

Name of Person Filing: _____
 Mailing Address: _____
 City, State, Zip Code: _____
 Daytime Phone Number: _____
 Evening Phone Number: _____
 Attorney Bar Number (if Applicable) _____
 Representing: Self or Attorney for _____

**SUPERIOR COURT OF ARIZONA
 MOHAVE COUNTY**

In the Matter of the (check one or both)
 Guardianship and/or Conservatorship of:

Case No: _____

PETITION FOR APPROVAL OF

**ANNUAL ACCOUNTING OF
 CONSERVATOR**
 _____ (date due)

_____ an Adult a Minor

AND/OR
 FEE STATEMENT

INSTRUCTIONS: For approval of annual accounting, put a check mark in boxes 1, 2, 3 and complete number 1:

1. This accounting covers the period from _____ (date) to _____ (date) and is due on _____ (date)
2. Attached is a correct statement of all financial dealings I had on behalf of the ward or protected person during this accounting period. The summary of all financial transactions I conducted or allowed on behalf of the ward or protected person during this period of time are fully described, itemized, and summarized on the attached pages. I request that the Court enter an order approving this annual accounting. (Be sure to attach the accounting.)
3. Attached is a copy of the Estate Management Plan.

INSTRUCTIONS: For approvals of fee statements, put a check mark in box number 4:

4. Attached is a copy of the Fee Statement for which I request approval too. (If you check this, attach the Fee Statement.)

OATH OR AFFIRMATION

STATE OF ARIZONA)
 County of Mohave) ss.

I, the Petitioner, declare under penalty of perjury, that I have read this Petition. All the statements in the Petition are true and correct and complete to the best of my knowledge and belief.

SIGNATURE: _____ DATE: _____

Sworn to or affirmed before me this _____ day of _____, _____

by _____.

My Commission Expires: _____

 Notary Public / Deputy Clerk