

FORM LETTER TO CLERK OF COURT

_____ (Name of Guardian Advocate)

_____ (Address)

_____ (City, State, and Zip Code)

_____ (Phone Number)

Date _____, 20__

HAND DELIVERED

Brevard Clerk of the Circuit Court, Probate Division
2825 Judge Fran Jamieson Way
Viera, Florida 32940

Re: The Guardian Advocacy of _____ (name of person with a disability)

Dear Sir or Madam:

Enclosed please find the following documents to be filed:

- () Original of Application for Appointment as Guardian Advocate of the Person (**Form A**)
- () Original and 1 copy of Petition for Appointment as Guardian Advocate of the Person and Appointment of Standby Guardian Advocate (**Form C**).
- () Original and 1 copy Standby Guardian Advocate Joinder in Petition (**Form C-1**)
- () Original and 1 copy of Order Appointing Attorney and Elisor for the Person with a Developmental Disability (**Form D**)
- () Original Oath of Guardian Advocate, Designation of Resident Agent & Acceptance (**Form E**)
- () Original Notice of Confidentiality Information Within Court Filing (**Form F**)
- () Filing Fees *or* the original Application for determination of civil indigent status (**Form G**)

I have also enclosed a self-addressed envelope with sufficient postage for the documents to be returned to my address.

I shall immediately complete my level 2 criminal screening requirements and credit history investigation.

Thank you for the attention you shall give this matter. Please call me at the above phone number if you have any questions or concerns.

Sincerely,

Signature of Proposed Guardian Advocate

Enclosures