SUPREME COURT OF THE STATE OF NEW YORK	
COUNTY OF [Name of County]	
X	
In the Matter of the Application of:	
	NOTICE OF SETTLEMENT
	NOTICE OF SETTLEMENT
[Your Name]	
Petitioner	Index No:
For the Appointment of a Guardian of the	
Person and/or Property of	
0	
[Name of Alleged Incapacitated Person (AIP)]	
Person in Need of a Guardian/Incapacitated Person	
A .	
Respondent	
X	
DI EAGE TAXENS	
PLEASE TAKE NOTICE that the Order and Judgme	ent Appointing Guardian of which the with
is a true copy will be presented for settlement to the	
HOM	
HON, one of the Judge of th	e within named Court as the
[Name of Juage]	
Supreme Courthouse located at	~.~
Supreme Courthouse, located at	, IAS
	•91
Part, on the	
Part, on the [Part of Court] [Date of Hearing]	
Dated:	
_	
From:	
[Your Name]	