NOTICE: THIS DOCUMENT CONTAINS SENSITIVE DATA.

		CAUSE NO.			
GU	ARDIA	NSHIP OF	Ş	PROBATE COURT	
AN INCAPACITATED PERSON			\$ \$ \$ \$	NUMBER OF DALLAS COUNTY, TEXAS	
	Now	comes		, Guardian of the Person of	
		, and present	ts the following in	nformation as of[date]:	
1.	Guardian's current name and address: (street, city, state, zip code, county):				
	Home phone number:				
	Work phone number: Cell phone number:				
	E-mail address:				
2.	A. If the Ward has died, what was the date of death?				
	B. If the Ward reached majority, when was the Ward's 18 th birthday?				
	C. If the guardianship ended for some reason other than those mentioned above, please explain:				
3.	How were the Ward's personal effects distributed?				
4.	If the Ward had assets other than personal effects, what was the approximate value of				
	those	e assets and who has possession	of those assets?	\$	
5.	If there is additional information you wish to provide the court, please state or attach the				
	info	information to this report			

STATE OF TEXAS§COUNTY OF DALLAS§

Before me, the undersigned authority, on this day personally appeared _______, who being first duly sworn, states on oath that the foregoing report is a true, correct, and complete statement of facts for ______, as of the date stated herein.

Signed:

GUARDIAN OF THE PERSON

GUARDIAN OF THE PERSON

SWORN TO AND SUBSCRIBED BEFORE ME on this _____day of ______, 20____.

Notary Public in and for the State of Texas

WHEN REPORT HAS BEEN COMPLETED BY THE GUARDIAN AND IS READY FOR SUBMISSION TO THE JUDGE, PLEASE RETURN TO:

John F. Warren, Dallas County Clerk, Probate Department George Allen Court Building 600 Commerce Street, 7th Floor, Suite 200 Dallas, Texas 75202