

STATE OF WISCONSIN, CIRCUIT COURT, MANITOWOC COUNTY

For Official Use

Amended

IN THE MATTER OF

**PETITION FOR GUARDIAN
COMPENSATION**

Case No. _____

1. I am the guardian of the person estate of the above named ward.
2. I am petitioning the Court for approval of guardian fees (compensation) for the period of _____ through _____ in the amount of \$ _____ as described in the attached statement which states the hourly or other rate proposed.
3. I further request reimbursement of expenses in the amount of \$ _____ as described in the attached statement.
4. The services I provided were necessary and could not be performed by another.
5. I believe that all services performed were for the benefit of and in the best interest of the ward.
6. The ward monthly income, including source, is as follows:

7. The ward has assets with a value of approximately : _____

8. The ward's basic needs are being met and there are funds from the ward's income or assets available to pay these fees or,

funds are not available from the ward's income or assets to pay this requested fee in full and payment will be made as follows:

a. Ward receives medical assistance and the patient liability may be adjusted to allow payment from income, or

b. Ward receives other benefits which may be used for payment, or

c. Other: _____

Dated _____

Guardian