|  |  |  |
| --- | --- | --- |
| STATE OF SOUTH CAROLINA | ) |  |
|  | ) |  |
| COUNTY OF HORRY | ) |  |
|  | ) |  |
| IN THE MATTER OF:  | ) |  |
|      ,  | ) |  |
| an alleged incapacitated individual. | ) | PROBATE COURT USE ONLY |
|  | )) | IN THE PROBATE COURT |
|      ,  | ) | CASE NUMBER      -GC-     -      |
| Petitioner(s), | ) |  |
| vs. | ) | **NOTICE OF APPEARANCE** |
|      , | ) |  |
| Respondent(s). | ) |  |

PLEASE TAKE NOTICE, that      , hereby appears on behalf of       and further states that he/she is licensed to practice law in South Carolina and is a member in good standing with the South Carolina Bar. You must serve all pleadings, correspondence, notices and related matters on the undersigned as attorney for the alleged incapacitated individual.

|  |
| --- |
| Executed this       day of      , 20     . |
|  |

|  |  |
| --- | --- |
| Signature: |  |
| Print Name: |       |
| Firm Name:  |       |
| Bar Number: |       |
| Address: |       |
|  |       |
| Telephone: |       |
| Email: |       |
| Attorney for: |       |