

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF SUFFOLK

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In the Matter of the Appointment of

CONSENT TO ACT

As Guardian of the Person and Property of

Index No.: _____

An Incapacitated Person

-----X

STATE OF NEW YORK)

) ss.:

COUNTY OF _____)

I, _____, the person appointed Guardian of the Person and Property of _____, a Person in Need of a Guardian, by Order and Judgment made and entered in the above-entitled matter in the office of the Clerk of the County of Suffolk on the ____ day of _____, 20____, do depose and say:

That I reside at _____.

That I am a citizen of the United States, am over 21 years of age, and that I will faithfully and honestly discharge my duties as Guardian of the Person and Property of _____, an Incapacitated Person.

Guardian

Sworn to before me this

_____ day of _____, 20____

NOTARY PUBLIC