Full Name of Party Filing this Document

Mailing Address (Street or Post Office Box)

City, State, and Zip Code

Telephone Number

Email Address (if any)

IN THE DISTRICT COURT OF THE JUDICIAL DISTRICT

OF THE STATE OF IDAHO, IN AND FOR THE COUNTY OF

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| --- | --- |
| In the Matter of  ,  DOB:  a Minor. | Case No.:    ORDER APPOINTING  TEMPORARY GUARDIAN |

Having reviewed the Petition for Appointment of Guardian of a Minor, the Court finds that all requirements under the Idaho Uniform Probate Code for the appointment of a temporary guardian have been met.

IT IS ORDERED THAT:

1. is appointed temporary guardian for the minor.

2. Upon acceptance, Letters of Temporary Guardianship shall be issued to the temporary guardian.

3. The appointment of the temporary guardian will terminate upon the Court’s appointment of a guardian, or six months from the date of appointment, whichever occurs first.

DATE:

MAGISTRATE JUDGE

CLERK’S CERTIFICATE OF SERVICE

I certify that I served a copy of this Order to: (name all parties in the case other than yourself)

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| (Name)    (Street or Post Office Address)    (City, State, and Zip Code) | * By United States mail * By personal delivery * By fax to: (number) * By email to: |
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| (Name)    (Street or Post Office Address)    (City, State, and Zip Code) | * By United States mail * By personal delivery * By fax to: (number) * By email to: |
| Date: | Deputy Clerk |