

STATE OF SOUTH CAROLINA
COUNTY OF

IN THE PROBATE COURT
CASE NUMBER: _____ - GC - ___ - _____

IN THE MATTER OF:

_____,
an alleged incapacitated individual

_____,
vs. Petitioner(s)

_____,
Respondent(s)

**MOTION AND ORDER
WAIVING THE APPEARANCE
OF THE GUARDIAN AD LITEM**

I, _____, as Guardian ad litem for the Alleged Incapacitated Individual in the above referenced matter, move the Court to waive my presence in all remaining court proceedings in this case. I have filed and served all required reports regarding my investigation and recommendations. By the signatures below, all parties and/or their attorneys agree that my Motion should be granted.

Further, it is my opinion waiving my appearance serves the best interests of _____,
the All because:

- I am unable to attend and participate in court proceedings; and/or
- My attendance and participation in court proceedings is not necessary because all the Parties are in agreement with my recommendations; and/or
- Waiver of my appearance is appropriate to conserve the All's assets.
- Other: _____

_____.

Attached is my affidavit of total fees and costs incurred to date.

These fees/costs have been paid in full by _____.

These fees have been partially paid in the amount of _____ by _____ .

These fees/costs have not been paid.

After considering the Motion above, I grant the relief requested by the Guardian ad Litem. Payment of any remaining Guardian ad Litem fees/costs will be addressed by the Court in a separate Order.

Date: _____
Greenville, SC

Presiding Judge

I so Move:

Guardian ad Litem
Date: _____

WE CONSENT:

_____, 20__

_____, 20__

_____, 20__

_____, 20__

_____, 20__
