

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**

Case No. _____

Name and return address

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

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: _____

Guardian of the Estate

Name Printed or Typed

Date

This instrument was drafted by: _____