completed and filed with the court in English. 表格样本,仅供参考. 为了提供便利,表格采用双语格式,但 向法 院提交的表格必须用英语填写。 A STATE . 马里兰州 巡回法院 孤儿法院 DICIARY City/County 市/郡 Case No. _____ 地址 _____ Court Address 法院地址 Telephone 电话 In the Matter of Name of Disabled Person Docket Reference 残疾人十姓名 REQUEST TO REGISTER GUARDIANSHIP ORDER 监护人身份命令登记请求 (Md. Code, Estates & Trusts Art., §§ 13.5-401 & 13.5-402) (《马里兰州法典》遗产及信托条款第 13.5-401 和 13.5-402 条) **NOTE:** Use this form to ask a Maryland court to register another state's order appointing you as guardian of the person or property of an adult. Registration allows you to perform in Maryland an act authorized in that out-ofstate order. Contact a lawyer if your out-of-state order is from Florida, Kansas, Michigan, or Texas. 注:使用此表请求马里兰州法院登记其他州任命您为成年人的人身监护人或财产监护人的命令。登记可以 授权您在马里兰州执行州外命令授权的行为。如果您的州外命令由佛罗里达州、堪萨斯州、密歇根州或德 克萨斯州下达,请联系律师。 _____, whose address is ______ whose telephone number is _______, and whose email address (if any) is _______, , request registration as a foreign judgment the order E-mail appointing me as guardian of the person property person and property of Name of adult under guardianship _____,地址位于_____ 地址 ,以及电子邮件地址(若有)为 ,请求将以下命令登记为州外判决: 任命本人为以下人员的 人身 财产 人身及财产监护人: 受监护成年人姓名 I was appointed guardian by: 本人的监护人任命由以下法院作出: Name of court: City, State: 法院名称: 市、州:

Sample for Reference Purposes Only. Forms have bilingual format for your convenience, but must be

	Date of Appointment:	<u> </u>
	任命日期:	
	Case number:	<u> </u>
	案件编号:	
2.	Attached is a certified copy of the order appointing me as g 附件是任命本人为监护人的命令及任何公函的核证副本	
3.	I notified the court that appointed me as a guardian of my intent to register its order in Maryland. 本人已通知任命本人为监护人的法院本人在马里兰州登记其命令的意向。	
	Attached is a copy of the notice of intent to register. 附件是登记意向通知的副本。	
	Date 日期	Signature 签名
	Address 地址	Printed Name 楷签
	City, State, Zip 城市、州、邮政编码	Telephone Number 电话号码
	28 1 32 113 1 10 2 8 2 10 3 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	E-mail 电子邮箱	Fax 传真