



IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR THE COUNTY OF CLATSOP



In the Matter of the Guardianship of \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 \_\_\_\_\_ ) Case No. \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 Respondent. \_\_\_\_\_ )  
 \_\_\_\_\_ )

**GUARDIAN'S REPORT**

I am the guardian for the person named above, and I make the following report to the court as required by law:

1. My name is \_\_\_\_\_.

2. My address and telephone number are \_\_\_\_\_

\_\_\_\_\_.

3. The name, if applicable, and the address of the place where the person now resides are:

\_\_\_\_\_

\_\_\_\_\_.

4. The person is currently residing at the following type of facility or residence:

\_\_\_\_\_.

5. The person is currently engaged in the following programs and activities and receiving the following services:

\_\_\_\_\_

\_\_\_\_\_.

6. I was paid for providing the following items of lodging, food or other services to the person:

\_\_\_\_\_

\_\_\_\_\_.

7. The name of the person primarily responsible for the care of the person at the person's place of residence is: \_\_\_\_\_.

8. The name and address of any hospital or other institution where the person is now admitted on a temporary or permanent basis are:

\_\_\_\_\_

\_\_\_\_\_.

9. The person's physical condition is as follows (brief description):

\_\_\_\_\_

\_\_\_\_\_.

10. The person's mental condition is as follows (brief description):

\_\_\_\_\_

\_\_\_\_\_.

11. I made the following contacts with the person during the past year (brief description):

\_\_\_\_\_

\_\_\_\_\_.

12. I made the following major decisions on behalf of the person during the past year:

\_\_\_\_\_

\_\_\_\_\_.

13. I believe the guardianship should or should not continue because:

\_\_\_\_\_.

14. I received the following amount of money on behalf of the person: \$\_\_\_\_\_.

I spent the following amount of money on behalf of the person: \$\_\_\_\_\_.

I now hold the following amount of money on behalf of the person: \$\_\_\_\_\_.

15. A true copy of this report will be given to the person, any conservator for the person, and any other person who has requested notice.

16. Since my last report:

(a) I have been convicted of the following crimes (not including traffic infractions):

\_\_\_\_\_

(b) I have filed for or received protection from creditors under the Federal Bankruptcy Code.  Yes  No

(c) I have had a professional or occupational license revoked or suspended.  Yes  No

(d) I have had my driver license revoked or suspended.  Yes  No

17. Since my last report, I have delegated the following powers over the protected person for the following periods of time (provide name of person and powers):

\_\_\_\_\_  
\_\_\_\_\_.

Dated this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Guardian

SUBSCRIBED AND SWORN to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Notary Public/Court Clerk