

**IN THE DISTRICT COURT OF THE SECOND JUDICIAL
DISTRICT WITHIN AND FOR CARBON COUNTY, WYOMING**

IN THE MATTER OF THE
GUARDIANSHIP
OF:

Probate No. PR-

GUARDIANSHIP REPORT FROM _____ TO _____

Comes now, _____, the duly appointed
Guardian(s) in the above-entitled matter, and hereby state that the following is a true and
complete report of the Guardianship during the period shown, both dates inclusive.

1. I (we) was (were) appointed as the guardian(s) on: _____.
2. The last semiannual report in this matter was filed on _____.
3. The ward's principal address is: _____.
4. The ward's present mental and physical condition, including level of disability or
functional incapacity is: (e.g. age, mental disability, physical disability)

5. The ward's treatment and care consists of:

6. The ward's activities are (include school enrollment):

7. Since the last report the Guardian has taken these actions on behalf of the ward:

8. The Guardianship should continue because:

Once this form is completed and signed, mail to:

Carbon County Clerk of District Court

P.O. Box 67

Rawlins, WY 82301

Dated this _____ day of _____, 20_____.

Name of Guardian

Name of Guardian

Signature of Guardian

Signature of Guardian

Address

Phone Number