IN THE CIRCUIT COURT OF THE STATE OF OREGON FOR THE COUNTY OF LINN

IN T	HE MATTER OF THE GUARDIANSHIP OF :) Case Number:, a protected person.)
	GUARDIAN'S REPORT
as re	I am the guardian for the protected person named above, and I make the following report to the court quired by ORS 125.325:
1.	My name is:
2.	My address and telephone numbers are:
3.	The name (if applicable) and address of the place where the protected person now resides are:
4.	The protected person is currently residing at the following type of facility or residence:
5.	The protected person is currently engaged in the following programs and activities and receiving the following services:
6.	I was paid for providing the following items of lodging, food, or other services to the protected person:
7.	The person(s) primarily responsible for the care of the protected person at the protected person's place of residence is/are:
8.	The name and address of any hospital or other institution where the protected person is now admitted on a temporary or permanent basis is:
9.	The protected person's physical condition is as follows:
10.	The protected person's mental condition is as follows:
11.	I made the following contacts with the protected person during the past year:
12.	I made the following major decisions on the protected person's behalf during the past year:
13.	I believe the guardianship (should/should not) continue because:
14.	At the time of my last report, I held the following amount of money on behalf of the protected person: \$ Since my last report, I have received the following amount of money on behalf of the protected person: \$ I spent the following amount of money on behalf of the protected person: \$ I now hold the following amount of money on behalf of the protected person: \$ (Attach itemized list of receipts and expenditures).

	day of
SCRIBED AND SWORN TO before this	day of
SCRIBED AND SWORN TO before this	-
	Guardian signature
I,, bein (print name)	ng first duly sworn, say that the above statements are tr
ty of Linn)	
TE OF OREGON)	Guardian's signature
Dated this day of	
rstand it is made for use as evidence in co	
eby declare that the above statements are	true to the best of my knowledge and belief, and t
	following powers over the protected person for e of person and powers delegated):
(d) I have had my driver's license revoked	or suspended (yes or no):
(yes or no):	nal license revoked or suspended (yes or no):
(b) I have theu for or received protection i	
(b) I have filed for or received protection f	crimes (not including traffic violations):
Since my last report: (a) I have been convicted of the following (b) I have filed for or received protection f	