

IN THE COURT OF CHANCERY OF THE STATE OF DELAWARE

Register in Chancery
Kent County
38 The Green, Ste. 208
Dover, DE 19901
302-735-1930

Register in Chancery
New Castle County
500 N. King Street, Ste. 11600
Wilmington, DE 19801
302-255-0544

Register in Chancery
Sussex County
34 The Circle
Georgetown, DE 19947
302-856-5775

Procedures for filing a Petition to Reinvest for a Person with a Disability

- The petition to reinvest requires the following:
 - A completed petition. The court clerk cannot complete the petition for you. The guardian's(s') signature must be notarized. If you appear in the Register's Office with identification and the correct paperwork, your signature(s) can be notarized by a court clerk in the Register's Office.
 - A copy of the guardianship bank statement(s) dated within the thirty days prior to filing the petition.
 - The filing fee for the petition is \$35.00. We accept cash, check or money order (made payable to "Register in Chancery").
- It is the petitioner's responsibility to provide the Court with photocopies of all supporting documentation. If the Register in Chancery's office makes photocopies for you, we will charge a \$1.50 per page fee. When submitting your supporting documentation, it must be filed on regular 11 x 8.5 paper that can be easily scanned onto the computer.
- You may mail the completed petition to the Register in Chancery in the county where your guardianship case was established and the completed order will be mailed back to you.
- As part of the order, the guardian(s) will be responsible for filing a proof of compliance within thirty (30) days. There will be a \$2.00 per page fee to pay for the proof of compliance to be scanned.

IN THE COURT OF CHANCERY OF THE STATE OF DELAWARE

In the Matter of: _____ :
: C.M. #: _____
A person with a disability :

PETITION TO REINVEST

1. Name of guardian(s): _____

2. Date guardian(s) was/were appointed: _____

3. Information about the current bank account:

a. The guardians opened a guardianship _____ [type of account, i.e. checking, savings] account at _____ Bank.

b. The guardianship order permits monthly expenditures up to \$ _____ [monthly allotment amount per court order] out of the guardianship account(s).

4. I/We request the Court to authorize

a. The transfer of \$ _____ [how much money will be transferred]

b. From the guardianship _____ [type of account, i.e. checking, savings] account at _____ Bank with the account number ending in _____ [last four numbers of the account the money will be transferred from]

c. To a guardianship _____ [type of account money will be moved into, i.e. checking, savings] account at _____ Bank [name of the bank where the money will be moved to].

5. I/We understand proof of the reinvestment will need to be filed with the Register in Chancery's Office within thirty days of the date of the court order.

Guardian's signature

Co-Guardian's signature

Complete address

Complete address

Complete address

Complete address

Phone Number

Phone Number

STATE OF _____ :

COUNTY OF _____ :

This instrument was acknowledged before me on this _____ day of _____, 20____ by _____ [Name of affiant].

Notary Public/Chancery Court Clerk

IN THE COURT OF CHANCERY OF THE STATE OF DELAWARE

IN THE MATTER OF: _____ :
 :
 : C.M. # _____
A person with a disability _____ :

ORDER TO REINVEST

WHEREAS, the petition to reinvest having been presented and duly considered by this Court;

IT IS HEREBY ORDERED, this _____ day of _____, 20____, as follows:

1. _____, guardian(s) of the person with a disability, is/are hereby authorized to withdraw and transfer \$_____ from the guardianship _____ account at _____, account number ending in _____.

2. The guardian(s) shall
a. Transfer the money to the existing guardianship account at _____ Bank, account number ending in _____

OR

b. The guardian(s) shall open a guardianship account at _____ and deposit the money into a checking and/or savings account. The account(s) shall be titled, "COURT OF CHANCERY Guardianship Account

for _____, _____,
Guardian(s). WITHDRAWALS ONLY BY ORDER OF THE
COURT.”

3. The guardian(s) may continue to withdraw up to \$_____ total per month without further notice of the Court. Otherwise, the guardians may NOT make ANY withdraws from the account WITHOUT first having a Court Order to do so.

4. The guardian(s) shall provide proof of such transfer and redeposit to this Court within thirty days from the date of this order.

5. The guardian(s) shall present a certified copy of this order to _____ Bank and _____ Bank.

Chancellor/Vice Chancellor/Master