

# **GUARDIANSHIP and/or CONSERVATORSHIP**

# **1**

**Temporary Orders for  
an -----Adult**

**(Forms Packet)**

SELF-SERVICE CENTER

**TEMPORARY EMERGENCY APPOINTMENT OF  
GUARDIAN AND/OR CONSERVATOR FOR AN ADULT -----**

*You may use this packet if the following factors apply to your situation:*

- ✓ You want to have the court appoint a guardian and/or conservator or one or more persons on a temporary or emergency basis for a period of *not more than 6 months*.\*
- ✓ The person(s) needing the guardian and/or conservator lives in Maricopa County.
- ✓ You believe that the adult ----- needs to have a guardian and/or conservator temporarily and/or immediately.
- ✓ -----.\*\*
- ✓ -----\*\*\*

\* If the need for the guardianship will continue for more than 6 months, you will need to petition for "permanent" guardianship.

\*\* -----.

\*\*\* -----.

**READ ME:** Consulting a lawyer before filing documents with the court may help prevent unexpected results. A list of lawyers you may hire to advise you on handling your own case or to perform specific tasks, as well as a list of court-approved mediators can be found on the Self-Service Center website.

## Temporary Orders

For temporary (6 months or less) or emergency (30 day) appointment of a guardian and/or conservator for an adult

(Forms Only)

This packet contains court forms and instructions to file temporary orders. Items in **bold** are forms that you will need to file with the Court. Non-bold items are instructions or procedures. Do not copy or file those pages!

Order	File	Title	# pages
1	PBGCT1k	Checklist: <i>You may use these forms if . . .</i>	1
2	PBGCT1ft	Index (this page)	1
3	PB10f	<b>Probate Information Cover Sheet</b>	2
4	PB12f	<b>Probate Information Form for Guardianship/ Conservatorship</b>	3
5	PBGCT11f	<b>Petition for TEMPORARY (or Emergency) Appointment of a Guardian and/or Conservator</b>	5
6	PBGC13f	<b>Affidavit of Person to be Appointed</b>	3
7	PBGCT21f	<b>Notice of Hearing on TEMPORARY Appointment of a Guardian/Conservator</b>	1
8	PBGCT81f	<b>Order for TEMPORARY Appointment of Guardian and/or Conservator</b>	3
9	PBGCT82f	<b>Letters for Appointment as TEMPORARY Guardian or Conservator, and Acceptance of Letters</b>	2
10	PBT80f	<b>Declaration of Completion of Training</b>	1
11	PBGCA80f	<b>Order to Guardian and Conservator for an Adult and Acknowledgment and Information to Interested Persons</b>	7
12	PBGA83f	<b>Supplemental Order to Guardian with inpatient psychiatric treatment authority and acknowledgment</b>	3

The documents you have received are copyrighted by the Superior Court of Arizona in Maricopa County. You have permission to use them for any lawful purpose. These forms shall not be used to engage in the unauthorized practice of law. The Court assumes no responsibility and accepts no liability for actions taken by users of these documents, including reliance on their contents. The documents are under continual revision and are current only for the day they were received. It is strongly recommended that you verify on a regular basis that you have the most current documents.

SUPERIOR COURT OF ARIZONA  
IN MARICOPA COUNTY



PROBATE COVER SHEET

Case Number: \_\_\_\_\_

A person needing a guardian or conservator is the “ward.” A person who died is the “decedent.”

Name(s) of the Ward(s), Decedent(s), Trust(s), or Individual(s):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

The person who is filing this case is the “petitioner.”

Name(s), Address(es), Telephone Number(s), and Email Address(es) of the Petitioner(s):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Information About Petitioner’s Attorney:  Petitioner is not represented by an attorney, or

Name: \_\_\_\_\_ BAR #: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

An Interpreter is needed for this language: \_\_\_\_\_  
(List Name(s) of) Person(s) who need interpreter:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

STAFF USE ONLY: REASON FEES NOT PAID:  Government Charge  Deferred  Waived

NATURE OF ACTION: Place an "X" next to number which describes the nature of the case. Check only one.

**200 ESTATE**

- 201 Formal Appointment of Personal Representative
- 202 Informal Appointment of Personal Representative
- 203 Ancillary Administration
- 204 Affidavit of Succession to Realty
- 205 Trust Administration
- 206 Formal Probate of Will
- 207 Informal Probate of Will
- 208 Proof of Authority
- 210 Other \_\_\_\_\_  
Specify
- 211 Single Transaction/Limited Conservatorship
- 213 Request for Death Certificate

**220 CONSERVATOR**

- 221 Minor
- 222 Adult Incapacitated Person

**230 GUARDIANSHIP**

- 231 Minor
- 232 Adult (including those with Dementia, Alzheimer's)
- 233 Adult Requiring Inpatient Psychiatric Treatment

**240 GUARDIANSHIP-CONSERVATOR COMBINATION**

- 241 Minor
- 242 Adult (including those with Dementia, Alzheimer's)
- 243 Adult Requiring Inpatient Psychiatric Treatment

Today's Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Petitioner or Petitioner's Attorney

Notice: Submit this form with new cases only. If there is already a (Maricopa County) Probate Court case number and you are filing in an existing Superior Court case in Maricopa County, do not submit this form.

Person Filing: \_\_\_\_\_  
Address (if not protected): \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Lawyer's Bar Number: \_\_\_\_\_  
Licensed Fiduciary Number: \_\_\_\_\_



Representing  Self, without a Lawyer or  Attorney for \_\_\_\_\_

## SUPERIOR COURT OF ARIZONA MARICOPA COUNTY

In the Matter of:

Case Number: \_\_\_\_\_

\_\_\_\_\_  
Ward/Protected Person's Name, an Adult.

### PROBATE INFORMATION FORM for GUARDIANSHIP/CONSERVATORSHIP

**Updated** (Check this box if this is an updated form.)

#### INSTRUCTIONS:

1. Complete this form to the best of your knowledge and ability and then file it with your application or petition.
2. If you later learn of additional information that you omitted or if you later learn that any information in this form is incorrect, you must file an updated probate information form.
3. For purposes of this form, "Financial Institution" means a national banking association, a holder of a banking permit under Arizona law, a savings and loan association authorized to conduct trust business in Arizona, a title insurance company qualified to do business in Arizona, or a trust company holding a certificate to engage in trust business from the superintendent of financial institutions.
4. Items designated with an asterisk (\*) constitute "contact information" under Rule 13, Arizona Rules of Probate Procedure. If contact information changes, you must file a notice of change of contact information.
5. This form is filed as a confidential document, so it is *not* available to the general public. In addition, you are *not* required to provide anyone with this form other than the court.

**A. INFORMATION ABOUT THE NOMINATED GUARDIAN** (if applicable):

Name: \_\_\_\_\_

Is this person or entity an Arizona Licensed Fiduciary?  Yes  No

If Yes, write that person or entity's Licensed Fiduciary Number on the line below:

Mailing Address:\* \_\_\_\_\_

Physical Address:\* \_\_\_\_\_

Work Telephone Number:\* \_\_\_\_\_

Email Address:\* \_\_\_\_\_

If the nominated guardian is an Arizona Licensed Fiduciary or a Financial Institution, proceed to section **B** below. Otherwise, complete the remainder of section **A**.

Home Telephone Number:\* \_\_\_\_\_

Cellular Phone Number:\* \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Race: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Sex: \_\_\_\_\_

**B. INFORMATION ABOUT THE NOMINATED CONSERVATOR** (If applicable or if different from **A**):

Name: \_\_\_\_\_

Is this person or entity an Arizona Licensed Fiduciary?  Yes  No

If Yes, write that person or entity's Licensed Fiduciary Number on the line below:

Mailing Address:\* \_\_\_\_\_

Physical Address:\* \_\_\_\_\_

Work Telephone Number:\* \_\_\_\_\_

Email Address:\* \_\_\_\_\_

If the nominated conservator is an Arizona Licensed Fiduciary or a Financial Institution, proceed to section **C** below. Otherwise, complete the remainder of section **B**.

Home Telephone Number:\* \_\_\_\_\_

Cellular Phone Number:\* \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Race: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Sex: \_\_\_\_\_

**C. INFORMATION ABOUT THE PERSON WHO NEEDS A GUARDIAN OR CONSERVATOR:**

Name: \_\_\_\_\_

Mailing Address:\* \_\_\_\_\_

Physical Address:\* \_\_\_\_\_

Work Telephone Number:\* \_\_\_\_\_

Email Address:\* \_\_\_\_\_

Home Telephone Number:\* \_\_\_\_\_

Cellular Phone Number:\* \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Race: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Sex: \_\_\_\_\_

I, \_\_\_\_\_ (your name), under the penalty of perjury, do hereby swear that the foregoing information is true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature



Person Filing: \_\_\_\_\_  
Address (if not protected): \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Lawyer's Bar Number: \_\_\_\_\_  
Licensed Fiduciary Number: \_\_\_\_\_



Representing  Self, without a Lawyer or  Attorney for  Petitioner OR  Respondent

## SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

In the Matter of  
Guardianship and/or Conservatorship of

Case Number PB: \_\_\_\_\_

### PETITION FOR TEMPORARY APPOINTMENT OF

\_\_\_\_\_  an Adult

- Guardian and Conservator
- Guardian     Conservator
- EMERGENCY APPOINTMENT WITHOUT NOTICE REQUESTED

### UNDER PENALTY OF PERJURY:

### INFORMATION REQUIRED BY ARIZONA LAW (A.R.S. § 14-5401)

#### 1. Information about person to be protected by this temporary order:

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
Address: \_\_\_\_\_

#### 2. INFORMATION ABOUT OTHER COURT or AGENCY INVOLVEMENT

##### A. Other Court Cases (Mark the box beside the statements below that are TRUE.)

##### 1. Divorce, Legal Separation, or Paternity cases with court orders

- There are **NO** Divorce, Legal Separation, or Paternity **court orders or cases**, that include legal decision-making (custody) or parenting time (visitation) matters for the alleged incapacitated person.
- YES**, a Court Order exists for a Divorce, Legal Separation, or Paternity case involving the alleged incapacitated person.
  - The name of Arizona or other state Court where the above case is located: \_\_\_\_\_.
  - The name of the Arizona or other state case number for the above case is \_\_\_\_\_.

- The above case involved legal decision-making (legal custody) or parenting time (visitation).
  - The petitioner or proposed guardian in the above-named case is:
    - A parent of the alleged incapacitated person – or
    - A nonparent who has been awarded legal decision-making for the alleged incapacitated person.
- I attached a copy of the most recent court order regarding legal decision-making (legal custody) or parenting time (visitation) from the (Divorce, Legal Separation or Paternity) mentioned above. (On the top margin of the attached court order copy, write "Attachment for Question 2.A.)

**2. Other Guardianship or Conservatorship cases with court orders**

- No Guardian or Conservator was appointed by court order in any **other** court, and no Guardianship and/or Conservatorship court proceedings are pending for such appointment;
- Someone was appointed Guardian and/or Conservator, or Guardianship and/or Conservatorship court proceedings are pending. (If "yes", provide details below.)
  - Name: \_\_\_\_\_
  - Address: \_\_\_\_\_
  - Telephone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_
  - Relationship to the person to be protected is: \_\_\_\_\_

Was appointed  GUARDIAN **OR**  CONSERVATOR for the alleged incapacitated.

Name of Court: \_\_\_\_\_  
 Located in: City and State: \_\_\_\_\_  
 Date Appointed: \_\_\_\_\_ Other Details: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**B. Agency Involvement** (Place a check mark beside the statements below that are true.)

- A state or local agency is NOT, or has NOT been involved or concerned with the alleged incapacitated person.
- Yes, a state or local agency **is**, or has been involved or concerned with the alleged incapacitated person.

The following state or local agency has a case with or has checked on the alleged incapacitated person: (**Mark** the box beside the agency involved, and **write in the date** of involvement)

- Division of Aging and Adult Services \_\_\_\_\_
- Department of Child Safety
- Division of Developmental Disabilities
- Police
- Other Agency: \_\_\_\_\_

**3. Reasons for temporary appointment.** The temporary appointment of a guardian and/or conservator is necessary because: (Explain why the temporary appointment is necessary.)

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

**4. Petitioner's relationship** to the person you say needs a guardian and/or conservator:

\_\_\_\_\_

**5. Why should this court choose the person you say should be the guardian/conservator:**

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

**6. Information about person to be appointed guardian/conservator** (if different person than Petitioner)

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Relationship to the proposed incapacitated and/or protected person: \_\_\_\_\_

**7. To the best of my knowledge**, (check one box):

- No Guardian or Conservator has been appointed in any other court, and no court proceedings are pending for such appointment;
- Someone has been appointed or court proceedings are pending (explain who, when, in what court, and if appointee is guardian or conservator):

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

**Complete 8 and 9 only if this temporary appointment is an emergency.** If this is not an emergency, skip to number 10.

**8. Emergency Situation.** This case is an emergency and the appointment is necessary without notice to the person whom I say needs the guardian and/or conservator, or his/her attorney, because (explain here in detail why this needs to be done right away and without notice)

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

**9. Physician's Report. Complete this only if the person you say needs the temporary guardian or conservator is an ADULT:** An affidavit or physician's report describing need for a guardian and/or conservator and reason for emergency

- is attached to this Petition.
- is **not** attached to this Petition (explain why not).

---



---



---



---



---

**10. Persons Entitled to Notice** under Arizona law, A.R.S. 14-5309 (adults), 5207 (minors) and 14-5310 (emergency) for guardians and 14-5405 (adults and minors) and 14-5401 for conservators. I have:

(check one box)

- Given notice to the person who needs a guardian and/or conservator, or his/her attorney, or others as follows:

Name	Address	RELATIONSHIP to Person Who Needs Guardian or Conservator and how NOTICE was given
------	---------	---

- A. 

---
- B. 

---
- C. 

---
- D. 

---

**OR**

- Not given notice to the person who needs a guardian and/or conservator, or his/her attorney, or others because (explain here why no advance notice about this court case should be given). I promise I will give notice by personal service to the person who needs protection, his or her attorney, and all others required by law no later than 72 hours after the judge signs the Temporary Order:

---



---



---



---



---



---

**REQUESTS TO THE COURT:**

- 1. To find that the person about whom this petition is filed is in need of a temporary guardian and/or conservator.
- 2. **Check this box only if you are asking for an emergency appointment without notice, and have completed questions 9:**
  - To find that an emergency exists and this temporary order is necessary without notice to the person I say needs the guardian and/or conservator, or his/her attorney;
- 3. To appoint the person identified in this petition as the temporary guardian and/or conservator for that person until a court hearing can take place on this matter, or until further order of the court.

**OATH OR AFFIRMATION AND VERIFICATION**

**I swear or affirm that the information on this document is true and correct under penalty of perjury.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

Subscribed and sworn to or affirmed before me this: \_\_\_\_\_ by  
(date)

\_\_\_\_\_.

(notary seal)

\_\_\_\_\_  
Deputy Clerk or Notary Public

Person Filing: \_\_\_\_\_  
Address (if not protected): \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Lawyer's Bar Number: \_\_\_\_\_  
Licensed Fiduciary Number: \_\_\_\_\_

FOR CLERK'S USE ONLY

Representing  Self, without a Lawyer or  Attorney for  Petitioner OR  Respondent

## SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

In the Matter of the  
Guardianship and/or Conservatorship of:

Case Number: PB \_\_\_\_\_

### AFFIDAVIT OF PERSON TO BE APPOINTED GUARDIAN OR CONSERVATOR A.R.S. § 14-5106

an Adult

**INSTRUCTIONS:** As required by Arizona law A.R.S. § 14-5106, indicate whether statements 1-11 below are true or false, and provide the information requested to complete "12" and "13". Explain any "false" statements on separate page(s) and attach to this document before filing. Sign the document in the presence of a Clerk of the Court or a Notary Public, and file along with the *Petition for Appointment of Guardian and/or Conservator*.

### UNDER PENALTY OF PERJURY, I SWEAR OR AFFIRM:

- True or  False. I have not been convicted of a felony in any jurisdiction.
- True or  False. I have not acted as a guardian or conservator for another person for at least three years before I filed this Petition.
- True or  False. I know and understand the powers and duties I would have as a guardian and/or conservator.
- True or  False. I have not had a power of attorney for anyone for at least three years before I filed this Petition.
- True or  False. To the best of my knowledge, neither I nor any business in which I have an interest is listed in the Elder Abuse Registry at the Office of the Arizona Attorney General.
- True or  False. If I have been a guardian/conservator before, I either filed the required documents on time, or within 3 months of receiving a notice from the court that the report/accounting was due.
- True or  False. I have never been removed by the court as a guardian or conservator.

- 8.  True or  False. Neither I nor any business in which I have an interest has ever received anything of value greater than a total of one hundred dollars in any one year by gift, or will, or inheritance from an individual or the estate of an individual to whom I was not related by blood or marriage and for whom I served at any time as guardian, conservator, trustee, or attorney-in-fact.
- 9.  True or  False. To the best of my knowledge, neither I nor any business in which I have an interest is named as a personal representative, trustee, devisee (beneficiary of a will), or other type of beneficiary for any individual to whom I am not related by blood or marriage and for whom I have ever served as guardian, conservator, trustee, or attorney-in-fact.
- 10.  True or  False. I have no interest in any business that provides housing, health care, nursing care, residential care, assisted living, home health services, or comfort care services to any individual.

(Explain every "false" above on separate page(s) and attach to this document before filing.)

11. **My relationship to the proposed person in need of protection is:**  
(Examples: parent/grandparent/sister/caregiver/friend)

\_\_\_\_\_

12. **I met the proposed ward under the following circumstances:**

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

**OATH OR AFFIRMATION OF THE PERSON TO BE APPOINTED GUARDIAN AND/OR CONSERVATOR**

**I swear or affirm that I have read and understand the contents of this document, and that the information I have provided is true and correct to the best of my knowledge and belief.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

Subscribed and sworn to or affirmed before me this: \_\_\_\_\_ by  
(date)

\_\_\_\_\_.

(notary seal)

\_\_\_\_\_  
Deputy Clerk or Notary Public

**NOTE: IF YOU ANSWERED "FALSE" TO ANY QUESTION ABOVE, YOU MUST ATTACH AN EXPLANATION AS INSTRUCTED ON THE NEXT PAGE.  
The page following is an instruction page only. Do NOT file it with the Court.**

**EXPLANATIONS THAT MUST BE ADDED TO THE AFFIDAVIT OF A PERSON  
WHO WANTS TO BE APPOINTED GUARDIAN OR CONSERVATOR**  
(Required by Arizona Law: A.R.S. § 14-5106)

For any corresponding numbered statement on the Affidavit which you marked "False", ***explain the following*** on a separate page or pages and attach to your Affidavit. The information provided in the attachment is covered by the same oath or affirmation and penalty of perjury as the Affidavit.

***FILE THE EXPLANATIONS WITH THE AFFIDAVIT, BUT DO NOT FILE THIS PAGE.***

1. As to each felony for which you have been convicted, list:
  - a. The nature of the offense.
  - b. The name and address of the sentencing court.
  - c. The case number.
  - d. The date of conviction.
  - e. The terms of the sentence.
  - f. The name and telephone number of any current probation or parole officer.
  - g. The reasons why the conviction should not disqualify you from appointment.
2. If you have acted as guardian or conservator within three years before filing this petition, list:
  - a. The names of individuals for whom you are currently serving, and court case numbers.
  - b. The names of individuals for whom your appointment has been terminated within the three-year period, and the court case number.
3. State the total number of persons for whom you have served as a guardian or conservator. If you have acted under a power of attorney for the proposed ward/protected person, explain:
  - a. The date the power of attorney was signed.
  - b. The place where it was signed.
  - c. The actions you have taken pursuant to the power of attorney.
  - d. Whether the power of attorney is currently in effect.
4. If you do not have the required information, please explain how you intend to obtain this information.
5. State the reason for such listing on Elder Abuse Registry and the name of any business in which you have an interest that is listed on the Registry.
6. List the name and location of the court and the name and case number of the files in which you were delinquent in filing the required report.
7. List the name and location of the court, the name and case number of each file, and the circumstances of your removal.
8. State the number of occasions on which you and/or any business in which you have an interest received such gifts, list and describe the gifts, the dates received, and list the value of each.
9. State the number of occasions on which you or any business in which you have an interest have been named as a personal representative, trustee, or other type beneficiary listed.
10. List the name and address of each business and the extent and nature of your interest.

DO NOT FILE THIS SHEET  
WITH THE CLERK'S OFFICE  
INSTRUCTION SHEET ONLY



Person Filing: \_\_\_\_\_  
Address (if not protected): \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Lawyer's Bar Number: \_\_\_\_\_  
Licensed Fiduciary Number: \_\_\_\_\_

FOR CLERK'S USE ONLY

Representing  Self, without a Lawyer or  Attorney for  Petitioner OR  Respondent

## SUPERIOR COURT OF ARIZONA MARICOPA COUNTY

In the Matter of (check one box or both boxes)

The Guardianship  Conservatorship of

an Adult or  a Minor.

No: PB \_\_\_\_\_

### NOTICE OF HEARING REGARDING TEMPORARY APPOINTMENT

(Check one box)

Guardianship  
 Guardianship and Conservatorship  
 Conservatorship

#### **THIS IS A LEGAL NOTICE; Your rights may be affected.**

**An important court proceeding that affects your rights has been scheduled. If you do not understand this notice or the other court papers, contact an attorney for legal advice.**

1. **NOTICE IS GIVEN** that the Petitioner has filed a Petition and other court papers with the Court. (List the title of the Petition and the titles of all papers filed in the space below):

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

2. **HEARING INFORMATION.** A court hearing has been scheduled to consider the matters in the Petition and other court papers:

**HEARING DATE AND TIME:** \_\_\_\_\_

**HEARING PLACE:** \_\_\_\_\_

**JUDICIAL OFFICER:** \_\_\_\_\_

3. **RESPONSE.** You can file a written Response to the Petition. File your original written Response with the court, mail a copy of the original Response to the Petitioner(s), and provide a copy of your Response to the judicial officer named above at least 5 business days before the hearing. Or, you can appear in person at the hearing. You must appear at the hearing **only** if you wish to object to the Petition.

**If you wish to object to any part of the Petition or Motion that accompanies this notice, you must file with the court a written objection describing the legal basis for your objection at least three (3) days before the hearing date or you must appear in person or through an attorney at the time and place set forth in the notice of hearing.**

DATED: \_\_\_\_\_  
\_\_\_\_\_  
Petitioner's Signature

Person Filing: \_\_\_\_\_  
Address (if not protected): \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Lawyer's Bar Number: \_\_\_\_\_  
Licensed Fiduciary Number: \_\_\_\_\_

FOR CLERK'S USE ONLY

Representing  Self, without a Lawyer or  Attorney for  Petitioner OR  Respondent

## SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

In the Matter of (check one or both)  
 Guardianship  Conservatorship of

Case Number: \_\_\_\_\_

\_\_\_\_\_  an Adult

### TEMPORARY ORDER FOR

(check one box)

- Guardianship and Conservatorship**  
 **Guardianship**  
 **Conservatorship**

**NOTICE:** This is an important court order that affects your rights. Read this order carefully. If you do not understand this order, contact an attorney for legal advice. **This appointment is not effective until "Letters of Appointment" have been issued by the Clerk of the Court.**

### THE COURT FINDS:

- PETITION FILED.** A sworn Petition for Temporary Appointment of a Guardian and/or Conservator for the person named above was filed with the Court by the Petitioner.
- PERSON TO BE PROTECTED:** The person to be protected by this order:
  - Is a **MINOR** whose welfare and best interests require the appointment of a Temporary **GUARDIAN** to provide for his or her continuing care and supervision;
  - Is a **MINOR** for whom a Temporary **CONSERVATOR** is necessary because he or she has money or property that requires management or protection or has or may have business affairs which may be jeopardized by his minority, or the minor needs funds for his or her education and protection is necessary or desirable to obtain or provide funds.
  - Is an **ADULT** who is incapacitated due to physical and/or mental disabilities, that he or she is unable to make or communicate responsible decisions concerning his or her person and that appointment of a Temporary **GUARDIAN** is necessary to provide for his or her continuing care and supervision,
  - is an **ADULT** for whom a Temporary **CONSERVATOR** is necessary because he or she is unable to effectively manage or apply his or her estate due to physical and/or mental disabilities, confinement or disappearance, and that it is necessary to obtain or provide funds for the support, care, and welfare of the person to be protected and of those entitled to his or her support.

- 3. **NEED FOR PROTECTION.** There is sufficient evidence to support a finding of incapacity or need for protection by the person who is the subject of this order;
- 4. **PERSON TO SERVE AS GUARDIAN and/or CONSERVATOR:** \_\_\_\_\_ is competent to serve as:  Guardian and Conservator OR  Guardian OR  Conservator.
- 5. There is no guardian or conservator appointed by a court to date, or this order replaces such other order;
- 6.  **EMERGENCY.** An emergency exists and there is need under law for the Court to enter this order immediately;
- 7.  **PRIOR NOTICE.** Prior notice of this order is not required to be given to the person to be protected or his or her attorney or others entitled to prior notice because all the conditions of Arizona law, ARS §14-5310 and/or 14-5401.01 have been met.
- 8.  **MORE THAN 30 DAYS.** For good cause, this temporary appointment may be for more than 30 days, according to Arizona Law, A.R.S. § 14-5310 (D) and or 14-5401.01(D) for the following reasons:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**THE COURT ORDERS:**

- 1. **APPOINTMENT:** \_\_\_\_\_ is appointed as TEMPORARY  Guardian and Conservator, OR  Guardian OR  Conservator of the above-named person pursuant to Arizona law ARS §14-5310 and/or 14-5401.01.
- 2. **LETTERS:** This Order shall be filed with the Clerk of the Court, and upon filing a bond, if required, TEMPORARY LETTERS shall be issued to the Appointee in accordance with the terms of this Order and subject to the following restrictions (if any): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- 3. **NOTICE:**  The appointee shall give notice to the minor and his or her parents or to the protected or incapacitated person named in the caption above, and to all others, with a copy of each of the following documents:
  - a. The Petition for Temporary Appointment with this Order;
  - b. The Petition for Permanent Appointment;
  - c. All reports, affidavits, or other documents filed in support of both Petitions.
- 4. **EMERGENCY HEARING WITHOUT NOTICE:**
  - Personal service shall be completed no later than 72 hours after the date of this order upon the person who needs the protection, his or her attorney, and the parents of that person if the person is a minor.

5.  **PROOF OF NOTICE.** Proof of Notice of Hearing shall be filed with the Clerk of the Court, Probate Registrar, as required by Arizona Law, ARS §§ 14-5310 (B) and/or 14-5401.01(B).

6. **THE APPOINTMENT ENDS.**

The Appointment ends on \_\_\_\_\_, 20\_\_\_\_, or

**For good cause, this temporary appointment has been extended beyond 30 days.**

\_\_\_\_\_

7. **CHANGE OF ADDRESS.** The person appointed as guardian and/or conservator shall notify this Court immediately of any change in his or her address or the person protected by this order. The appointee shall be responsible for all costs resulting from his/her failure to do so.

8. **BOND:**

No Bond is required, OR

The Guardian and/or Conservator shall file a bond in the amount of \$ \_\_\_\_\_ with the Clerk of the Court, Probate Registrar.

DONE IN OPEN COURT: \_\_\_\_\_

\_\_\_\_\_  
**JUDGE OR COMMISSIONER**

Person Filing: \_\_\_\_\_  
Address (if not protected): \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Lawyer's Bar Number: \_\_\_\_\_  
Licensed Fiduciary Number: \_\_\_\_\_

FOR CLERK'S USE ONLY

Representing  Self, without a Lawyer or  Attorney for  Petitioner OR  Respondent

## SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

In the Matter of: (check one or both)  
 Guardianship  Conservatorship

Case Number: \_\_\_\_\_

### LETTERS OF APPOINTMENT AS TEMPORARY

(Check one box)

\_\_\_\_\_  
 an Adult

Guardian and Conservator

Guardian

Conservator

### AND ACCEPTANCE OF TEMPORARY APPOINTMENT

## ISSUANCE OF TEMPORARY LETTERS

1. **NAME OF PERSON APPOINTED:** This person (name) \_\_\_\_\_

is appointed as:  Guardian and Conservator OR  Guardian OR  Conservator

2. **NAME OF PERSON WHO NEEDS GUARDIAN AND/OR CONSERVATOR:**

\_\_\_\_\_

3. **REASON FOR APPOINTMENT:** The person who needs a guardian and/or conservator is

a minor OR  an incapacitated adult or a ward OR  a protected person

4. **LENGTH OF APPOINTMENT:** \_\_\_\_\_

5. **RESTRICTIONS** that apply to this TEMPORARY appointment, by order of the court:

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

WITNESS: \_\_\_\_\_

CLERK OF SUPERIOR COURT

By: \_\_\_\_\_  
Deputy Clerk

**ACCEPTANCE OF TEMPORARY APPOINTMENT**

I accept the duties as TEMPORARY  Guardian and Conservator OR  Guardian OR  Conservator  
of \_\_\_\_\_ (name).

I swear that I will perform these duties according to law.

\_\_\_\_\_  
GUARDIAN AND/OR CONSERVATOR

\_\_\_\_\_  
Printed Name

Person Filing: \_\_\_\_\_  
Address (if not protected): \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Lawyer's Bar Number: \_\_\_\_\_  
Licensed Fiduciary Number: \_\_\_\_\_



Representing  Self, without a Lawyer or  Attorney for  Petitioner OR  Respondent

## SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

In the Matter of the Estate of:

Case Number PB: \_\_\_\_\_

### DECLARATION OF COMPLETION OF TRAINING for NON-LICENSED FIDUCIARIES

\_\_\_\_\_ A  Deceased or  Protected Person

**Rule 27.1 of the Arizona Rules of Probate Procedure** requires that a person to be appointed guardian, conservator, or personal representative of an estate, who is neither a state-licensed fiduciary nor a corporation, complete a training program approved by the Supreme Court of this state before permanent **Letters of Appointment** are issued, or within 30 days of a temporary or emergency appointment.

### UNDER PENALTY OF PERJURY

I state to the Court that in accord with Rule 27.1 of the Arizona Rules of Probate Procedure, I have completed the required training for non-licensed, non-corporate fiduciaries, as indicated below: (Check all that apply and provide applicable information.)

- |  |                       |
|--|-----------------------|
| <input type="checkbox"/> Unlicensed Fiduciary    | Date completed: _____ |
| <input type="checkbox"/> Conservatorship         | Date completed: _____ |
| <input type="checkbox"/> Personal Representative | Date completed: _____ |
| <input type="checkbox"/> Guardianship            | Date completed: _____ |

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

**INSTRUCTIONS:** Fill out this Declaration completely and provide accurate information. Make at least one copy. You will need to file the original with the Clerk of Court and provide a copy to the Probate Registrar before receiving any *permanent* letters of appointment.

Person Filing: \_\_\_\_\_

Address (if not protected): \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Lawyer's Bar Number: \_\_\_\_\_

Licensed Fiduciary Number: \_\_\_\_\_

Representing  Self, without a Lawyer OR  Attorney for \_\_\_\_\_



SUPERIOR COURT OF ARIZONA  
IN MARICOPA COUNTY

In the Matter of the Guardianship and  
Conservatorship of

Case Number: \_\_\_\_\_

ORDER TO GUARDIAN AND  
CONSERVATOR OF AN ADULT

\_\_\_\_\_  
Ward and Protected Person's Name

\_\_\_\_\_  
(Assigned Judicial Officer)

Warning: Your appointment is not effective until the Clerk of Superior Court has issued your Letters of Appointment.

You have asked the court to appoint you as the guardian of your "ward" and the conservator for your "protected person," referred to in this order as the "subject person." While you serve as the guardian and conservator, you will be under this court's authority and supervision, and the court will continue to monitor the subject person's welfare and best interests.

This order generally explains your duties to the subject person and to this court. You may have additional duties imposed by statutes, rules, or the court. By separate order, the court may modify or excuse you from performing a specific duty described below.



**YOUR POWERS AND DUTIES AS GUARDIAN:**

- 1G. **General Powers and Duties.** You have powers and responsibilities like those of a parent of a minor child. A.R.S. § 14-5312(A). However, you are not legally obligated to contribute your own funds to support the subject person. Your responsibilities include, but are not limited to, making appropriate arrangements for the subject person's basic needs, such as food, clothing, and housing. A.R.S. § 14-5312(A)(1)-(2). You are responsible for making decisions concerning the subject person's educational, and social activities. A.R.S. § 14-5312(A)(2). You must consider the subject person's preferences to the extent they are known to you or that you can determine with a reasonable inquiry. A.R.S. § 14-5312(A)(11).
- 2G. **Contact Between Subject Person and Others.** You must encourage and allow contact between the subject person and other persons who have a significant relationship with the subject person. A.R.S. § 14-5316(A). In exercising this duty, you must consider the subject person's wishes and whether the subject person has sufficient mental capacity to make the decision in question. A.R.S. § 14-5316(C). However, unless the court orders otherwise, you may limit, restrict, or prohibit contact between the subject person and another person if you reasonably believe that the contact will be detrimental to the subject person's health, safety, or welfare. A.R.S. § 14-5316(B).
- 3G. **Health Care Decisions for Subject Person.** You are responsible for making decisions concerning the subject person's medical needs. A.R.S. § 14-5312(A)(3) and (9). Such decisions include, but are not limited to, choosing doctors, nurses, or other professionals to provide for the subject person's health care needs, and placing the subject person in a health care facility, including a residential care facility. However, you must use the least restrictive residential care setting that is available for meeting the subject person's needs. A.R.S. § 14-5312(A)(8). You may arrange for medical care for the subject person even if the subject person does not wish to have it.
- 4G. **Psychiatric and Psychological Treatment for Subject Person.** You may give consent to outpatient psychiatric and psychological treatment, including the administration of psychotropic medication. However, you may not place the subject person in an inpatient psychiatric facility without the subject person's consent, unless the court has specifically authorized you to do so. A.R.S. § 14-5312.01(A) and (B).
- 5G. **Notify Family Members of Subject Person's Hospitalization.** You must notify the subject person's family members as soon as practicable if the subject person is admitted to a hospital for more than 3 days, or if the subject person dies. A.R.S. § 14-5317(A).
- 6G. **Do Not Accept "Kickbacks."** You must not accept any compensation for placing the subject person in a particular nursing home or other care facility, using a certain doctor, or using a certain attorney. "Compensation" includes, but is not limited to, direct or indirect payment of money, "kickbacks," gifts, favors, or other items of value.

- 7G. File Annual Reports. You are required to file a written report with the court annually concerning the subject person's residence, physical and mental health, and whether the guardianship should be continued. A.R.S. § 14-5315(A). Your report is due each year no later than 60 days after the anniversary date of the issuance of your letters of permanent appointment, or on a date established by the court. Ariz. R. Prob. P. 46(a).
- 8G. Change of Subject Person's Contact Information. If the subject person's contact information changes, you must file Form 14, Notice of Change of Ward's Contact Information, within 3 court days after learning of such change. Ariz. R. Prob. P. 13(c)(1)(B). If the subject person dies, you must notify the court in writing no later than 14 calendar days after learning of the death. Ariz. R. Prob. P. 40(c).
- 9G. Termination of Subject Person's Incapacity. You must always be mindful of the subject person's needs and best interests. If the circumstances that made a guardianship necessary should end, you are responsible for petitioning the court to terminate the guardianship and obtaining your discharge as guardian. A.R.S. § 14-5312(A)(7). Even if the guardianship terminates, you will not be discharged from your responsibilities until you have obtained a court order discharging you. A.R.S. § 14-5306.

#### YOUR POWERS AND DUTIES AS CONSERVATOR:

- 1C. General Duty to Gather and Manage Subject Person's Assets. You must immediately locate, identify, secure, and inventory all of the subject person's assets, and make reasonable arrangements to protect those assets. *See* A.R.S. § 14-5417 (stating that a conservator must act as a fiduciary and observe the standard of care applicable to trustees).
- 2C. Titling of Subject Person's Assets. You must immediately change the title of any financial accounts, vehicles, and other titled assets owned by the subject person. The property should be titled in the name of the conservatorship: "(Your name), as Conservator(s) of the estate of (subject person's name)" or "(subject person's name), by (your name), Conservator." You should consider consulting with an attorney or petitioning the court for instructions if the subject person owns the property with another person, or if the subject person arranged for payment or transfer of benefits or interest in the property to another person at the subject person's death, such as a TOD, POD, or joint tenancy designation. *See* A.R.S. § 14-5417 (stating that a conservator must act as a fiduciary and observe the standard of care applicable to trustees); A.R.S. § 14-5427 (requiring conservator to take into account the protected person's estate plan).
- 3C. Restricted Assets. If the court has entered an order restricting an account, you must file Form 10, Proof of Restricted Account from Financial Institution, no later than 30 days after the court's order, or as otherwise ordered by the court. Ariz. R. Prob. P. 36(b)(2). Form 10 must be signed by an authorized representative of the financial institution.

- 4C. Recording of Letters of Appointment. No later than 10 court days after issuance of your letters of appointment, you must record a certified copy of those letters with the county recorder in every county of any state where the subject person owns real property. No later than 45 calendar days after a county recorder has recorded those letters, you must file a copy of the recorded letters with the court. Ariz. R. Prob. P. 39(g).
- 5C. Inventory, Consumer Credit Report, and Initial Budget. No later than 90 days after the date your temporary or permanent letters of appointment were first issued, you must file an inventory, a consumer credit report for the subject person, and an initial budget. A.R.S. § 14-5418(A); Ariz. R. Prob. P. 45(c)(1), (c)(3), and (d)(1). No specific form is required for the inventory; however, the inventory must list, with reasonable detail, all the property owned by the subject person on the date your letters were first issued and state the fair market value of each asset as of that date. A.R.S. § 14-5418(A); Ariz. R. Prob. P. 45(c)(2). You must use Form 5 for the initial budget. Ariz. R. Prob. P. 45(d)(2).
- 6C. Pay Valid Claims and Expenses; Maintain Records. You must pay the subject person's debts when they become due. Keep detailed records of all money you receive for the subject person and all expenses you pay on the subject person's behalf, including bills and invoices, payment receipts, bank statements, tax returns, bills of sale, promissory notes, etc. Do not deposit the subject person's funds into your own account, and do not pay the subject person's bills from your account. Instead, maintain the subject person's funds in one or more separate accounts that are distinct from your own and that are titled either "[your name], Conservator for [subject person's name]" or "[subject person's name], by [your name], Conservator." Avoid dealing in cash and do not write checks to "cash." See A.R.S. § 14-5417 (stating that a conservator must act as a fiduciary and observe the standard of care applicable to trustees); A.R.S. § 14-5428 (setting forth conservator's duty to pay all just claims against the protected person's estate).
- 7C. Annual Accounts and Budgets. You must file annual accounts with the court as follows:
- (a) using Form 6, you must file your first account and an annual budget as conservator on or before the first anniversary date of the issuance of your letters of appointment as permanent conservator;
  - (b) on or before all subsequent anniversary dates of the issuance of your letters of appointment as permanent conservator, you must file your account and annual budget as conservator using Form 7; and
  - (c) no later than 90 days after your appointment as conservator ends, you must file a final account using Form 8. A.R.S. § 14-5419(A); Ariz. R. Prob. P. 45(d), (e).
- 8C. Amended Budgets. You must file an amended budget no later than 30 days after

reasonably projecting that the expenditure for any specific category in your most recently filed budget will exceed the threshold stated in Form 5. Ariz. R. Prob. P. 45(d)(3).

- 9C. Investment of Subject Person's Assets. You must properly invest the subject person's assets. You may hire accountants, attorneys, and other advisors to help you carry out your duties as the size and the complexity of the conservatorship estate may require. *See* A.R.S. § 14-5417 (stating that a conservator must act as a fiduciary and observe the standard of care applicable to trustees).
- 10C. Duty of Undivided Loyalty. You have a duty of undivided loyalty to the subject person. You must use the subject person's money and property only for the subject person's benefit. Neither you, your friends, nor any other family members may profit by dealing in the assets of the conservatorship estate. You must be prudent in investing and managing the subject person's assets. *See* A.R.S. § 14-5417 (stating that a conservator must act as a fiduciary and observe the standard of care applicable to trustees).
- 11C. Use of Subject Person's Assets. You must make reasonable efforts to determine the subject person's preferences regarding all decisions you are empowered to make as conservator. Do not purchase merchandise or services that the subject person would have considered extravagant or inappropriate before your appointment. *See* A.R.S. § 14-5425(A)(2)(b). Use the assets to maintain the safety, health, and comfort of the subject person, bearing in mind the totality of the subject person's income and assets. A.R.S. § 14-5425(A)(2)(a). When investing and managing the subject person's property, you must consider the subject person's estate plan, if any, and petition the court for instructions if you have any questions regarding this obligation. A.R.S. § 14-5427.
- 12C. Termination of the Conservatorship. The conservatorship terminates only upon the entry of a court order terminating the conservatorship. The court will enter such an order only after either you or the subject person, or another interested person, files a petition requesting that the conservatorship be terminated. The petition should be filed if the subject person no longer needs a conservator (because the subject person's disability has ceased or because the conservatorship estate has been exhausted) or after the subject person dies. A.R.S. § 14-5430. Unless otherwise ordered by the court or unless, in the case of the subject person's death, you comply with A.R.S. § 14-5419(F), you will need to file a final account with the court before you can be discharged of liability in connection with the conservatorship and before your bond, if any, is exonerated. A.R.S. § 14-5419(A).

#### GENERAL INFORMATION:

1. Certified Copy of Letters of Appointment. You will need to obtain a certified copy of the Letters of Appointment that the Clerk of Superior Court will issue to you. The certified copy is proof of your authority to act on behalf of the subject person. You may need to

obtain additional (or updated) certified copies from time to time for delivery to, or inspection by, the people with whom you are dealing.

2. **Change of Your Contact Information.** If your contact information changes during your appointment, you must file Form 13, Notice of Change of Fiduciary's Contact Information, within 10 court days after such a change occurs. Ariz. R. Prob. P. 13(c)(1)(A).
3. **Compensation for Services as Guardian and Conservator.** If you are a licensed fiduciary or are related by blood or marriage to the subject person, you may be entitled to compensation for your services as the subject person's guardian and conservator. A.R.S. §§ 14-5314(A), 14-5414(A), and 14-5651. If you wish to be compensated for your services as guardian and conservator, you must file with the court a statement that explains how you will be compensated, including any hourly rate you intend to charge, and you must file an updated statement at least 30 days before you change the basis for your compensation, including your hourly rate. A.R.S. § 14-5109(A) and (B). In addition, you should keep detailed records of the time you spend performing your duties. The time records should include the date you perform each task, a description of the task, the amount of time you spent on the task, and the hourly rate you are charging for that task. Read Rule 33, Arizona Rules of Probate Procedure, and Arizona Code of Judicial Administration § 3-303 for more information about compensation for guardian and conservator services.
4. **Mail Notice of this Order.** Within 10 court days after entry of this Order to Guardian and Conservator of an Adult, you must mail a copy of this order to every party in this case (or if a party is represented, that party's attorney) and to any person who has filed a demand for notice.
5. **Inability to Serve as Guardian and Conservator.** If you become unable to continue with your duties for any reason, you (or your own guardian or conservator, if you have one) must petition the court to accept your resignation and appoint a successor. If you should die, your personal representative or someone acting on your behalf must inform the court of your death and petition for the appointment of a successor.
6. **Legal Advice.** You are responsible for obtaining proper legal advice about your duties. Failure to do so may result in personal financial liability for any losses. If you have any questions about the meaning of this order or the duties that the court's orders, statutes, and rules impose upon you by reason of your appointment as guardian and conservator, you should consult an attorney or petition the court for instructions.
7. **Forms.** The forms referred to in this order are available at <https://www.azcourts.gov/probate>.

Warning: Failure to obey this order, the other orders of this court, or the statutory provisions or rules relating to guardians and conservators may result in your removal as guardian and conservator and other penalties. In some circumstances, you may be held in contempt of court, and your contempt may be punished by confinement in jail, a fine, or both. Ariz. R. Prob. P. 48.

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

\_\_\_\_\_  
Judicial Officer's Signature

\_\_\_\_\_  
Judicial Officer's Name (Type or Print Name)

ACKNOWLEDGEMENT

I (We), the undersigned, agree to be bound by the provisions of this order, as long as I (we) continue to serve as guardian and conservator.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Guardian/Conservator Signature

\_\_\_\_\_  
Guardian/Conservator Name (Type or Print Name)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Guardian/Conservator Signature

\_\_\_\_\_  
Co-Guardian/Conservator Name (Type or Print Name)

Person Filing: \_\_\_\_\_

Address (if not protected): \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Lawyer's Bar Number: \_\_\_\_\_

Licensed Fiduciary Number: \_\_\_\_\_

Representing  Self, without a Lawyer OR  Attorney for \_\_\_\_\_



SUPERIOR COURT OF ARIZONA  
IN MARICOPA COUNTY

In the Matter of the Guardianship of:

Case Number: \_\_\_\_\_

\_\_\_\_\_  
Ward's Name, an Adult.

SUPPLEMENTAL ORDER TO GUARDIAN  
WITH INPATIENT PSYCHIATRIC  
TREATMENT AUTHORITY AND  
ACKNOWLEDGMENT

\_\_\_\_\_  
(Assigned Judicial Officer)

Warning: This appointment is not effective until the Letters of Appointment have been issued by the Clerk of Superior Court.

The welfare and best interest of the person named above ("your ward") are matters of great concern to this Court. This document addresses only your powers and duties relating to inpatient psychiatric treatment for your ward. Thus, the orders made in this document are in addition to, and supplement, the orders made in the Order to Guardian and Acknowledgment and Information to Interested Persons or the Order to Guardian and Conservator and Acknowledgment and Information to Interested Persons that you and the Court have signed.

Notwithstanding paragraph 6 of the Order to Guardian and Acknowledgment and Information to Interested Persons or the Order to Guardian and Conservator and Acknowledgment and Information to Interested Persons, you may place your ward in an inpatient psychiatric facility against your ward's will. However, you must comply with A.R.S. § 14-5312.01, including but not limited to the following requirements:

- A. Within forty-eight hours after placing your ward in an inpatient psychiatric facility, you must notify your ward's attorney of the placement.
- B. When your ward is admitted to an inpatient psychiatric facility, you must provide that facility with the name, address, and telephone number of your ward's attorney.
- C. You must sign any documents necessary to allow your ward's attorney access to all of your ward's medical, psychiatric, psychological, and other treatment records.
- D. You must place your ward in the least restrictive treatment alternative within five calendar days after the medical director of the inpatient psychiatric facility notifies you that your ward no longer needs inpatient care.
- E. You must file with the annual report of the guardian required pursuant to [A.R.S. § 14-5315](#) an evaluation report by a psychiatrist or a psychologist. The evaluation report must indicate whether your ward will likely need inpatient mental health care and treatment within the next 12 months. If you do not file the evaluation report, or if the report that is filed indicates that your ward will not likely need inpatient mental health care and treatment, your authority to consent to placement in an inpatient psychiatric facility will cease on the date specified in the prior court order. If the report supports the continuation of your authority to consent to inpatient treatment, the court may extend your authority to consent to this placement in an inpatient psychiatric facility. However, at least 30 days before that authority expires, you must file a motion requesting that the Court extend that authority.
- F. At any court hearing regarding the placement of your ward in an inpatient psychiatric facility, you will have the burden of proving by clear and convincing evidence that your ward is likely to be in need of inpatient mental health care and treatment within the period of the authority granted.

This order is only an outline of some of your duties as a guardian who has been granted the authority to place your ward in an inpatient psychiatric facility. It is your responsibility to obtain proper legal advice about your duties. Failure to do so may result in personal financial liability for any losses.



Warning: Failure to obey the orders of this court and the statutory provisions relating to guardians may result in your removal from office and other penalties. In some circumstances, you may be held in contempt of court, and your contempt may be punished by confinement in jail, a fine, or both.

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

\_\_\_\_\_  
Judicial Officer's Signature

\_\_\_\_\_  
Judicial Officer's Name (Type or Print Name)

ACKNOWLEDGEMENT

I (We), the undersigned acknowledges receiving a copy of this Order and agree(s) to be bound by its provisions, whether or not read before signing, as long as serving as guardian.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Guardian's Signature

\_\_\_\_\_  
Guardian's Name (Type or Print Name)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Guardian's Signature (if any)

\_\_\_\_\_  
Co-Guardian's Name (Type or Print Name)