IN THE SUPERIOR COURT FOR THE STATE OF ALASKA In the Matter of the Protective Proceedings of:)) Case No: ____ Respondent **COURT VISITOR'S INFORMATION ON EXPERT APPOINTMENT** I, ______, am appointed as the court visitor in this case. My review of the existing records provides sufficient information for me to identify the following established provider as a potential expert: Name _____ Phone Number Email ☐ This provider previously evaluated Respondent on ______ [date]. A report and/or medical records dated ______ is/are attached to ☐ the petition. ☐ this notice. ☐ other: ______ There are no established reports or records on the issue of Respondent's alleged incapacity. The court should order this provider to perform an evaluation of Respondent. ☐ The existing records do not provide sufficient information for me to identify an established provider as a potential expert. The court should order an evaluation of Respondent and allow me time to investigate an appropriate provider and arrange for this evaluation. I will file the evaluation with the court. Signature of Court Visitor Date Mailing Address _____ Phone _____ Email ____ I certify that on ______ at _____ [date/time], I _ mailed _ hand-delivered _ emailed a copy of this report to: Petitioner Respondent (through attorney) ☐ Proposed Guardian/Conservator ☐ Expert (if named above) Other: Signature of Court Visitor: