IN THE SUPERIOR COURT OF THE STATE OF ARIZONA
IN AND FOR THE COUNTY OF PIMA
JUVENILE DIVISION

In the Matter of: Minors.	No. J- AFFIDAVIT IN REGARDS TO APPOINTMENT OF A SUCCESSOR GUARDIAN OR CO-GUARDIAN

My/Our full name(s) is/are: _____.

My/Our address is _____.

My/Our relationship to the above-named child(ren) is_____.

I/We agree to assume the duties and responsibilities of Permanent Guardian for the above-named child(ren), and to act in compliance with all orders of this court.

Dated this _____ day of _____, 20_____.

I/We believe the above information to be true.

_____ _____
Printed Name *Signature*

Signed before me on _____, 20___ at _____ ___.m.
(DATE) (TIME)

My commission expires:

_____ Notary Public: _____

Street Address: _____

City, State, ZIP: _____