



Advocates & Guardians for the Elderly & Disabled, Inc.
1607 Cherrywood Lane, Longwood, FL 32750
Phone: 407-682-4111 Fax: 407-682-5511
www.trustedaged.org paymybills@trustedaged.org

Application Instructions for the AGED Guardianship Benevolent Fund

The AGED Guardianship Benevolent Fund is a program developed to help Guardians and Attorneys receive payment for services provided to indigent guardianship clients who do not have the funds to pay for services. Funds may be used to support Public Guardianship at AGED's discretion. ***Funding is county specific, and availability of funds varies by county.*** To obtain payment for services rendered to indigent clients, follow the steps below:

1. Submit an AGED Guardian Benevolent Fund Application form with the Guardian's signature. This one time application gives AGED basic information about each ward.
2. Submit an AGED Guardian Benevolent Disbursement form, with the billing and/or invoice for the Guardian's fees and / or the Attorney's fees. No court orders are required. Fees may be submitted on a monthly or quarterly basis. *Note: Guardian must submit Attorney's fees for Attorney to be paid for services by AGED. We recommend you consult with your attorney for advice on reporting these payments to the court.*

Guardians: The **maximum** compensation for Guardian fees is **10 hours per month**, at a **maximum rate of \$50 per hour**. **Copy of detailed billing required.**

Attorneys: The **maximum** compensation for Attorney's fees is **12 hours per year**, at a **maximum rate of \$100 per hour**. **Copy of detailed billing required.**

Important Note: Funding is county specific, and varies by county. Funding may fluctuate, and AGED cannot always predict when funds will be available. Payment is available on a first-come-first serve basis; therefore we encourage monthly requests for payment. Should funds be depleted when a disbursement request is made, the request and invoices will be placed on file until funds are available. The method for determining payments is at the sole discretion of AGED. **Initial request for payment may include charges up to three months prior to application date.**

3. Provide a completed W-9 for the Guardian to receive payment. Provide a completed W-9 for the attorney to receive payment.
4. Application and Disbursement forms can be emailed to: paymybills@trustedaged.org; faxed to: 407-682-5511; or mailed to: AGED 1607 Cherrywood Lane, Longwood, FL 32750.
5. Payment may be denied at any time without cause, and at the sole discretion of AGED.
6. If a guardian is discharged, removed, or the ward passes away, AGED **must be notified in writing immediately.**
7. ***Requests for payment are not considered a lien, debt, or any other form of obligation for AGED to pay for services of a ward to a Guardian or Attorney.*** The program was created out of respect for what Professional Guardians do for their wards and is an attempt to ease the burden of indigent cases.