

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

Amended

IN THE MATTER OF

Name

Date of Birth

**Statement of Ward's Real
Property
Filed with
Register of Deeds
(Minor and Adult Guardianship)**

Case No. _____

Name and return address

Parcel identification number

TO: Register of Deeds of _____ County, State of _____
Address: _____
City/State/Zip: _____

I STATE, UNDER OATH:

1. A circuit court found the above-named ward to be incompetent on [Date] _____.
2. The information below is correct:
Name of Guardian of Estate _____
Address [Street, City, State, Zip] _____
Phone Number _____
Surety on Guardian of the Estate's Bond [if any] _____
3. The ward has an interest in the following real estate located in the county in which your office is located:
(legal description) **See attached**

State of _____
County of _____
Subscribed and sworn to before me on _____

Notary Public/Court Official

Name Printed or Typed

My commission/term expires: _____

This notarial act involved the use of communication technology.

Guardian of the Estate

Name Printed or Typed

Address

Email Address

Telephone Number

Date

This instrument was drafted by: _____