STATE OF INDIANA	)	IN MARION SUPERIOR COURT
	) SS:	PROBATE DIVISION
COUNTY OF MARION	)	ESTATE DOCKET NO: _____

IN THE MATTER OF THE	)
GUARDIANSHIP OF	)
_____,	)
an Alleged Incapacitated Person	

ACCEPTANCE AND OATH OF GUARDIAN AD LITEM

I hereby accept the Court's appointment as Guardian Ad Litem and affirm under the penalties for perjury that I will faithfully discharge my duties as Guardian Ad Litem as enumerated by the Court's Order.

I affirm under the penalties for perjury that the foregoing statements are true to the best of my knowledge and belief.

Dated this _____ day of _____, 20___.

_____
Guardian Ad Litem