

CAUSE NO. \_\_\_\_\_

IN THE GUARDIANSHIP OF \_\_\_\_\_ § IN THE COUNTY COURT  
§  
§ AT LAW NO. \_\_\_\_\_ OF  
§  
AN INCAPACITATED PERSON § BRAZOS COUNTY, TEXAS

**AFFIDAVIT OF NOTICE PURSUANT TO SECTION 1051.104 OF THE TEXAS  
ESTATES CODE**

TO THE HONORABLE JUDGE OF SAID COURT:

I, \_\_\_\_\_, attorney for \_\_\_\_\_,  
Applicant in the above-entitled Cause, do hereby certify that:

Notice was given to the following persons interested in the welfare of the proposed ward in full compliance with Sections 1051.101 – 1051.106 of the Texas Estates Code at the following address as follows:

- 1.) Name of person:  
Relationship to proposed ward:  
Address of Service:  
*Served by:*  
*Date of Service:*
- 2.) Name of person:  
Relationship to proposed ward:  
Address of Service:  
*Served by:*  
*Date of Service:*

Notice was sent to the following persons interested in the welfare of the proposed ward in full compliance with Sections 1051.101 – 1051.106 of the Texas Estates Code at the following address as follows:

- 1.) Name of person:  
Relationship to proposed ward:  
Address of Service:  
*Qualified Delivery Method:*  
*Date of Notice:*
- 2.) Name of person:  
Relationship to proposed ward:  
Address of Service:  
*Qualified Delivery Method:*  
*Date of Notice:*

Under the provisions of Section 1051.105 of the Texas Estates Code, the following persons interested in the welfare of the proposed ward signed and filed a waiver meeting the requirements of Section 1051.105 of the Texas Estates Code and therefore were not served with notice:

- 1.) Name of person:  
Relationship to proposed ward:  
Address:  
*Date waiver signed:*  
*Date waiver filed:*

Copies of the notice and proof of delivery of the notice, as returned, to the above-listed individuals are attached hereto as Exhibit A and incorporated by reference herein for all purposes.

Respectfully submitted:

By: \_\_\_\_\_  
Name of attorney:  
State Bar No.:  
Email:  
Address:  
Phone number:  
Attorney for:

**AFFIDAVIT**

STATE OF TEXAS           §  
  §  
COUNTY OF BRAZOS       §

BEFORE ME, the undersigned authority on this day personally appeared \_\_\_\_\_, known to me to be the attorney for \_\_\_\_\_ and after being duly sworn by me, stated that all statements and facts described therein are true, correct and complete in every respect.

SIGNED on \_\_\_\_\_.

\_\_\_\_\_  
Signature of attorney  
Attorney for:

SUBSCRIBED AND SWORN TO BEFORE ME by \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, to certify which witness my hand and seal of office.

\_\_\_\_\_  
Signature of Notary Public