

Superior Court of Washington, County of _____

In re Guardianship/Conservatorship of:

Individual

No.
**Emergency Guardian/Conservator's
Report and Motion to Close or
Extend**
(RPT)

Emergency Guardian/Conservator's Report and Motion to Close or Extend

The guardian or conservator requests the court approve the report and [] extend [] close the guardianship/conservatorship.

1. Identity of Emergency Guardian/Conservator and Individual Subject to Guardianship/Conservatorship

	Individual	Guardian/Conservator
Full Name		
Mailing Address		
City & State		
Zip Code		
*Telephone		
*Fax Number		
Email		
Age		

2. Date of Appointment and Reporting Period

The Emergency guardian/conservator was appointed on (date) _____

This report covers the period from _____ through _____

3. Notice Parties

(List each person whom the court has designated to receive copies of reports.)

Name	Mailing Address	Relationship to Individual

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4. Bond and Blocked Accounts

There is or is not currently a bond in place in the amount of \$ _____
(Bond No.): _____).

The total assets in blocked accounts is \$ _____.

The total assets in unblocked accounts is \$ _____.

5. Guardian/Conservator Fees

The guardian/conservator is requesting approval of fees and costs in the amount of \$ _____ for the period of _____ through _____ to be paid as follows _____. The guardian/conservator has attached to this report (or has filed with this report) a separate itemized fee declaration that describes in detail the services rendered, the time period that services were provided, the time required to provide services, the requested rate of compensation, and the out-of-pocket costs incurred.

6. Specific and updated information regarding the emergency alleged in the emergency petition

7. Individual's Emergency Needs

8. Actions and decisions by the emergency guardian/conservator

9. Recommendations as to whether a guardian/conservator should be appointed

10. Extend Emergency Guardianship/Conservatorship

Does not apply.

The emergency guardianship/conservatorship should be extended another 60 days because: _____

Respondent's continuing emergency needs are: _____

11. Other

12. The guardian/conservator requests that the court enter an Order as follows:

- Approval of Report: Approving this proposed Report of guardian/conservator.
- Extend the emergency guardian/conservator appointment an additional 60 days.
- Close the emergency guardianship/conservatorship in _____ days.
- Direct (Name) _____ to file a *Petition to Appoint a Guardian/Conservator*.
- Other Order: For any other Order that the court deems appropriate.

I declare under penalty of perjury under the laws of the State of Washington that the statements in this report are true and correct, that I hereby petition the court for approval of same.

Signed at (city) _____, (state) _____, on (date) _____

Signature

Print Name WSBA CPG#