

GUARDIANSHIP INFORMATION

Matter Name..... Practice guardianship
 County..... WHATEVER
 Case Number..... 24680

Minor or Incompetent:

Social Security Number..... 234-56-7890
 Full Name..... I full name
 Street Address..... 1234 I Street
 City..... Cincinnati
 County..... Hamilton
 State..... Ohio
 Zip Code..... 45678
 Telephone Area Code..... 513
 Telephone Number (w/o area code).... 123-4567
 Age..... 53
 Date of Birth..... 01/01/1950

Guardian:

Full Name..... G full name
 First Name..... G first name
 Middle Name..... G middle name
 Last Name..... G last name
 Address..... 1234 G Street
 City, State, Zip Code..... Dayton, Ohio 54321
 Telephone Area Code..... 749
 Telephone Number (w/o area code).... 987-9876
 Social Security Number..... 345-34-5678
 Date of Birth..... 02/02/1953
 Age..... 50
 Driver's License Number (Mont. Cty)... 98787654

Attorney:

Attorney Full Name..... John S. Jones
 Street Address..... 1234 A Street
 City, State, Zip Code..... Xenia, Ohio 56765
 Telephone area code..... 513
 Telephone Number (w/o area code).... 456-0987
 Attorney Registration Number..... A reg #1234

Supplemental attorney signature lines (certain counties):

First Line..... Jones & Smith, LPA
 Second Line.....
 Third Line..... _____
 Fourth Line..... John S. Jones
 Fifth Line..... 1234 A Street
 Sixth Line..... Xenia, Ohio 56765
 Seventh Line..... A reg #1234
 Eighth Line.....

Different Judge Name.....

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