IN TH	IE JL	JDICIAL DISTRIC	т	
DISTRICT COURT OF		COUNTY, KANSAS		
In the Matter of the (Guardianship)(Conservatorship) of)))	Case	e No	
Proceeding Pursuant to K.S.A. Cl) napter 59			
		EPORT ON THE DIAN'S WARD	CONDITION	
From	, 20	to	, 20	
Name		Address		
City & Zip Code		Telephone Num	ber	
as guardian in the above-entitled condition of:	estate, submits	the following (ar	nnual) (final) report on the	
Name				

Year of Birth

1. The ward resided at the following places during the reporting period:

(address)

(type of residence)

(length of stay)

(07/01/12)

2. State the approximate number of times the guardian has had contact with the ward, the nature of such contacts, and the date the ward was last seen by the guardian:

- 3. Summarize the medical, social, educational, vocational and other professional services received by the ward during the reporting period:
- 4. If the ward is institutionalized, the results of an investigation into the nature and appropriateness of the ward's care and treatment are as follows:
- 5. What changes in the mental or physical condition of the ward has the guardian observed?

6. What major problems relating to the guardianship, if any, have arisen during the reporting period?

- 7. In the opinion of the guardian, does the guardianship need to continue, and is it necessary to increase or decrease the powers of the guardian?
- 8. State compensation requested and expenses incurred by the guardian:
- 9. What circumstances, if any, have arisen during the reporting period that could constitute a conflict of interest between the guardian and ward?
- 10. Other information required by the court is:

I declare under penalty	of perjury under	the laws of the sta	ate of Kansas	that the
foregoing is true and correct.	Executed on	, 20	0	

Guardian