



Mental Health Association

in Orange County, Inc.

NADIA ALLEN, EXECUTIVE DIRECTOR

Dear Family Member:

Thank you for your interest in the Guardianship Program of Mental Health Association in Orange County, Inc. It is my hope that the program be able to provide you with the information and assistance you need relating to the Article 17A Guardianship process.

The assistance you may receive from the program is help with the Article 17A Guardianship Petition which involves the completion of a lengthy packet of forms, follow-up and review of additional documents you will be required to compile and support at the guardianship hearing at the Orange County Surrogate's Court.

There is a \$250 fee for this service which will be payable to Mental Health Association in Orange County, Inc. at or before the initial meeting with the Guardianship Associate. The fee may be paid by cash, personal check, bank check or money order.

If your family member has an autism spectrum disorder and is living at home with you, you can apply to the Autism Spectrum Fund for reimbursement of up to \$150 if you have not already used the fund this year.

If you require further information about the guardianship program or the process itself, please leave me a message at (845) 342-2400 ext.1260.

Sincerely,

Anne Klingner
Guardianship Associate

73 James P. Kelly Way * Middletown, NEW YORK 10940 * (845) 342-2400 FAX (845) 343-9665

www.mhaorangenyc.com *e-mail: mha@mhaorangenyc.com

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