Investigator's Name, Address, Telephone:

ARIZONA SUPERIOR COURT, PIMA COUNTY

In the Matter of the Guardianship)	
and/ or Conservatorship of:)	
-)	Case No. GC-
)	
)	REPORT OF INVESTIGATOR
Date of Birth:)	Hearing Date:
An Incapacitated/Protected Person)	

_____, having been appointed investigator on _____,

submits the attached Report of Investigator in compliance with A.R.S. § 14-5303(C) and/or

A.R.S. § 14-5407(B). Copies of this report have been mailed or delivered to the following

persons (give name, address, and date mailed or delivered):

Attorney for petitioner (or petitioner, if no attorney):

Court-appointed counsel:

Other interested persons (if any):

DATED: _____

Investigator's signature

The original of this report must be filed with the Probate Clerk <u>at least two days prior</u> to the hearing date, along with a copy marked for the Probate Commissioner.