

STATE OF SOUTH DAKOTA

IN CIRCUIT COURT

COUNTY OF _____

_____ JUDICIAL CIRCUIT

<hr/> Plaintiff	FILE NO: _____ Petition to Terminate Guardianship on Death of Protected Person
<hr/> Defendant	

I, _____, Guardian for the above-named Protected Person, being duly sworn upon oath, state and affirm the following:

I was appointing guardian of the above-named Protected Person on _____ (month), _____ (day), _____ (year).

This guardianship has since terminated when the Protected Person died at _____ (time), on the _____ day of _____, 20____, pursuant to SDCL 29A-5-507.

Attached to this Petition is a certified Copy of the Death Certificate as proof of death, pursuant to SDCL 29A-1-107(2).

If not waived by the Court, a Guardian’s Final Report is attached per SDCL 29A-5-403(4).

I request the Court enter an Order Terminating the Guardianship and Order Approving the Guardian’s Final Report, and that Letters of Guardianship be revoked (and any bond released).

Dated this _____ day of _____, 20_____.

Guardian’s Signature
(Sign only in front of a Notary or Clerk)

Mailing Address

City, State, and Zip Code

Phone Number

E-mail Address

Signed and sworn to before me this _____ day of _____, 20_____.

(SEAL)

Notary Public/Clerk of Court

If Notary, my commission expires:
