

SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
PROBATE DIVISION

INT
IDD

In re:

An Adult

ACCEPTANCE

I hereby accept the duties of the office of

- Guardian
- Limited healthcare guardian
- Conservator

of _____ (ward) and consent to personal jurisdiction in any action instituted in the District of Columbia by any interested person against me as guardian, limited healthcare guardian, and/or conservator arising from the duties of my office and, if I am or become a non-resident, I do hereby irrevocably appoint the Register of Wills and successors in office as the person upon whom all notice and process issued by a competent court in the District of Columbia may be served with the same effect as personal service in relation to all suits or matters pertaining to the proceeding in which Letters of guardianship and/or conservatorship shall issue.

Signature of filer

Typed name of filer

Address (actual address/not Post Office Box)

Telephone number

Email address

Unified Bar number (if filer is an attorney)