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\_\_\_\_\_ If you would like to sign up for our email newsletter, please visit our website.

**Date:** \_\_\_\_\_  
**Prepared by:** \_\_\_\_\_

Guardianship/Conservatorship Administration Information

The following information will be needed in the administration of the guardianship and/or conservatorship and will assist us in determining what procedures are needed and what notifications must be given. Please complete this information as completely as possible and return it to us with copies of any documents about which you have questions and with any account statements or other financial information that may be needed.

Name \_\_\_\_\_ Social Security Number \_\_\_\_\_

Ward \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Telephone No. \_\_\_\_\_

Address: \_\_\_\_\_ How Long Lived there? \_\_\_\_\_

Reason for Guardianship/Conservatorship: \_\_\_\_\_

Medical Condition/Diagnosis of Ward: \_\_\_\_\_

Proposed  
Guardian/Conservator: \_\_\_\_\_ Relationship: \_\_\_\_\_

D.O.B. \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_

SSN: \_\_\_\_\_

Ward's Family

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Address (Very Helpful) \_\_\_\_\_

Spouse: \_\_\_\_\_

phone: \_\_\_\_\_  
SSN: \_\_\_\_\_

Children of the ward:	Date of Birth:	Address:
_____	_____	_____
_____	_____	_____
_____	_____	phone: _____
_____	_____	SSN: _____
_____	_____	_____
_____	_____	phone: _____
_____	_____	SSN: _____
_____	_____	_____
_____	_____	phone: _____
_____	_____	SSN: _____

Does the Ward have an attorney? \_\_\_\_\_ Name and Address \_\_\_\_\_

Has the Ward ever signed a Power of Attorney? \_\_\_\_\_  
 Will? \_\_\_\_\_  
 Trust? \_\_\_\_\_

INCOME

Is the ward receiving income from any of the following sources? Give the monthly amounts if known.

<u>Source</u>	<u>Monthly Amounts</u>
Social Security	_____
Pension Benefits	_____
Employment	_____
VA or other pension:	_____ Other Income _____

Did the Ward file an income tax return for the preceding year? \_\_\_\_\_ If so, please submit a copy.  
 Name of tax preparer \_\_\_\_\_

ASSETS

Please complete the appropriate sections and attach separate statements such as bank account or brokerage statements, balance sheet, your own list, etc.

1. Real Estate

<u>Location</u>	<u>Name(s) on Title</u>	<u>Estimated Value</u>	<u>Mortgage Balance</u>
_____	_____	_____	_____

2. Bank Accounts (attach statements if available)

<u>Name of Bank and Account Number</u>	<u>Type: (Checking, CD, money market, etc)</u>	<u>Name(s) on Account</u>	<u>Balance</u>
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3. Regular Investments (brokerage accounts, mutual funds, etc.) Attach statements or separate list if available.

<u>Item</u>	<u>Name(s) on Account</u>	<u>Value</u>
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4. Promissory Notes, Mortgages (money owed to decedent)

<u>Description</u>	<u>Value</u>
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5. Tax-Qualified Investments (IRA accounts, tax-sheltered annuities, pensions, 401(K)s, 403(b)s, etc.)

<u>Description</u>	<u>Owner of Account</u>	<u>Amount</u>	<u>Beneficiary</u>
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6. Life Insurance

<u>Company</u>	<u>Face Amount</u>	<u>Beneficiary</u>
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7. Tangible Personal Property (motor vehicles, musical instruments, artwork, jewelry, etc.)  
(Only list items of substantial value or importance)

<u>Item</u>	<u>Location</u>	<u>Approximate Value</u>
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Estimate the total value of the household furnishings, and other personal belongings: \$ \_\_\_\_\_

9. Does the Ward maintain a safe deposit box?

<u>Bank</u>	<u>Branch</u>	<u>Number</u>
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Where is the key located? \_\_\_\_\_

10. What funeral or burial arrangements have been made?

<u>Funeral Home/Cemetery</u>	<u>Cost</u>	<u>Amount Paid and by Whom</u>
_____	_____	_____

11. Miscellaneous Assets: Are there any items belonging to ward not previously mentioned, such as U.S. savings bonds, annuities, pending lawsuits, out of state assets, refunds due, etc.?

<u>Description</u>	<u>Value</u>
_____	_____
_____	_____

LIABILITIES

Please list any outstanding liabilities of the decedent including mortgage debt, personal debts, medical debts, promissory notes, credit cards, bank loans or any other debts:

<u>Lender:</u>	<u>Acct. No.</u>	<u>Balance due:</u>
_____	_____	_____
_____	_____	_____

NOTE: Please bring the following documents to our meeting, if available and applicable: (a) Powers of Attorney, Will(s) and Trust(s); (b) Deed to residence; (c) latest tax returns; (d) insurance policies; (e) bank or brokerage account statements and (f) any other documents or information you deem relevant.

PLEASE MAKE SURE TO WRITE DOWN ANY QUESTIONS YOU MAY HAVE SO THAT WE ARE SURE TO ANSWER THEM AT OUR MEETING.