

STATE OF WISCONSIN, CIRCUIT COURT, \_\_\_\_\_ COUNTY

IN THE MATTER OF

Amended

\_\_\_\_\_  
Name

**Order and Notice for Hearing on  
Statement Requesting Transfer  
of Additional Powers to Guardian  
(Minor Guardianship of the Estate)**

\_\_\_\_\_  
Date of Birth

Case No. \_\_\_\_\_

A Statement Requesting Transfer of Additional Powers to Guardian of the Estate has been filed by

guardian of the estate.

other interested person: \_\_\_\_\_

**THE COURT ORDERS:**

Notice, including notice concerning potential court action if circumstances are extraordinary, be given to all of the following:

1. The above-named minor ward.
2. The guardian of the estate and the guardian of the person (if different).
3. County Department of Social Services or Human Services if ward is protectively placed or receives long-term support services as a public benefit.
4. Any other persons determined by the court: \_\_\_\_\_
5. To be heard on:

NOTICE OF HEARING		
Date	Time	Location (Include Room Number)
Circuit Court Judge		

If you require reasonable accommodations due to a disability to participate in the court process, please call \_\_\_\_\_ prior to the scheduled court date. Please note that the court does not provide transportation.

**DISTRIBUTION:**

1. Court
2. Minor Ward/Minor Ward's Legal Counsel, if any/ Guardian ad Litem
3. Guardian of the Estate and Guardian of the Person (if different)
4. Corporation Counsel
5. Case Worker/County Dept. of Human Services
6. Facility, if any
7. Other: \_\_\_\_\_