IN THE CIRCUIT COURT OF THE STATE OF OREGON		
FOR THE COUNTY OF JACKSON		
IN THE MATTER OF THE GUARDIANSHIP CASE NO.:		
OF FINAL GUARDIAN'S REPORT		
FINAL GUARDIAN S REPORT		
PROTECTED DEDCOM		
PROTECTED PERSON.		
I am the Guardian for the person named above, and I make the following		
Report to the Court as required by law:		
My name, address and telephone number are:		
2. The name, if applicable, and address of the place where the person		
was residing until, the date of death of the Protected Person		
was:		

1	3.	The person was engaged in the following programs and activities and
2	receiving t	the following services: Prior to death,
3		
4	4.	The name of the person primarily responsible for the care of the
5	person at	the person's place of residence was:
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7	5.	I made the following contacts with the person during the past year:
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10	6.	I made the following major decisions on behalf of the person during
11	the past y	ear:
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13	7.	The Guardianship should be closed, because the Protected Person
14	has died.	
15	8.	A true copy of this report will be given to any Conservator for the
16	person, an	d any other person who has requested Notice.
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1	I HEREBY DECLARE THAT THE ABOVE STATEMENT IS TRUE TO THE
2	BEST OF MY KNOWLEDGE AND BELIEF, AND THAT I UNDERSTAND THAT IT
3	IS MADE FOR USE AS EVIDENCE IN COURT AND IS SUBJECT TO PENALTY
4	FOR PERJURY.
5	DATED this day of, 2014.
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7	, Guardian
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