

## **INSTRUCTIONS FOR NOTICE OF EMPLOYEES**

**This form must be completed by each Guardian and filed with the Probate General Master's Office**

### **IF YOU DO NOT HAVE EMPLOYEES:**

**Please complete Professional Guardian information at the top of the form: name, address, city, state, zip code, telephone, and E-mail address.**

**If you do not have employees please check the box labeled "No Employees"**

**At the bottom of the form: signature of guardian and date**

**Then mail the form to:**

**Probate General Master  
Attention: Pat Patterson  
501 Building  
501 First Avenue North  
Room 639  
St. Petersburg, Florida 33701**

### **IF YOU DO HAVE EMPLOYEES:**

**Please complete Professional Guardian information at the top of the form: name, address, city, state, zip code, telephone, and E-mail address.**

**Skip the box labeled "No Employees"**

**Indicate the date the employee(s) commenced with fiduciary responsibility**

**Provide the following information for each employee:  
Name, date hired and duties performed**

**At the bottom of the form: signature of guardian and date**