

**IN THE CIRCUIT COURT OF THE TWELFTH JUDICIAL CIRCUIT
WILL COUNTY, ILLINOIS - IN PROBATE**

IN RE THE ESTATE OF

Name of disabled adult

CASE NO: _____

A Disabled Adult

OATH AND BOND OF GUARDIAN OF DISABLED ADULT - NO SURETY

I, _____, on oath state that I will faithfully discharge the duties of the
Name of guardian
office of guardian, and I acknowledge that I am bound to the People of the State of Illinois to the faithful discharge
of those duties in an amount equal to double the value from time to time of the personal estate.

APPROVED:

Dated: _____, 20____

Address of Guardian: _____

Judge: _____

(Signature of Guardian)

Signed and sworn to before me

_____, 20____

(Notary Public)

Person/Attorney Who Prepared Form:

Name _____

Address _____

City and Zip _____

Telephone _____

A.R.D.C. # _____

ANDREA LYNN CHASTEEN, CLERK OF THE CIRCUIT COURT OF WILL COUNTY