

In the Matter of the Guardianship
and/or Protective Placement of:

Petition for Payment of Fees

Case No.

I petition the Court for payment for services as guardian ad litem. court appointed attorney.

A true and correct **statement of services rendered is attached.** The subject:

- has a guardian of estate. *
- has an agent under a durable power of attorney for finances. *
- is a nursing home resident, has monthly income other than Supplemental Security Income in sum of \$ _____ that is above the Federal Poverty Income Guideline's monthly amount, receives Medical Assistance or Family Care and does not have a community spouse receiving less monthly income than the income allowance that may be allocated to the community spouse for monthly maintenance. **A Fact Sheet is attached.** **
- has other sources for private pay:
- has no funds available to pay requested fees. I request approval and payment of fees in the amount of \$ _____
- from ward's income or assets by guardian of estate agent under durable power of attorney for finances.
- from ward's income by nursing home.
- from other source of private pay specified above.
- by Milwaukee County in that no private pay funds are available to pay requested fees.

Signature

Name Printed or Typed

Date