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