

IN THE CIRCUIT COURT FOR
PINELLAS COUNTY, FLORIDA
PROBATE DIVISION

IN RE: GUARDIANSHIP OF

(NAME OF WARD)

FILE NO.

NOTICE OF FILING

PLEASE TAKE NOTICE that the Proposed Co-Guardian Advocates, ____(NAME OF CO-GUARDIAN ADVOCATE)_____ and ____(NAME OF CO-GUARDIAN ADVOCATE)_____, hereby give notice of filing the following document(s):

Title/Type of Document(s): (choose which ones apply)

- () Death Certificate of Ward's parent
(X) Confidential Psychological Report/Doctor Report/IEP
(X) Receipt of providing fingerprints for Background Check
() Other (describe):

NAME, ESQ.

Florida Bar Number _____

Address

CSZ

Telephone Number / Fax Number

Email Address

Secondary Email Address

Attorney for Proposed Co-Guardian Advocates