

Indiana Adult Guardianship State Task Force

SAMPLE FORM

STATE OF INDIANA)
) SS: **IN THE ST. JOSEPH PROBATE COURT**
COUNTY OF ST. JOSEPH) **CAUSE NO. 71J01-0604-GU-000111**

IN RE THE GUARDIANSHIP OF:
THOMAS JAMES SMITH, *Protected Person*

DECLARATION OF STANDBY GUARDIAN

Sheila Marie Webb (“Ms. Webb”), guardian of the person and estate of Thomas James Smith (“Tommy”), who being duly first sworn upon her oath, declares:

1. On February 13, 2008, I was appointed guardian over the person and estate of my adult son, Tommy, and have continued to serve as said guardian.
2. Tommy’s full name appears on his birth certificate as “Thomas James Smith” and his date of birth is March 31, 1973.
3. In the event that I ever should become unable to serve as guardian of the person or estate of Tommy due to my death or incapacity, I elect Linda Jones, 1005 James Street, South Bend, Indiana, 46617 to become Standby Guardian of the person and estate of Tommy.
4. The period of Linda Jones’ term as Standby Guardian of Tommy shall commence immediately upon my death or incapacity and shall continue for a period not to exceed ninety (90) days, unless Linda Jones files a petition for guardianship of Tommy, in which case her term as Standby Guardian shall continue until further order of a court of proper jurisdiction.

Sheila Marie Webb
Guardian of Thomas James Smith

Before me, the undersigned, a Notary Public for St. Joseph County, State of Indiana, personally appeared and acknowledged the execution of this instrument this _____ day of _____, 20__.

My commission expires:

Notary Public