
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 _____

In the Matter of
_____,

DOB: _____
a Minor.

Case No.: _____

LETTERS OF GUARDIANSHIP

1. _____ was duly appointed and qualified as guardian of the minor on the _____ day of _____, 20 _____.

2. These letters are issued to evidence the appointment and authority of the guardian. The guardianship is a general guardianship.

3. The guardian was appointed by will. **or**
 The guardian was appointed by court order.

DATE: _____

MAGISTRATE JUDGE