



Because Black Wealth Is Critical to Black Power™

Form #3:

Confidential Exclusion of Guardian

Instructions: Complete this document if you specified individuals that you do not want to raise your child(ren) (see *Table B*). You and your child(ren)'s other parent should each complete individual forms, which should be witnessed by two individuals. This form should be stored in a safe place to be accessed only by your chosen guardians, who should be instructed to present the documentation only if the "excluded guardians" petition the courts for custody of your child(ren).

For additional copies of this form, or if you prefer completing forms on a computer, refer to the electronic files included with your Kit. Note that you will be unable to save electronic files without a full version of Adobe Acrobat®. However, you can print hard copies for your use and distribution.

If you have a Will, or if you are planning to execute a Will, make sure that your Will specifies that you have executed a Confidential Exclusion of Guardian in a separate writing and that your Will does not supersede your Confidential Exclusion of Guardian.

Attention residents of Vermont and New Hampshire: You must have three witnesses sign your forms. Please add an additional witness block (witness signature, witness name printed, and witness address, city, state, and ZIP code) and have a third witness witness your signature. **If you are a resident of Louisiana,** you must have your forms notarized. Please sign them in front of a notary and ask the notary to attach a certificate of notarization.



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Confidential Exclusion of Guardian of My Child(ren)

I, _____ [Your name] , declare as follows:

I have executed a Nomination of Guardian for my child(ren), naming the person(s) who would be good and loving guardian(s) for my child(ren) in a separate document.

I wish to specifically exclude from guardianship the following individuals:

[Individual(s) excluded from guardianship]

Based upon my experience, these individuals are not appropriate to serve as guardian for my child(ren) for the following reasons:

[Reason(s) from excluding individual(s) named above]

For these reasons, I declare that none of the above-named individuals shall be permitted to care for my child(ren) in the event of my death or disability. Regardless of whether or how much the above-named individuals might improve and reform their lives, I do not want them to be the guardian for my child(ren).

This document is to be construed in the strongest terms and is to be legally enforced to the full extent of the law.

Because of the sensitive nature of this exclusion, I wish that access to this document be restricted to only those people who must see it to ensure that the person(s) I have nominated as Guardian in a separate writing are able to be appointed as Guardian with as much ease as possible. This document shall not be disclosed for any purpose or reason other than preventing the above-named people from being appointed as Guardians of my minor child(ren).

I declare under penalty of perjury under the laws of the State of _____ [Your state] that the foregoing is true and correct, and that I executed this declaration on _____ [Today's date] in _____ [Your city and state] .



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[Sign here]

[Print your name]

On the date written above, we, the undersigned, each being present at the same time, witnessed the signing of this instrument by _____ [Your name]. At that time, _____ [Your name] appeared to us to be of sound mind and memory and, to the best of our knowledge, was not acting under fraud, duress, menace, or undue influence. Understanding this instrument, which consists of two pages, including the page on which the signature of _____ [Your name] and our signatures appear, to be an exclusion of guardian by _____ [Your name], we subscribe our names as witnesses thereto.

We declare under penalty of perjury under the laws of the State of _____ [Your state] that the foregoing is true and correct, and that I executed this declaration on _____ [Today's date] in _____ [Your city and state].

[Witness #1 sign here]

_____, Witness

[Witness #1 name printed]

[Witness #1 address]

[Witness #1 city, state, ZIP]

[Witness #2 sign here]

_____, Witness

[Witness #2 name printed]

[Witness #2 address]

[Witness #2 city, state, ZIP]



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Confidential Exclusion of Guardian of My Child(ren)

I, _____ [Your name] , declare as follows:

I have executed a Nomination of Guardian for my child(ren), naming the person(s) who would be good and loving guardian(s) for my child(ren) in a separate document.

I wish to specifically exclude from guardianship the following individuals:

[Individual(s) excluded from guardianship]

Based upon my experience, these individuals are not appropriate to serve as guardian for my child(ren) for the following reasons:

[Reason(s) from excluding individual(s) named above]

For these reasons, I declare that none of the above-named individuals shall be permitted to care for my child(ren) in the event of my death or disability. Regardless of whether or how much the above-named individuals might improve and reform their lives, I do not want them to be the guardian for my child(ren).

This document is to be construed in the strongest terms and is to be legally enforced to the full extent of the law.

Because of the sensitive nature of this exclusion, I wish that access to this document be restricted to only those people who must see it to ensure that the person(s) I have nominated as Guardian in a separate writing are able to be appointed as Guardian with as much ease as possible. This document shall not be disclosed for any purpose or reason other than preventing the above-named people from being appointed as Guardians of my minor child(ren).

I declare under penalty of perjury under the laws of the State of _____ [Your state] that the foregoing is true and correct, and that I executed this declaration on _____ [Today's date] in _____ [Your city and state] .



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[Sign here]

[Print your name]

On the date written above, we, the undersigned, each being present at the same time, witnessed the signing of this instrument by _____ [Your name]. At that time, _____ [Your name] appeared to us to be of sound mind and memory and, to the best of our knowledge, was not acting under fraud, duress, menace, or undue influence. Understanding this instrument, which consists of two pages, including the page on which the signature of _____ [Your name] and our signatures appear, to be an exclusion of guardian by _____ [Your name], we subscribe our names as witnesses thereto.

We declare under penalty of perjury under the laws of the State of _____ [Your state] that the foregoing is true and correct, and that I executed this declaration on _____ [Today's date] in _____ [Your city and state].

[Witness #1 sign here]

_____, Witness

[Witness #1 name printed]

[Witness #1 address]

[Witness #1 city, state, ZIP]

[Witness #2 sign here]

_____, Witness

[Witness #2 name printed]

[Witness #2 address]

[Witness #2 city, state, ZIP]



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Confidential Exclusion of Guardian of My Child(ren)

I, _____ [Your name] , declare as follows:

I have executed a Nomination of Guardian for my child(ren), naming the person(s) who would be good and loving guardian(s) for my child(ren) in a separate document.

I wish to specifically exclude from guardianship the following individuals:

[Individual(s) excluded from guardianship]

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This document is to be construed in the strongest terms and is to be legally enforced to the full extent of the law.

Because of the sensitive nature of this exclusion, I wish that access to this document be restricted to only those people who must see it to ensure that the person(s) I have nominated as Guardian in a separate writing are able to be appointed as Guardian with as much ease as possible. This document shall not be disclosed for any purpose or reason other than preventing the above-named people from being appointed as Guardians of my minor child(ren).

I declare under penalty of perjury under the laws of the State of _____ [Your state] that the foregoing is true and correct, and that I executed this declaration on _____ [Today's date] in _____ [Your city and state] .



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[Sign here]

[Print your name]

On the date written above, we, the undersigned, each being present at the same time, witnessed the signing of this instrument by _____ [Your name]. At that time, _____ [Your name] appeared to us to be of sound mind and memory and, to the best of our knowledge, was not acting under fraud, duress, menace, or undue influence. Understanding this instrument, which consists of two pages, including the page on which the signature of _____ [Your name] and our signatures appear, to be an exclusion of guardian by _____ [Your name], we subscribe our names as witnesses thereto.

We declare under penalty of perjury under the laws of the State of _____ [Your state] that the foregoing is true and correct, and that I executed this declaration on _____ [Today's date] in _____ [Your city and state].

[Witness #1 sign here]

_____, Witness

[Witness #1 name printed]

[Witness #1 address]

[Witness #1 city, state, ZIP]

[Witness #2 sign here]

_____, Witness

[Witness #2 name printed]

[Witness #2 address]

[Witness #2 city, state, ZIP]



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