

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

IN THE MATTER OF

Amended

Name

**Notice of Statement Requesting
Transfer of Additional Powers
to Guardian
(Minor Guardianship of the Estate)**

Date of Birth

Case No. _____

To:

1. The above-named minor ward if over 14 years of age.
2. The guardian of the estate and the guardian of the person (if different).
3. County Department of Social Services or Human Services if minor ward is protectively placed or receives long-term support services as a public benefit.
4. Any other persons determined by the Court: _____

You are notified that a Statement Requesting Transfer of Additional Powers to Guardian of the Estate (Minor Guardianship) (copy attached) has been submitted to the court on [Date] _____.

If, after 10 days after notice is provided, or earlier if the court determines that the circumstances are extraordinary, no person submits to the court an objection to the request, the court may amend the order appointing guardian of the estate and enter a determination and the amended order that specifies any change in the powers of guardian of the estate.

If, within 10 days after notice is provided, a person submits to the court an objection to the request, the court shall hold a hearing, unless the objector declines a hearing, under procedure for review and modification of guardianship.

Person Making Statement

Name Printed or Typed

Address

Email Address

Telephone Number

Date