to assume the duties and responsibilities of Guardian upon appointment of this Honorable Court.
7. That the assets of the Ward consist of primarily _____
8. That it would be in the best interest of the Ward and his estate that Petitioner be appointed Guardian, to serve without bond.
9. That Petitioner is a relative of said Ward within the fourth degree of consanguinity and that the Guardianship Estate is not subject to the provisions of the Veterans Volunteer Guardianship Act (72 O.S. § 191 et seq.) and that it is in the best interest of the Guardianship Estate and the Ward that pursuant to 30 Okla. Stat. § 4-303(B)(3), the Court waive the requirement for filing of an annual accounting and annual Guardianship Plan for the property herein, subject to further Order of the Court.

WHEREFORE, Petitioner prays that the Court enter its Order judicially determining (Petitioner) _____ to be an incapacitated person; for an Order appointing Petitioner Guardian of the person and estate of _____ (Ward) _____, to serve without bond; and for such other and further relief which this Honorable Court deems just, equitable and proper.

Name	_____	_____
Address	_____	_____
	_____	_____
Tel:	_____	_____
	Petitioner	Petitioner

ORIGINAL VERIFICATION FOLLOWS

VERIFICATION

STATE OF OKLAHOMA)
) ss
COUNTY OF OKLAHOMA)

I, _____, of legal age and being first duly sworn upon oath, depose and state that I am the Petitioner above named, that I have read and understand the above and foregoing Petition and that the contents contained therein are true and correct to the best of my knowledge, information and belief.

PETITIONER

SUBSCRIBED AND SWORN to before me on this _____ day of _____, 20____,
by _____.

NOTARY PUBLIC

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE GUARDIANSHIP)
)
OF _____,) Case No. PG
)
An incapacitated person)

NOTICE OF HEARING PETITION FOR GUARDIANSHIP

TO: ALL PERSONS INTERESTED IN THE PERSON AND ESTATE OF
_____, an alleged incapacitated person

NOTICE IS HEREBY GIVEN that _____
have filed in the District Court of Oklahoma County, Oklahoma, a Petition alleging that
_____ is an incapacitated person and praying for Letters of
Guardianship to be issued to _____ upon the person
and estate of _____, an adult.

NOTICE IS FURTHER GIVEN that the ____ day of _____, 20____,
at the hour of ____ o'clock ____ m. in the District Courthouse of _____ County, in the
City of _____, State of Oklahoma, has been appointed as the time and place for hearing
said Petition, when and where any persons interested may appear and show cause, if any they have,
why such appointment should not be made.

DATED THIS ____ day of _____, 20____.

JUDGE OF THE DISTRICT COURT

Petitioner, Address, and Telephone No.

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE GUARDIANSHIP)
)
OF _____,) Case No. PG
)
An incapacitated person)

NOTICE OF HEARING PETITION FOR LETTERS OF GUARDIANSHIP

TO: _____ (Ward)

YOU ARE HEREBY NOTIFIED that a Petition has been filed alleging that you are an incapacitated person and are incapable of caring for yourself, or properly managing your property. The Petition requests that a Guardian be appointed by the Court to make decisions for you regarding yourself and your property. A copy of the Petition is attached.

The hearing on the petition will be held on the ____ day of _____, 20__, at the hour of _____ o'clock __.m. before the **Honorable** _____, in the District Courthouse of _____ County, in the City of _____, State of Oklahoma. At the hearing a Guardian may be appointed for your person and property. The Judge will explain to you the nature, purpose and effect of the proceedings.

You have the right to attend the hearing. You may confront and cross-examine all witnesses and present your own witnesses. You have the right to request that your hearing be closed to the public. You may request that an expert be appointed to examine you and if the Judge believes that an examination is necessary, the Judge will order an evaluation to be done.

You have the right to hire an attorney of your choice to represent you. If you do not have an Attorney and you wish to be represented by an Attorney at the hearing, the Court will appoint one for you. You may request the appointment of an Attorney orally or in writing prior to the hearing or at the hearing. If you are able, you will be required to pay the cost of an Attorney appointed by the Court.

DATED THIS ____ day of _____, 20__.

JUDGE OF THE DISTRICT COURT

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE GUARDIANSHIP)
)
OF _____,) Case No. PG
)
An incapacitated person)

ORDER FOR HEARING PETITION FOR GUARDIANSHIP

NOW ON this _____ day of _____, 2019, there having been filed in this Court a Petition for Guardianship with prayer that (name of Petitioner) _____ be appointed Guardian(s) of the person and estate of (name of Ward) _____.

IT IS HEREBY ORDERED that the said Petition be, and is, hereby set for hearing on the _____ day of _____, 2019, at _____ o'clock __.m., before the Honorable Judge _____, in the District Courthouse of _____ County, City of _____, State of Oklahoma.

IT IS FURTHER ORDERED that Notice be mailed to each and every person interested in the person or estate of _____ at their last known address, with sufficient postage prepaid thereon, not less than ten (10) days prior to the date of hearing.

JUDGE OF THE DISTRICT COURT

Name _____
Address _____

Tel. _____
Guardian(s)

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE GUARDIANSHIP)

OF _____,)

An incapacitated person)

Case No. PG

ORDER APPOINTING GENERAL GUARDIAN

Now on this ____ day of _____, 20____, there came on for hearing the
Petition of _____ on file herein alleging that it is necessary
that a general Guardian of the person and estate be appointed for the incapacitated person,
_____, said Petitioner, appearing in person, and the
incapacitated person, _____, appearing/not appearing in
person, and the Court having examined the pleadings on file herein and the testimony of witnesses,
and being fully advised in the premises:

FINDS, ORDERS, ADJUDGES AND DECREES as follows:

1. That proper notice of this hearing has been given pursuant to law and the Court’s order
issued herein and that no further notice of this hearing is necessary.
2. That the Ward is a resident of _____ County, Oklahoma.
3. That by clear and convincing evidence, the Ward is determined to be an incapacitated
person, who is impaired by reason of

resulting in an inability to receive and evaluate information effectively, to meet the essential
requirements for physical health and safety, and to manage financial resources.

4. That the financial resources of the Ward include personal property and

5. That the essential requirements for managing the financial resources of the incapacitated person are safeguarding and preserving the assets of the incapacitated person and managing the ordinary expenses of living and care for the incapacitated person.

6. That the requirements for the health and safety of the incapacitated person are health care, food, shelter, clothing, personal hygiene, and other care. That the necessary skills and knowledge to meet the essential requirements for the health and safety of the incapacitated person include the ability to obtain professional assistance in her health care and from time to time to provide health care, food, shelter, clothing and to assist with her personal hygiene.

7. That by reason of the Ward being an incapacitated person, a general Guardian should be appointed for the person and estate, and no less restrictive alternative will ensure the receipt of necessary care and assistance.

8. That Petitioner(s) is/are the (*relationship*) _____ of the Ward and are fit and proper persons qualified to serve as Guardian of the person and property of the Ward, in that they are not minors, incapacitated or partially incapacitated, convicted felon(s), bankrupt, nor are they insolvent or under any financial obligation to the Ward or subject to a conflict of interest which would preclude or be substantially detrimental to their ability to act in the best interest of the Ward, and the Petitioner(s) is/are hereby appointed to serve as general Guardian of the person and property of the Ward.

9. That this case is not subject to the Veterans Volunteer Guardianship Act, and that the anticipated annual income to the Ward plus the value of personal property of the Ward is less than \$40,000.00; therefore, bond may be waived by the Court as permitted by 30 O.S. § 4-201(B)(2), and

Such bond is therefore waived, and Letters of General Guardianship will issue to Petitioner(s) upon taking the oath of office.

10. That Petitioner(s) is/are relatives of said Ward within the fourth degree of consanguinity and that the Guardianship Estate is not subject to the provisions of the Veterans Volunteer Guardianship Act (72 O.S. § 191 et seq.); that Ward's financial resources or assets, other than a homestead, are worth less than \$10,000.00,

11. That the Guardianship Plan due pursuant to 30 O.S. § 3-120 attached hereto and made a part hereof is approved.

JUDGE OF THE DISTRICT COURT

Name _____

Address _____

Tel. _____

Guardian(s)

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE GUARDIANSHIP)
)
OF _____,) Case No. PG
)
An incapacitated person)

LETTERS OF SPECIAL GUARDIANSHIP, GUARDIAN'S OATH

_____ is/are hereby
appointed Special Guardian(s) of the person and estate of
_____, an incapacitated person.

**These Letters of Special Guardianship shall terminate on _____ day of
_____, 20____.**

WITNESS my hand and seal this _____ day of _____, 2019.

JUDGE OF THE DISTRICT COURT

STATE OF OKLAHOMA)
) ss.
COUNTY OF OKLAHOMA)

I/We, (name of Guardians) _____, do
solemnly swear that I/we will discharge all and singular the duties of Special Guardian(s) of the person
and estate of (name of Ward) _____, an
incapacitated person, according to law and to the best of my ability.

So help me, God!

Signature of Guardian Signature of Guardian

SUBSCRIBED AND SWORN to before me in open court this _____ day of
_____, 20____, by _____.

JUDGE OF THE DISTRICT COURT

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE GUARDIANSHIP)
)
OF _____,) Case No. PG
)
An incapacitated person)

LETTERS OF GENERAL GUARDIANSHIP, GUARDIAN'S OATH

_____ is/are hereby
appointed general Guardian(s) of the person and estate of
_____, an incapacitated person. *If applicable, either
Guardian may act alone and independent of the other Guardian.*

WITNESS my hand and seal this ____ day of _____, 2019.

JUDGE OF THE DISTRICT COURT

STATE OF OKLAHOMA)
) ss.
COUNTY OF OKLAHOMA)

I/We, (name of Guardians) _____, do
solemnly swear that I/we will discharge all and singular the duties of Guardian(s) of the person and
estate of (name of Ward) _____, an
incapacitated person, according to law and to the best of my ability.
So help me, God!

Signature of Guardian

Signature of Guardian

SUBSCRIBED AND SWORN to before me in open court this ____ day of
_____, 20____, by _____.

JUDGE OF THE DISTRICT COURT

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE GUARDIANSHIP)
)
OF _____,) Case No. PG
)
An incapacitated person)

AFFIDAVIT OF MAILING AND PERSONAL SERVICE

STATE OF OKLAHOMA)
) ss.
COUNTY OF OKLAHOMA)

I, _____ herein, of lawful age and being first duly sworn upon oath, state that on the ____ day of _____, 20__, I hand-delivered to the potential Ward, _____, a true and correct copy of the Notice of Hearing Petition for Guardianship and Petition for Guardianship, and deposited in the U.S. Mail, with sufficient postage prepaid thereon, true and correct copies of the Notice of Hearing Petition for Guardianship and Petition for Guardianship to the following:

NAME/ADDRESS

NAME/ADDRESS

FURTHER AFFIANT SAYETH NOT!

DATED this ____ day of _____, 20__.

PETITIONER

SUBSCRIBED AND SWORN to before me on this ____ day of _____, 20__,
by _____.

NOTARY PUBLIC

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE GUARDIANSHIP)
)
OF _____,) Case No. PG
)
An incapacitated person)

ORDER APPOINTING SPECIAL GUARDIAN

THIS MATTER comes on for hearing this ____ day of _____, 20____, upon Petitioner(s) request for appointment as Special Guardian of the person and estate of _____. Petitioner(s) appear(s) in person and the Ward does not appear in person. The Court, having reviewed the file and evidence presented herein, hearing testimony of witnesses duly sworn, and being fully advised in the premises, FINDS:

THE COURT FURTHER FINDS that the proposed Ward is incapacitated by reason of _____ and is therefore unable to handle his/her own business, financial and personal affairs, that (s)he is unable to make informed decisions concerning medical care, residential placements and general daily personal care and affairs and that it is in the Ward's best interest that a Special Guardian(s) be appointed over his/her person.

THE COURT FURTHER FINDS that there is imminent danger that the health or safety of the Ward will be seriously impaired unless immediate action is taken.

THE COURT FURTHER FINDS that an immediate or reasonably foreseeable serious physical harm to the Ward will result from a delay.

THE COURT FURTHER FINDS that no other person appears to have authority to act in the circumstances.

THE COURT FURTHER FINDS that Petitioner(s) herein, is the (relationship) _____ of the Ward and is/are a fit and proper person(s) and entitled under law to be appointed Special Guardian(s) of the proposed Ward and should be appointed Special Guardian(s) of the person and estate of the Ward.

THE COURT FURTHER FINDS that the Guardian (s) should not be required to post a personal bond.

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED by the Court that (name of Ward) _____ is hereby judicially determined to be an incapacitated person, incapable of handling his/her own personal, financial and business affairs.

IT IS FURTHER ORDERED, ADJUDGED AND DECREED by the Court that pursuant to Title 30, Oklahoma Statutes § 3-115, paragraph (F.), that _____ is/are hereby appointed Special Guardian(s) of the person of _____ and that Letters of Special Guardianship be issued until a general Guardian is appointed pursuant to Title 30, Oklahoma Statutes § 1-112, or for thirty (30) days, whichever is less and (s)he shall serve without bond.

IT IS FURTHER ORDERED, ADJUDGED AND DECREED that notice hereof shall be provided to the following:

NAME/ADDRESS	RELATIONSHIP
_____	Ward

_____	Ward's _____

_____	Ward's _____

WITNESS MY HAND and seal the day and year first above written.

JUDGE OF THE DISTRICT COURT

Name _____
Address _____

Tel. _____
Guardian(s)

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE GUARDIANSHIP)
)
OF _____,) Case No. PG
)
An incapacitated person)

APPLICATION FOR SPECIAL GUARDIANSHIP

COMES NOW (Applicant) _____,
and in support of the Application for Special Guardianship allege(s) and state(s) to the Court as follows:

1. THAT (Applicant) _____ is the (relationship) _____ of the incapacitated person, and is/are concerned about the welfare of (Ward) _____, a resident of (city) _____, _____ County, Oklahoma, and is/are entitled to Petition this Court for appointment of Guardian over his/her person and estate.

2. That notice of this Application should be given to the following individuals:

NAME/ADDRESS	RELATIONSHIP
_____	Ward

_____	Ward's _____

_____	Ward's _____

_____	Ward's _____

3. That the proposed Ward is impaired by mental illness as defined by 43A Oklahoma Statutes §1-103 by reason of a (impairment) _____ and is thus unable to: 1) receive and evaluate information effectively and make and communicate responsible decisions, 2) meet the essential requirements for physical health and safety, 3) effectively manage medical treatment needs and 4) manage financial resources.

4. That Applicant knows of no person or organization that has been nominated in writing to serve as Guardian of the prospective Ward.

5. That Applicant is not aware of the identity of any attorney representing the prospective Ward.

6. That Applicant(s) is/are a suitable person qualified to serve as Special Guardian as required by 30 Oklahoma Statutes §4-105 and is/are willing to assume the duties and responsibilities of Guardian upon appointment of this Honorable Court.

7. That the assets of the Ward consist primarily of:

_____.

9. That it would be in the best interest of the Ward and his estate that Applicant be appointed Special Guardian, to serve without bond.

10. That Applicant is a relative of said Ward within the fourth degree of consanguinity and that the Guardianship Estate is not subject to the provisions of the Veterans Volunteer Guardianship Act (72 O.S. § 191 et seq.), and that it is in the best interest of the Guardianship Estate and the Ward, that pursuant to 30 Okla. Stat. § 4-303(B)(3), the Court waive the requirement for filing of an annual accounting and annual Guardianship Plan for the property herein, subject to further Order of the Court.

11. That there is imminent danger that the health and safety of Ward will be seriously impaired unless immediate action is taken. Further explanation: _____

_____.

12. That an immediate or reasonably foreseeable serious physical harm to Ward will result from a delay. Further explanation: _____.

WHEREFORE, Applicant prays that the Court enter its Order judicially determining (Applicant) _____ to be an incapacitated person; for an Order appointing Applicant Special Guardian of the person and estate of _____ (Ward) _____, to serve without bond; and for such other and further relief which this Honorable Court deems just, equitable and proper.

Name _____

Address _____

Tel: _____

Applicant Applicant

VERIFICATION

STATE OF OKLAHOMA)
) ss
 COUNTY OF OKLAHOMA)

I, _____, of legal age and being first duly sworn upon oath, depose and state that I am the Applicant above named, that I have read and understand the above and foregoing Application and that the contents contained therein are true and correct to the best of my knowledge, information and belief.

 APPLICANT

SUBSCRIBED AND SWORN to before me on this ____ day of _____,
 20__, by _____.

 NOTARY PUBLIC

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE GUARDIANSHIP)
)
OF _____,) Case No. PG
)
An incapacitated person)

PAUPER'S AFFIDAVIT

Name: _____ Social Security No.: xxx-xx-_____ (last 4)

Address: _____

1. Are you employed? ___ Yes ___ No. If so, who is your employer?

Salary or rate per hour? _____ How long have you worked there? _____

2. Do you rent or own your residence?

a. How much is your rent or mortgage payment? \$ _____ per month.

b. List the names of the persons living with you and their relationship to you:

3. Financial Resources: List the following items:

a. Bank Accounts: \$ _____

b. Cash on Hand: \$ _____

c. Securities, Stocks, Bonds: \$ _____

d. Are you due a tax refund? ___ Yes ___ No. If so, how much? \$ _____

e. Life Insurance Cash Value: \$ _____

f. Does anyone owe you money? ___ Yes ___ No. If so, how much? \$ _____

g. Do you have any pending Lawsuits for the recovery of money? If so, List:

h. If you own any of the following, state the value:

- i. Home: \$ _____
- ii. Jewelry: \$ _____
- iii. Appliances: \$ _____
- iv. Car: \$ _____
- v. Furniture: \$ _____
- vi. Equipment: \$ _____
- vii. Boat: \$ _____
- viii. Tools: \$ _____

4. Expenses:

a. List the Debts you owe:

Creditor	Balance	Monthly Payment
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____

b. What are your average monthly utility bills?

Electricity	\$ _____
Water/Trash	\$ _____
Phone	\$ _____
Gas	\$ _____

5. Have you transferred or sold any property since this case was filed?

a. If so, describe the buyer, the property, and the amount you received.

6. Do you have an attorney in this or any pending civil or criminal case?

a. If so, what is the attorney name and how much have you paid the attorney?

7. Do you have any friends and/or relatives who are able and willing to assist you in an attorney and/or paying the costs of this case? ___ Yes ___ No

a. If so, have those persons been asked for help? ___ Yes ___ No

I swear (or affirm under penalty of perjury) that I am without funds or other sources of income to pay an attorney and/or to pay the associated with this case. I have READ and UNDERSTAND the above sworn statement and understand that if it is knowingly false, a charge of PERJURY could be filed against me.

Sign Your Name

Print Your Name

SUBSCRIBED AND SWORN to before me on this ____ day of _____, 20____, by _____.

NOTARY PUBLIC

My Commission Expires

My Commission Number

ORDER RELATING TO COURT COSTS

It is ORDERED that the costs in this case shall be \$ _____ at this time, and shall be: reconsidered at final hearing; assessed before the final order is entered; waived in full.

Dated: _____

JUDGE OF THE DISTRICT COURT

Print Your Name

Print Your Address

City, State, Zip Code

Print Your Phone Number

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE GUARDIANSHIP)
)
OF _____,) Case No. PG
)
An incapacitated person)

INVENTORY OF WARD'S ESTATE

COMES NOW _____, Guardian(s) of
the person and estate of _____, and state(s) that the
following is a true and correct inventory of all the estate of
_____, including real and personal property, and all the
goods, chattels, rights, credits and monies of the Ward that have come to the possession or
knowledge of the Guardian(s) on the ____ day of _____, 20____, as follows:

REAL ESTATE: (Describe)

APPROX. VALUE
\$ _____

PERSONAL PROPERTY:

Personal property, furniture, clothing, jewelry and effects \$ _____
Monthly Social Security benefits \$ _____
Other Income \$ _____

DATED THIS ____ day of _____, 20____.

Signature _____
Name _____
Address _____
Tel: _____
Guardian Guardian

DATED this ____ day of _____, 20__.

PETITIONER

SUBSCRIBED AND SWORN to before me on this ____ day of _____, 20__, by
_____.

NOTARY PUBLIC

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE GUARDIANSHIP)
)
OF _____,) Case No. PG
)
An incapacitated person)

PLAN FOR THE CARE AND TREATMENT OF THE WARD

I _____, the Guardian of the Person of _____,
hereby submit this Guardianship Plan for the Care and Treatment of the Ward.

1. I believe the services necessary for the physical health and safety of the Ward are:
 - a. Arranging for the Ward to receive adequate medical, mental health, and personal care wither at home or in an appropriate facility;
 - b. Arranging for the Ward to receive assistance with personal hygiene and physical care, including but not limited to bathing, dressing, proper nutrition, exercise, and medication;
 - c. Applying for and assisting the Ward to receive government and private benefits;
 - d. Arranging for the Ward's physical and personal care needs to be met, including clothing, food, medical equipment, home safety devices, or other supplies as needed;
 - e. Making decisions regarding mental health and medical care for the Ward, including consenting to or refusing mental health and medical treatment, and admitting the Ward into and consenting to the Ward's discharge from a hospital, nursing home, or other health care or mental care facility as necessary for the best care of the Ward.

2. Those services will be obtained or provided as follows:

The Guardian will have responsibility for providing assistance to the Ward directly or through paid or volunteer providers, making medical decisions on behalf of the Ward, and monitoring the care the Ward receives at home or in any facility where the Ward is placed.

3. I will seek to provide the least restrictive environment possible considering the mental and physical condition of the Ward.

Date

Guardian Signature

Guardian Print

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE GUARDIANSHIP)
)
OF _____,) Case No. PG
)
An incapacitated person)

PLAN FOR THE MANAGEMENT OF THE PROPERTY OF THE WARD

I _____, the Guardian of the Estate of _____,
an incapacitated person, hereby submit this Guardianship Plan for the Management of the Property
of the Ward.

1. I believe the services necessary to manage the property of the Ward which is subject to this
Plan are as follows:
 - a. Arranging for all bills owed by the Ward to be timely paid;
 - b. Filing and paying the Ward's taxes, if required;
 - c. Representing the Ward in any legal matter that may arise;
 - d. Gathering, organizing, and safeguarding the Ward's personal and financial papers,
including accessing documents held in the Ward's safe deposit box(es), if any;
 - e. Receiving and managing the Ward's income.
2. Those services will be obtained or provided as follows:

I will have responsibility for managing the Ward's property and finances and will carry out
these duties personally or enlist assistance from others acting under my direction and
supervision.

3. I will protect and manage the Ward's assets, utilize such assets to pay the costs of the Ward's
health, maintenance and support and use such assets for the comfort and security of the Ward.

Date

Guardian Signature

Guardian Print

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF TEMPORARY GUARDIANSHIP)
OF _____) Case No. PG-_____
an Incapacitated Person,)

**ANNUAL REPORT AND PROPOSED PLAN FOR THE CARE AND TREATMENT OF A
WARD AND MANAGEMENT OF THE WARD'S PROPERTY**

I, _____, the Guardian of the person and property of _____
("Ward"), hereby submit this Guardianship Plan for the care and treatment of the Ward and
management of the property and assets owned by said Ward.

1. I believe the services necessary for the physical health and safety of the Ward are:
proper housing, food, clothing, living essentials, regular medical care and emotional support.
2. Those services will be obtained or provided as follows:
 - a. The Ward will continue to reside at _____.
 - b. The Ward's care will be provided by _____.
 - c. The Ward will receive regular medical and dental exams to be provided by
_____.
 - d. Emotional support, entertainment and love are and will continue to be provided by the
Ward's friends and family.
3. Due to the very minimal amount of personal property belonging to the Ward, I believe
that the services necessary to manage the Ward's property are: _____

-
-
4. The Ward's income is:

5. As the Guardian, I will implement the terms of all Court orders that this Court may
issue and see that all of the assets of the Ward's estate are adequately maintained in a prudent manner
and disbursed according to the laws of the State of Oklahoma and based upon good business
practices, keeping in mind the wishes and desires of the Ward for whom the funds are being
expended and maintained. No additional services other than those outlined above are needed.

6. The present place of residence and telephone number of the Guardian is _____,
which is a _____ (private residence/ multi-unit facility/ long-term care facility/ assisted living facility, etc.).

7. The Guardian reports that the Ward is/is not covered by Medicare/Medicaid.

8. There have been no significant problems relating to the Guardianship of the Ward other than _____.

9. The Guardian requests that the Guardianship be continued.

10. Your Guardian waives/does not waive any fees to which the Guardian is entitled in acting as Guardian over said Ward.

WHEREFORE, the undersigned Guardian requests that upon hearing this report and plan after giving notice as required by law, this Court enter an order approving this annual report and plan of Guardian.

All of the above is herewith respectfully submitted on this ____ day of _____, 20__.

Signature of Guardian
Date: _____

[CONTINUED ON NEXT PAGE]

OATH OF GUARDIAN

STATE OF OKLAHOMA)
) SS
COUNTY OF _____)

_____, Guardian of the Estate of _____, an incapacitated adult, being first duly sworn on oath, states that the above and foregoing Annual Report and Plan for Care and Management of Property contains a true statement of all the Estate of said Ward that has come to his knowledge and possession and particularly of all moneys belonging to said Ward, and of all just claims of the said Ward against this Affiant.

Guardian of the Estate of _____

Subscribed and sworn to before me this ____ day of _____, 20__.

Notary Public

My Commission Expires:

NOTICE OF RIGHT TO OBJECT

Notice is hereby given that _____, Guardian of the person and property of _____, an incapacitated person, has filed an Annual Report and Plan for Care and Treatment of Ward and Management of Property of the Ward.

All persons entitled to Notice hereof are hereby notified that they have fifteen (15) days from _____, 20____, within which to file their objection to the Guardian’s Plan and Report with the Clerk of the District Court of _____ County, State of Oklahoma.

_____, Guardian

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE GUARDIANSHIP)
)
OF _____,) Case No. PG
)
An incapacitated person)

GUARDIAN'S BOND

KNOW ALL PERSONS BY THESE PRESENTS, that we:

_____, as Principal, and _____, as Surety, are held
and firmly bound to the State of Oklahoma in the penal sum of
_____ Dollars (\$_____) in lawful money of the United States
of America, for the payment of which we bind ourselves, our heirs, executors, administrators,
personal representatives and assigns, jointly and severally.

The conditions of the above obligations are such that, whereas application has been made
by a petition to the District Court of _____ County, Oklahoma for the
appointment of the above-named "Principal" as Guardian of the person and estate of
_____, the Ward.

And whereas on the ___ day of _____, 20__ by order of said District Court, Letters
of Guardianship were directed to be issued to the above-named "Principal" upon his/her taking and
subscribing the oath required by law, and executing a bond to the State of Oklahoma in the above
mentioned amount.

Now, therefore, if the above-named "Principal" shall faithfully execute the duties of the
trust as such Guardian according to law, then this obligation to be null and void, otherwise to be
and remain in full force and effect.

Executed this ___ day of _____, 20__.

Principal/Guardian

Surety or Bond Company

Address

Before me, a notary public, on this ____ day of _____, 20__, personally appeared the above “Principal” and the above “Surety” or representative of the bond company who each executed the above Bond in my presence and who acknowledged that they executed the same as their free and voluntary act and deed.

Notary Public

My commission expires: _____

The above bond approved this ____ day of _____, 20_____.

JUDGE OF THE DISTRICT COURT

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE)
CONSERVATORSHIP OF)
_____,) Case No. _____
a physically incapacitated person.)

ORDER APPROVING CONVEYANCE OF REAL PROPERTY

NOW, ON THIS ____ day of _____, 20____, there comes on for hearing before the Court, the verified Application and Petition of _____, Conservator, for the Ward, praying for an Order of this Court authorizing them to execute all documents necessary to sell the real property of _____ [Ward]; and this Court, upon due examination and consideration of said Petition and all other pleadings on this matter, and after hearing the testimony of witnesses, and being fully advised in the premises, finds as follows:

1. That the allegations of said Petition are true and correct.

2. That it appears that it would be for the benefit of said Ward to convey the real property described in the Petition.

3. That the property described in the Petition is impracticable to manage and maintain and that the income from said property does not justify the expenditures required for maintenance thereof.

4. That Notice of this sale were mailed to all interested parties prior to this hearing.

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED by this Court that _____, Conservator for _____ [Ward], be and is hereby authorized to sign all documents necessary to sell the subject property described below
[INSERT LEGAL DESCRIPTION OF PROPERTY]: _____

IT IS FURTHER ORDERED that said _____, Conservator, is authorized to execute all necessary documents to complete the sale of the subject property and that due and proper Notice of this sale was provided to all parties deemed appropriate by the Court.

IT IS SO ORDERED.

JUDGE OF THE DISTRICT COURT

APPROVED:

Name [Conservator or Conservator's Attorney]

Address

Telephone No.

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE _____)
CONSERVATORSHIP OF _____)
_____,) Case No. _____
a physically incapacitated person.)

PETITION FOR CONSERVATORSHIP

Petitioner, _____, of lawful age, respectfully represents to the Court:

PARTIES

1. _____ [Ward] is an adult person born the _____ day of _____, _____, who is physically incapacitated (“PERSON”)

2. _____ is the Petitioner and the _____ of PERSON. He is of legal age with a date of birth of the _____ day of _____, _____. The current address of Petitioner is _____.

3. This Court has jurisdiction over the parties and subject matter of this action. Under all applicable provisions of said Acts, this state and forum, and no other, has and should exercise jurisdiction herein, to-wit:

- a. Ward is a resident of this County.
- b. That Petitioner alleges that PERSON is physically incapacitated and is unable to property care for or manage their real and personal property.
- c. That PERSON has signed a Consent to Guardianship.

4. The Petitioner is not subject to registration under the Oklahoma Sex Offenders Registration Act.

5. That PERSON is physically incapacitated in the following respect _____
and is unable to care for their real and personal property.

6. It is in the best interests of this physically incapacitated person that the Petitioner be appointed as Conservator over the real and personal property of the PERSON.

7. Petitioner states that they:
 - a. Are not a convicted felon;
 - b. Has not declared bankruptcy in the last five years;
 - c. Are not obligated or indebted to physically incapacitated person;
 - d. Are not subject to a conflict of interest which would preclude or be substantially detrimental to Petitioner's ability to act in the best interest of this physically incapacitated person; and
 - e. That no judge of the District Court of _____ County is financially obligated to Petitioner.

8. This physically incapacitated person owns assets and property, the exact value of which is not known to the Petitioner, but which will be determined and reported back to the Court.

9. That Notice shall be personally served on the person alleged to be unable to manage his property and on such other persons as the Court directs.

WHEREFORE, Petitioner prays that _____ be appointed as Conservator of the real and personal property of _____ [Ward], determine and pay their obligations, and provide all services required by law.

DATED this ____ day of _____, 20__.

Respectfully submitted,

Name of Conservator

Address

Telephone Number

VERIFICATION FOLLOWS

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE)
CONSERVATORSHIP OF)
_____,) Case No. _____
a physically incapacitated person.)

CONSENT BY WARD TO APPOINTMENT OF CONSERVATOR

I _____ [Ward], do hereby consent to the appointment of the
Conservator, _____, without further notice of said appointment.

DATED this ____ day of _____, 20__.

Name of Conservator

STATE OF OKLAHOMA)
) ss.
COUNTY OF _____)

Subscribed and sworn to before me, the undersigned, this ____ day of _____,
20__.

Notary Public

My Commission Expires: _____

Commission No.: _____

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE)
CONSERVATORSHIP OF)
_____,) Case No. _____
a physically incapacitated person.)

**ORDER OF COURT IDENTIFYING WHO RECEIVES
NOTICE OF THE PETITION FOR CONSERVATORSHIP**

NOW, ON THIS _____ day of _____, 20____, pursuant to 30 O.S. § 3-211(3),
Notice of the Petition for Conservatorship shall be served on:

1. _____
2. _____
3. _____

IT IS SO ORDERED.

JUDGE OF THE DISTRICT COURT

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE)
CONSERVATORSHIP OF)
_____,) Case No. _____
a physically incapacitated person.)

ORDER APPOINTING CONSERVATOR

NOW, ON THIS ____ day of _____, 20____, this cause coming upon the Verified Petition filed in this Court by _____ (“Conservator”) for Letters of Conservatorship for _____ (“Ward”), and it appearing from a full and complete examination on the Petition, it appears to the satisfaction of the Court, that it is necessary to appoint a Conservator for _____ [Ward] by reason of physical disability.

IT IS FURTHER ORDERED AND ADJUDGED that said Petitioner, _____, is hereby appointed Conservator to manage the real and personal property of _____ [Ward], and that Letters of Conservatorship shall issue to _____ [Conservator], upon her taking the oath required by law, to serve with bond.

IT IS SO ORDERED.

JUDGE OF THE DISTRICT COURT

APPROVED:

Name [Conservator or Conservator’s Attorney]

Address

Telephone Number

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE)
CONSERVATORSHIP OF)
_____,) Case No. _____
a physically incapacitated person.)

**AFFIDAVIT OF MAILING
INITIAL REPORT AND PLAN OF MANAGEMENT**

STATE OF OKLAHOMA)
) ss:
COUNTY OF _____)

I _____ [Conservator], of lawful age, being first duly sworn upon oath, states:

That on the ____ day of _____, 20 __, I mailed true and correct copies of the Initial Report and Plan of Management of Conservator, by depositing the same in the United States mail

In _____ [City], Oklahoma, with postage prepaid, duly addressed in separate envelopes, to the following persons at the following addresses:

Name	Residence

Respectfully submitted,

Name of Conservator

Address

Telephone Number

Subscribed and sworn to before me this ____ day of _____, 20__.

My Commission Expires:

Notary Public

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE)
CONSERVATORSHIP OF)
_____,) Case No. _____
a physically incapacitated person.)

LETTERS OF CONSERVATORSHIP

_____ [Conservator] is hereby appointed Conservator of the real and personal property of _____ [Ward] with all the powers permitted and allowed by the laws of the State of Oklahoma.

DATED this ____ day of _____, 20__.

JUDGE OF THE DISTRICT COURT

OATH OF CONSERVATOR

STATE OF OKLAHOMA)
) ss.
COUNTY OF _____)

I _____ [Conservator], do solemnly swear that I will discharge all duties and responsibilities as the Conservator for the real and personal property of [Ward], and will invest and protect these assets and pay the due and necessary expenses of the Ward.

[Conservator]

Subscribed and sworn to before me this ____ day of _____, 20__.

JUDGE OF THE DISTRICT COURT

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE)
CONSERVATORSHIP OF)
_____,) Case No. _____
a physically incapacitated person.)

OATH OF CONSERVATOR

STATE OF OKLAHOMA)
) ss.
COUNTY OF _____)

I _____ [Conservator], do solemnly swear that I will discharge any and all duties required of me by law as Conservator of the estate of _____ [Ward] to the best of my ability.

[Conservator's Name]

Subscribed and sworn to before me this _____ day of _____, 20____.

Notary Public

My Commission Expires: _____

Commission No.: _____

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE)
CONSERVATORSHIP OF)
_____,) Case No. _____
a physically incapacitated person.)

INITIAL REPORT OF CONSERVATOR

I _____ [Conservator], the Conservator for _____ [Ward], hereby provide the Court with this initial report on the assets and liabilities of the Ward. _____.

- (a) All real property is identified on Exhibit "A";
- (b) All personal property is identified on Exhibit "B"; and,
- (c) All liabilities of _____ [Ward] which must be paid are set out on Exhibit "C".

DATED this ____ day of _____, 20__.

[Conservator]
[Address, Phone and Email]

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE)
CONSERVATORSHIP OF)
_____,) Case No. _____
a physically incapacitated person.)

PLAN FOR THE MANAGEMENT OF THE WARD'S ESTATE

I, _____, the Conservator for _____ [Ward], hereby submit this Initial Conservatorship Plan for the proper care of the assets and property of _____.

1. I believe that the services necessary for the management of the assets of _____ [Ward] are set out on Exhibit "A";
2. The property of _____ [Ward] will be invested as set out on Exhibit "B"; and,
3. The bills and the expenses of _____ [Ward] identified on Exhibit "C" will be paid as required unless directed otherwise by the Court.

DATED this ____ day of _____, 20__.

Respectfully submitted,

Name of Conservator

Address

Telephone Number

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE)
CONSERVATORSHIP OF)
_____,) Case No. _____
a physically incapacitated person.)

**VERIFIED APPLICATION AND PETITION
FOR CONVEYANCE OF REAL PROPERTY**

COMES NOW, _____, Conservator for _____ [Ward],
and respectfully shows this Court the following:

1. That _____ owns the following described real property located in
_____ County, Oklahoma:

2. That the above-described real property should be sold in the best interest of the Ward.
3. Attached hereto and made a part hereof as Exhibit "B" is the contract for sale.

WHEREFORE, your Petitioner, _____, prays that this Application and
Petition be approved by this Court; that the Court allow Notice to be mailed to interested parties;
that this Court issue an Order approving the sale of the subject property; and that this Court is
requested to hereby authorize the Conservator to sign any and all documents necessary to complete
the sale of the subject property on behalf of _____ [Ward] and to convey clear
title to the subject property.

DATED this ____ day of _____, 20__.

Respectfully submitted,

Name of Conservator

Address

Telephone Number

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE)
CONSERVATORSHIP OF)
_____,) Case No. _____
a physically incapacitated person.)

**NOTICE AND ORDER OF HEARING
VERIFIED APPLICATION AND PETITION
FOR CONVEYANCE OF REAL PROPERTY**

NOTICE IS HEREBY GIVEN to all persons interested in the matter of this Conservatorship, that the Petitioner, _____ [Conservator], filed in the District Court of Oklahoma County, State of Oklahoma, a Verified Application and Petition for Conveyance of Real Property to the Court for an Order conveying the real property of the _____ [Ward] to be sold.

Notice is hereby given that the ____ day of _____, 20____, at the hour of _____ o'clock __.m., of said day, has been appointed as the time for hearing said Application, at the District Courtroom of Judge _____, in said County of _____, when and where all persons interested in said matter may appear and be heard.

In testimony whereof, I have hereunto set my hand this ____ day of _____, 20 ____.

JUDGE OF THE DISTRICT COURT

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE)
CONSERVATORSHIP OF)
_____,) Case No. _____
a physically incapacitated person.)

**AFFIDAVIT OF MAILING
VERIFIED APPLICATION AND PETITION
FOR CONVEYANCE OF REAL PROPERTY**

STATE OF OKLAHOMA)
) ss:
COUNTY OF _____)

_____ [Conservator], of lawful age, being first duly sworn
upon oath, states:

That on the ____ day of _____, 20__, I mailed or caused to be mailed true and correct copies of the Verified Application and Petition for Conveyance of Real Property, by depositing the same in the United States Mail at _____ [City], Oklahoma, with postage prepaid, duly addressed in separate envelopes, to the following persons at the following addresses:

Name	Residence

Respectfully submitted,

Name of Conservator

Address

Telephone Number

Subscribed and sworn to before me this ____ day of _____, 20__.

My Commission Expires:

Notary Public

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE)
CONSERVATORSHIP OF)
_____,) Case No. _____
a physically incapacitated person.)

MOTION TO DISCHARGE CONSERVATOR

COMES NOW _____, Conservator for _____ [Ward], and hereby files this Motion to Terminate this Conservatorship and Discharge the Conservator.

The Motion is made because the Conservator and the Ward agree that the Conservatorship is no longer needed.

DATED this ____ day of _____, _____.

Respectfully submitted,

Name of Conservator

Address

Telephone Number

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE)
CONSERVATORSHIP OF)
_____,) Case No. _____
a physically incapacitated person.)

**NOTICE AND ORDER OF HEARING
APPLICATION FOR DISCHARGE OF CONSERVATOR**

NOTICE IS HEREBY GIVEN to all persons interested in this Conservatorship of _____ [Ward], that on the ____ day of _____, 20____, Petitioner, _____, filed in the District Court of _____ County, State of Oklahoma, an Application for an Order discharging _____ as Conservator over the Ward.

Notice is hereby given that the ____ day of _____, 20____, at the hour of _____ o'clock __.m., of said day, has been appointed as the time for hearing said Application, at the District Courtroom of Judge _____, in said County of _____, when and where all persons interested in said matter may appear and be heard.

In testimony whereof, I have hereunto set my hand this ____ day of _____, 20____.

JUDGE OF THE DISTRICT COURT

IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

IN THE MATTER OF THE)
CONSERVATORSHIP OF)
_____,) Case No. _____
a physically incapacitated person.)

**ORDER DISSOLVING CONSERVATORSHIP
AND DISCHARGING CONSERVATOR**

NOW ON THIS ____ day of _____, 20____, comes before me, the undersigned Judge, the Conservator's Motion to Dissolve the Conservatorship and Discharge Conservator. The Court, being fully apprized in the premises, finds as follows:

1. That the original Petition for Conservatorship was filed by Conservator, _____, on the ____ day of _____, 20__.
2. That the Order Appointing Conservator and Letters of Conservatorship were entered by this Court on the ____ day of _____, 20__.
3. That the Ward and Conservator now want the Conservatorship dissolved and the Conservator to be discharged.
4. That _____ [Ward] consents to the Conservatorship being dissolved.
5. That it is in the best interests of _____ [Ward] for the Conservator to be discharged.
6. That it is in the best interests of _____ [Ward] for the Conservatorship to be terminated.

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED that the Order Appointing Conservator and Letters of Conservatorship, entered on the ____ day of _____, 20____, are hereby vacated and the Conservatorship is dissolved.

IT IS FURTHER ORDERED, ADJUDGED AND DECREED that _____ [Conservator] is absolved from any further responsibility in this matter and the case is Ordered Closed and the final accounting presented is hereby approved.

IT IS SO ORDERED.

JUDGE OF THE DISTRICT COURT

