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IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR THE COUNTY OF UMATILLA
DEPARTMENT OF PROBATE

In the Guardianship of: Case No. _____

_____, GUARDIAN'S REPORT

A Protected Person

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: _____

   _____

   _____

   Phone _____
3. The name, if applicable, and 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 (brief description): _____

_____

_____

_____

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 (brief description): _____

_____

_____

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

_____

_____

_____

14. At the time of my last report, I held the following amount of money on behalf of the person: $_____. Since my last report, 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 or no): _____

    (c) I have had a professional or occupational license revoked or suspended (yes or no): _____

    (d) I have had my driver license revoked or suspended (yes or 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 powers delegated to): ___

_____

_____

Dated this ___ day of _____, 20___.

_____
Guardian's Signature

_____
Guardian Printed Name

STATE OF _____)
) ss.
County of _____)

I, _____, being first duly sworn, say that the above statements are true.

_____
Guardian

SUBSCRIBED AND SWORN TO before me this ____day of _____, 20___.

_____
NOTARY PUBLIC FOR OREGON
My commission expires: _____

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

DEPARTMENT OF PROBATE

In the Guardianship of:	Case No. _____
_____,	**ORDER RE: GUARDIAN'S REPORT**
A Protected Person	

After review of the Guardian's Report filed on _____,

the report is:

☐ Accepted and Acknowledged. No further action is required at this time.

☐ Not accepted; a hearing will be set to provide further information.

Dated this ___ day of _____, 20___.

_____
Circuit Court Judge Signature

_____
Printed Name of Judge

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