IN THE CHANCERY COURT OF ____ COUNTY, MISSISSIPPI TENTH JUDICIAL DISTRICT

IN THE MATTER OF THE		CAUSE NO	
GUARDIANSHIP OF			
		, A MINOR	
BY PETIT	IONER(S)		
	OATH OF OF	FICE OF GUARDIAN OF A MINOR	
		, hereby state that I accept the above, and will fulfill the duties and responsibilities in the Mississippi Guardianship and Conservatorship	of the
INITIAL E	SACH		
	I have a duty to:		
	with the minor to kno	equainted with the minor and maintain sufficient consw and report to the court the minor's abilities, limitate and physical and mental health	
		of the minor's personal effects and bring a proceeding cessary to protect other property of the minor	g for a
	-	minor that have been received by the guardian for the port, care, education, health, safety, and welfare (as leaves)	
	a conservatoris appoin	of the minor not expended for the minor's future need need for the minor, pay the funds as directed by the conserved for the minor's future needs	
	minor in the guardian by court rule or order	of the minor and account for funds and other property 's possession or subject to the guardian's control, as red by the court on application of a person interested report due:	required
	determining what is in	ny change in the minor's dwelling or address; and (go the minor's best interest, take into account the minor ent actually known or reasonably ascertainable by the	or's

INITIAL EACH IF MARKED:	
I am empowered with the powers enu	merated in Section 209, with the following
exception(s):	
minor's parent, guardian, or custodian insurance or any private contract, dev (A mark in this box means that the G by the minor from any source to the C spend said funds without further Court	bayable for the support of the minor to the n under a statutory system of benefits or rise, trust, conservatorship, or custodianship. uardian must immediately report any income Court and may not dispose, disburse, or rt Order.)
[] Other exception:	
I am bound to the People of the State of Miss this office.	sissippi to faithfully discharge the duties of
	GUARDIAN
Prepared by:	
Name:	
Address:State	<u></u>
City: State Phone: Zip:	
Email address:	
Eman address.	
ATTESTAT	ΓΙΟΝ
CTATE OF MICCICCIPAL	
STATE OF MISSISSIPPI COUNTY OF	
Personally appeared before me, the undersign jurisdiction,, who having be oath that the matters and things stated in the above for therein stated.	ned authority, in and for the aforesaid en by me first duly sworn stated on his/her oregoing instrument are true and correct as
	(Type/Print Name Here)
	,
SWORN TO AND SUBSCRIBED before m	e this theday of, 20
M.C F	NOTARY PUBLIC
My Commission Expires:	