IN THE CIRCUIT COURT OF THE NINETEENTH JUDICIAL CIRCUIT, LAKE COUNTY, ILLINOIS

Probate Division

Estate of)
)
) No.
Alleged Disabled Person)

PETITION FOR APPOINTMENT OF TEMPORARY GUARDIAN FOR DISABLED PERSON

			, hereby certifies:			
1.	On, 24	, 20, a petition	0, a petition was filed herein for the appointment of a guardian of			
the	2		_of	an alleged disabled		
	(Estate and Person, E	state, Person)		-		
pe	rson whose date of birt	h isaı	nd whose place of residenc	e is		
	(Address)	(City)	(County)	(State)		
2.	A temporary guardiar	n is necessary for the v	velfare and protection of th	e respondent because:		
3.	Petitioner isto the alleged disabled person. (State relationship and interest to respondent)					
	The name and address of the respondent's *(a) guardian (b) Agent under the Durable Power of Attorney Law					
is						
	The name and addres arest adult kindred kno	1	s nearest relatives are as fo	llows: (if none, respondent's		
Sp	oouse and Adult Childre Name	en: Address		Relationship to respondent		
	Name and address of		an tha facility in which th			
U.			n or the facility in which the			

7. The approximate value of the respondent's personal estate is \$_____;

approximate value of real estate is \$; and the amount of anticipated annual gross	
income and other receipt is	\$	·		
8. Petitioner asks that				
	(Name)	(Address)	(City and State)	
years,		, qualifi	ed and willing to act, be appointed as	
(Age)	Occupation)			
temporary guardian of the _			of the alleged disabled person.	
	(Estate and F	Person, Estate, Person)		
thiNameAttorney forsuccession		this instrument are therein stated to b such matters the u	The undersigned certifies that the statements set forth in this instrument are true and correct, except as to matters therein stated to be on information and belief and as to such matters the undersigned certifies as aforesaid that he/she verily believes the same to be true.	

*strike either (a) or (b)