

STATE OF WYOMING)
)SS
COUNTY OF _____)

IN THE DISTRICT COURT
____ JUDICIAL DISTRICT

IN THE MATTER OF THE)
GUARDIANSHIP OF)
)
_____,)
An Adult,)

Probate No. _____

GUARDIAN'S REPORT

Comes now, _____, the duly appointed Guardian(s) in the above-entitled matter, and hereby states that the following is a true and complete report of this Guardianship during the period shown.

1. The Guardian was appointed by Order of this Court entered on _____, 20____.
2. This Guardian's Report covers the period from _____, 20____ to _____, 20____.
3. This is the Guardian's initial report to the Court;
OR
 The last report in this matter was filed on _____, 20____.
4. The Ward's principal address is _____.

5. The Ward's present mental and physical condition, including level of disability or functional incapacity is:

6. The Ward's treatment and care consists of:

7. The Ward's activities are (include school enrollment if appropriate):

8. Since the last report the Guardian has taken the following actions on behalf of the Ward:

9. The Guardianship should continue because:

DATED this ____ day of _____, 20__.

Guardian's Signature

Guardian's Printed Name

Address

Telephone Number