

STATE OF MAINE

_____ COUNTY PROBATE COURT DOCKET NO. _____

In Re: _____
Respondent/Individual Subject
to Guardianship/Individual Subject
to Conservatorship

NOTICE OF HEARING

This notice is directed to:

You are receiving this notice because _____
(name of filing party)

(known as the “Petitioner”) has filed a Petition or other request in the
_____ County Probate Court asking the Court to do the
following:

A copy of the Petition or request is attached to this Notice.

There is a hearing scheduled to take place with respect to this matter in
the Court located at _____ on
_____ at _____ AM/PM where the Court will consider
whether or not to grant the Petition or other request.

You have the right to attend the hearing and to speak at the hearing. You may also file written objections to or comments on the Petition or request with the Court but the filing of a written response is not a substitute for appearing at the hearing. If you file a written response, you must send a copy to the Petitioner's attorney whose name, address, and telephone number are _____

or if there is no attorney identified above, to the Petitioner, whose name, address, and telephone number are _____

**IF YOU ARE THE RESPONDENT/ INDIVIDUAL SUBJECT TO
GUARDIANSHIP/INDIVIDUAL SUBJECT TO
CONSERVATORSHIP NAMED ABOVE:**

In addition to the rights describe above on this page, you have the right to ask that the Court appoint an attorney to represent you and your interests with respect to the Petition or request. You may be assisted in the hearing by other people you choose, by assistive technology, and/or by an interpreter or translator. If such assistance would be helpful but is not otherwise available to you, you may request that the Court provide you with this assistance.

Date: _____, 20__.

Register of Probate

STATE OF MAINE

_____ COUNTY

On the _____ day of _____, 20____, I made service of the following documents, particularly described as _____

_____ ,

by delivering a copy to _____

(State method and place of delivery and name of person served.)

Service:

Travel, _____ miles one way	\$ _____
Postage	\$ _____
Total	\$ _____

Visitor/Sheriff/Deputy