

Person Filing: _____
 Address (if not protected): _____
 City, State, Zip Code: _____
 Telephone: _____
 Email Address: _____
 Lawyer's Bar Number: _____
 Licensed Fiduciary Number: _____

For Clerk's Use Only

Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

IN THE MATTER OF THE)
 CONSERVATORSHIP FOR)
)
)
 _____)
 (Protected Person's Name))
)
 a Minor an Adult)
)
 _____)

Case No.: PB _____

**SUBMISSION OF AND PETITION FOR
APPROVAL OF CONSERVATOR'S
FIRST ACCOUNT (FORM 6)**

- with BUDGET
- with Budget Amendment
- with Fee Statement

(Assigned to the Honorable: _____)

THE PETITIONER STATES UNDER OATH AS FOLLOWS:

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

1. This account covers the account reporting 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 account reporting 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 documents. I request that the Court enter an order approving this account.
3. Unless otherwise ordered by the court, I have attached the REQUIRED DOCUMENTS in the following order:
 - SCHEDULE 1: Statement of Receipts and Disbursements
 - WORKSHEET A: Other Receipts and Disbursements Detail
 - Amended Budget (if applicable)
 - SCHEDULE 2: Statement of Net Assets and Reconciliation
 - WORKSHEET B (if applicable): Other Inventory and Liabilities Detail

- SCHEDULE 3: Statement of Sustainability of Conservatorship
- WORKSHEET C (if applicable): Adjustments Detail
- Financial Statements, which include the account balance at the end of the account reporting period, for each financial account.
- Transaction Log, detailing all financial transactions during the account reporting period just ended, reported by category.

INSTRUCTIONS: For approval 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. (If you check this box, attach the Fee Statement.)

Subscribed and sworn to before me this _____ day of _____, _____, by Petitioner.

My Commission Expires:

NOTARY PUBLIC:

CONSERVATOR’S CERTIFICATION

I, the undersigned, acknowledge that I have read and reviewed this form, accompanying schedules, and attached supplements, and after reasonable inquiry have a good faith belief that the information in this report is true, accurate and complete to the best of my knowledge and belief.

Conservator’s Signature

Date

Conservator’s Name (Type or Print Name)