

Pursuant to Article 81 of the Mental Hygiene Law

COMMISSION FOR GUARDIAN

for the appointment of a Guardian for:

INDEX No.

An Incapacitated Person/ Person In Need of a Guardian

THE PEOPLE OF THAT STATE OF NEW YORK, TO ALL WHOM THESE PRESENTS SHALL COME GREETING:

NOW THEREFORE, KNOW YE THAT WE HAVE GRANTED, GIVEN AND COMMITTED, AND BY THESE PRESENTS DO GIVE, GRANT AND COMMIT UNTO THE SAID GUARDIAN THE POWERS AS SET FORTH IN THE ATTACHED COURT CERTIFIED COPY OF THE ORDER/JUDGMENT dated _____ and entered in the office of the Nassau County Clerk on the _____ day of _____, 20____ appointing _____ as guardian of the [Person and/or Property] of _____.

WHEREAS, the appointment of Guardian shall be indefinite or insert date/event.

PLEASE NOTE: if a certified copy of the order is not attached this Commission is null & void.

Incapacitated Person's Name: ____

Incapacitated Person's Address: ____

Incapacitated Person's Phone #: ____

Guardian's Name: ____

Guardian's Address: ____

Guardian's Phone #: ____

WITNESS, MAUREEN O'CONNELL, CLERK OF THE COUNTY OF NASSAU, STATE OF NEW YORK, AT 240 OLD COUNTRY ROAD, MINEOLA, THIS ____ DAY OF _____, 20____.

BY THE CLERK OF THE COURT, COUNTY OF NASSAU