

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

Probate Department

In the Matter of the Guardianship )  
 )  
 of )  
 )  
 )  
 )  
\_\_\_\_\_, )  
A Protected Person.

No. \_\_\_\_\_  
GUARDIAN'S REPORT

We are the guardians for the person named above, and we make the following  
report to the court as required by law:

1. Our names are \_\_\_\_\_ & \_\_\_\_\_

2. Our addresses and telephone numbers 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  
is receiving the following services (brief description): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

6. We were 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 is None/Describe: \_\_\_\_\_

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

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

11. Facts that support the conclusion that the person is incapacitated include the following: \_\_\_\_\_

12. We made the following contacts with the person during the past year (brief description): \_\_\_\_\_

13. We limited the person's association with \_\_\_\_\_.  
Please specifically name any limitations and briefly describe the limitation: \_\_\_\_\_

14. We made the following major decisions on behalf of the person during the past year: \_\_\_\_\_

15. We believe the guardianship should or should not continue because: \_\_\_\_\_

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16. At the time of my last report, we held the following amount of money on behalf of the person: \$\_\_\_\_\_. Since our last report, we received the following amount of money on behalf of the person: \$\_\_\_\_\_. We spent the following amount of money on behalf of the person: \$\_\_\_\_\_. We now hold the following amount of money on behalf of the person: \$\_\_\_\_\_.

17. 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.

18. Since our last report:

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

\_\_\_\_\_ & \_\_\_\_\_

☐ None

☐ None

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(b) We have filed for or received protection from creditors under the Federal

Bankruptcy Code. \_\_\_\_\_ & \_\_\_\_\_

☐ Yes ☐ No

☐ Yes ☐ No

(c) We have had a professional or occupational license revoked or suspended.

☐ Yes ☐ No

☐ Yes ☐ No

(d) We have had our driver's license revoked or suspended.

☐ Yes ☐ No

☐ Yes ☐ No

19. Since our last report, we have delegated the following powers over the protected person for the following periods of time: State None / or provide name of person powers delegated to and time: \_\_\_\_\_

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**We hereby declare that the above statement is true to the best of our knowledge and belief, and that we understand it is made for use as evidence in court and is subject to penalty for perjury.**

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

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Guardian

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Guardian

NOTICE: ANY PERSON INTERESTED IN THE AFFAIRS OR WELFARE OF THE PROTECTED PERSON WHO IS THE SUBJECT OF THIS REPORT WHO HAS CONCERNS ABOUT THIS REPORT OR THE GUARDIAN'S PERFORMANCE MAY CONTACT THE COURT AS FOLLOWS:

Washington County Circuit Court  
150 N. First Avenue  
Hillsboro, OR 97124