MARYLAN	CIRCUIT COURT FO	R	, I	MARYLAND	
İ	T . 1 .	City/0	City/County		
DICIAR	Located at	Court Address	Case No		
In the M	latter of		Telephone		
			Docket Reference		
to Maryl the trans	Use this form to ask a Maryl land. The guardianship will r fer. The court may hold a he orida, Kansas, Michigan, or T	ot be transferred until the aring. Contact a lawyer if	ansfer of a guardianship from Maryland court issues an o	rder accepting	
I,	Name	, whose address is	Address		
whose te	elephone number isT	, and	whose email address (if any) is	
		ask the court	to transfer the guardianship	of the	
	E-mail				
	on \Box property \Box person and				
birthdate	e is Date of Birth	, whose gender is	Gender	, from the	
state of	State	to Maryland.			
I state th					
	I was appointed guardian of	the \Box person \Box property	\Box person and property by:		
	Name of court:				
	Date of appointment:				
	Case number:				
2.	I am requesting transfer beca	use:			
3.	Attached is a copy of the pro		guardianship by		
	Name of co		•		
	HESE REASONS, I ask the				
1.	Transfer the guardianship of				
	Name of disabled pers	from the state of	State	to Maryland	
2.	Grant any other and further r		2		
	ly affirm under the penalties vledge, information, and beli		ts of this document are true	to the best of	
	Date		Signature		
	Address		Printed Name		
	City, State, Zip		Telephone Numb	er	
	E-mail		Fax		