

STATE OF NORTH DAKOTA

IN DISTRICT COURT

COUNTY OF _____

_____ JUDICIAL DISTRICT

IN THE MATTER OF THE GUARDIANSHIP/CONSERVATORSHIP OF

AN INCAPACITATED INDIVIDUAL/PROTECTED PERSON

Case Number: _____

**AFFIDAVIT IN SUPPORT OF MOTION FOR FINAL ORDER CONFIRMING TRANSFER AND
TERMINATING GUARDIANSHIP/CONSERVATORSHIP**

*(If co-guardians/co-conservators, each guardian/conservator must
complete their own affidavit).*

I, _____ *(name of guardian/conservator),*

state as follows:

1. I am the guardian/co-guardian conservator/co-conservator for the ward/protected person.

2. My address, telephone number, and email address are as follows:

Address: _____

City State Zip

Telephone Number: _____

Email Address: _____

3. On _____, 20_____, a Petition to Transfer

Guardianship/Conservatorship from North Dakota to Another State was filed with this Court.

4. The Court entered a Provisional Order Granting Petition to Transfer

Guardianship/Conservatorship to Another State on _____, 20_____.

5. The _____ (State) state court entered an order accepting transfer of guardianship/conservatorship under provisions similar to Section 28-35-16 of the North Dakota Century Code (N.D.C.C.).

6. I filed a certified copy of the other state's order with this motion.

7. I filed a final report and accounting with this Court.

8. I ask this Court to confirm transfer of jurisdiction of the guardianship/conservatorship to the other state and terminate this guardianship/conservatorship.

9. I declare, under penalty of perjury under the law of North Dakota, that everything I stated in this Affidavit is true and correct.

STATE OF _____)
COUNTY OF _____) ss.
COUNTRY OF _____)

Signed on this _____ day of _____, 20_____.

Signature

Printed Name

Address

City, State, Zip Code

Telephone Number: _____

Email Address: _____