

**IN THE CIRCUIT COURT OF PHELPS COUNTY, MISSOURI
PROBATE DIVISION**

**In the Estate of:
Estate Number:**

ANNUAL REPORT OF GUARDIAN

1. State present residence address of ward: _____

2. State type and the name, if any, of the home or facility where the ward lives and person in charge of the home: _____

3. State your present residence address and phone number: _____

4. During the last year, how many times have you seen the ward? _____. What was the date when you last saw the ward? _____. State the nature of your visits:

5. Is there a plan for the ward's care, training or treatment? _____. If so, do you agree with its provisions? _____. If not, explain what you disagree with:

6. When was the ward last seen by a physician? _____
What was the purpose of the visit?

7. Have you observed any major changes in the ward's physical or mental condition during the last year? _____. If so, state your observations: _____

8. In your opinion, should this proceeding be continued? _____
If not, why?

9. If you have been appointed full or limited guardian or conservator, should your powers be increased? _____. If so, in what respects?

10. If you have been appointed full or limited guardian or conservator, should your powers be decreased? _____. If so, in what respects and why?

11. What is your opinion of the present care being provided to the ward?

The undersigned swears that the answers set forth above are true and correct to the best knowledge and belief of the undersigned, subject to the penalties of making a false affidavit or declaration.

Dated: _____

Signed:

Guardian

Co Guardian

Reviewed on: _____

Judge