STATE OF NORTH DAKOTA

IN DISTRICT COURT

COUNTY OF \_\_\_\_\_

JUDICIAL DISTRICT

### IN THE MATTER OF THE GUARDIANSHIP/CONSERVATORSHIP OF

### AN INCAPACITATED INDIVIDUAL/PROTECTED PERSON

Case No: \_\_\_\_\_

# BRIEF IN SUPPORT OF MOTION FOR FINAL ORDER TO ACCEPT TRANSFER OF

1. As required by Rule 3.2 of the North Dakota Rules of Court, the **Q**uardian/

co-guardians Conservator/co-conservators, submits this Brief in Support of Motion

Confirming Transfer and Terminating □Guardianship/□Conservatorship.

### FACTS

2. The facts are stated in the Affidavit in Support of Motion for Final Order to Accept

Transfer of Guardianship/Conservatorship from Another State, which is filed with this Brief

and incorporated by reference.

## LAW AND ARGUMENT

3. Section 28-35-16 of the North Dakota Century Code (N.D.C.C.) requires the District Court to issue a final order accepting transfer of jurisdiction of the guardianship/conservatorship when the District Court receives a final order from the court of the other state transferring jurisdiction of the guardianship/conservatorship to North Dakota.

4. The \_\_\_\_\_\_\_ (*State*) state court entered a final order transferring jurisdiction of the □guardianship/□conservatorship to North Dakota under provisions similar to Section 28-35-15 of the North Dakota Century Code (N.D.C.C.).

5. A certified copy of the other state's final order is attached.

6. The guardian/co-guardians conservator/co-conservators respectfully request that the Court enter a final order accepting jurisdiction of the guardianship/conservatorship, which recognizes the guardianship/conservatorship order from the other state, including the determination of the incapacitated or protected person's incapacity and the appointment of the guardian/co-guardians conservator/co-conservators.

Dated \_\_\_\_\_, 20\_\_\_\_\_.

Signature of Guardian/Conservator

Printed Name

Address

City, State, Zip Code Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

(If there is a Co-Guardian/Co-Conservator, the Co-Guardian/Co-Conservator dates, signs and completes. Otherwise, write "No Co-Guardian/Co-Conservator" on the signature line.)

Dated \_\_\_\_\_\_, 20\_\_\_\_\_.

Co-Guardian/Co-Conservator Signature

Co-Guardian/Conservator Printed Name

Address

City, State, Zip Code Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_