IN THE COUNTY COURT OF THE STATE OF OREGON FOR THE COUNTY OF HARNEY PROBATE DEPARTMENT

In The Mat	ter of the Guardianship of)) Casa No	
(Name of P	rotected Person)) Case No	
AI	Protected Person) GUARDIAN'S REPORT)	
I am the gu	ardian for the person names above, and I	make the following report to the court as required by law:	
1.	My name is:		
2.	My residence address and telephone number are:		
3.	The name, if applicable, and address of the place where the protected person now resides are:		
4.		llowing 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 protected person at the protected 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.	A brief description of the protected person	on's physical condition is:	
10.	A brief description of the protected pers	on's mental condition is:	

1.	I made the following contacts with the person during the past year (brief description):				
2.	I made the following major decisions on the protected person's behalf during the past year (brief description):				
3.	I believe the guardianship should or should not continue because:				
1.	I received the following amount of money on behalf of the person: \$ I spent the following amount of money on behalf of the person: \$				
	A true copy of this report will be given to the person, if of the age to understand, 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):				
	Please be advised that a criminal history report may be conducted to verify this information.				
	(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's license revoked or suspended (yes or no):				
7.	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):				

I have given a copy of this report to persons specified in ORS 125.060(3).

I hereby declare that the above statement is true to the best of my knowledge and belief and that I understand it is made for use as evidence in court and is subject to penalty for perjury.

Dated this	_ day of	, 20
		Guardian
Approved.		
Dated this	_day of	, 20
		County Court Judge