

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
Guardianship and/or Conservatorship for:

Case Number: PB _____

VERIFICATION OF RECORDING

(Check one box)

_____ an Adult a Minor

Guardianship Conservatorship
 Guardianship and Conservatorship

1. **NOTICE IS GIVEN** that I, the (Check at least one box) Guardian Conservator have Recorded/Filed the Letters of Appointment with the Office of the County Recorder of (Check at least one of the following boxes) Maricopa, other county _____.

2. **RECORDING.** A copy of the recorded Letter of Appointment attached hereto was recorded as follows:

DATE and TIME: _____

PLACE: _____

OTHER: _____

3. UNDER OATH OR BY AFFIRMATION

I swear or affirm under penalty of perjury that the contents of this document are true and correct to the best of my knowledge and belief.

Date

Petitioner's Signature

STATE OF _____

COUNTY OF _____

Subscribed and sworn to or affirmed before me this: _____
(date)

By _____.

(notary seal)

Deputy Clerk or Notary Public