

JR-305

Rev. Abr. 25

AFFIDAVIT FOR APPOINTMENT AS GUARDIAN

Pensioner  Beneficiary

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of legal age,  married  single

(Full name)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and resident of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, do solemnly swear that:

(occupation) (City and State)

1. My name and other personal circumstances are those stated above;
2. I have filed an Application for Appointment as Guardian with the Retirement Board of the Government of Puerto Rico, related to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

(Full name of person subject to guardianship)

1. I meet all the requirements to serve as guardian. Specifically, I meet the following requirements:
   1. I am (check the applicable option)

a natural person who fully enjoys civil rights and is not disqualified under the grounds for disqualification prescribed by law or regulations;

a nonprofit legal person whose purposes, as per its Charter, include the protection of the ward;

* 1. I have not been convicted of a felony or a misdemeanor in Puerto Rico or outside of Puerto Rico;
  2. Currently, I am not bankrupt nor have filed for bankruptcy or being declared bankrupt; or despite having filed for bankruptcy or been declared bankrupt, I have recovered from bankruptcy;
  3. I have not been denied guardianship or removed as a guardian by an administrative agency or the court;
  4. I have no conflict of interests with the person subject to guardianship, and have not filed or had filed a claim or cause of action on the ward’s marital status or the ownership of the ward’s property;
  5. I do not owe a considerable sum of money to the ward;
  6. I have not had my parental rights or custody terminated or suspended by a Court order.
  7. I have never filed a frivolous or unfounded complaint, civil or criminal, against the ward, his ascendants or collaterals up to the fourth degree;
  8. I am not a person of bad conduct or who has no visible means of support;
  9. I have not been expressly excluded from serving as guardian by the parents of the ward in a will or a public instrument;
  10. I am able to file periodic reports with the Retirement Board of the Government of Puerto Rico on the transactions conducted on behalf or in the name of the ward.

1. I hereby swear to and sign this Affidavit, under penalty of perjury, without intent to defraud, but rather for the pertinent authorities to take cognizance of the aforementioned facts and for any other administrative, judicial, and/or legal purpose.
2. I affirm that, to the best of my knowledge, the foregoing information is true and correct.

In witness whereof, I sign this affidavit under oath, this \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Affiant’s signature

Sworn to and subscribed before me by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, whose personal circumstances

(Full name of affiant)

are described above, whom I have identified by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

(form of identification used)

In \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_, this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,\_\_\_\_\_\_.

(Municipality/City) (State or Country) (day) (month) (year)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOTARY PUBLIC

[NOTARY SEAL]