

Person Filing: _____

Address (if not protected): _____

City, State, Zip Code: _____

Telephone: _____

Email Address: _____

Lawyer's Bar Number: _____

Licensed Fiduciary Number: _____

Representing Self, without a Lawyer or Attorney for _____



SUPERIOR COURT OF ARIZONA
IN MARICOPA COUNTY

In the Matter of

Case Number: _____

A Minor or former Minor (Subject Person)

PETITION TO:
TERMINATE CONSERVATORSHIP OF
A MINOR AND RELEASE RESTRICTED
FUNDS

1. Information about the person appointed Conservator:

Name of Conservator: _____

Date of Appointment: _____

Conservator's Address: _____

2. Information about the Subject Person: (the person for whom the Conservator was appointed)

Name of Subject Person _____

Date of Birth _____

3. Reason for termination of the conservatorship: (check one box)

The Subject Person reached the age of 18, on _____ (date).
One of the following documents is attached as proof of the Subject Person's age:

A copy of the Subject Person's birth certificate; or

A copy of the Subject Person's driver's license.

OR

The Subject Person was emancipated, on _____ (date).

OR

The need for the Conservatorship has terminated because the Subject Person has died.
The date of death was _____(Attach copy of death certificate)

4. Restricted funds:

Information about the current restricted account

Amount now in restricted account: \$_____

Financial Account number: _____

Name and address of financial institution:

If there is more than one restricted account, information about additional restricted accounts is listed on an attached page.

5. Statement about restricted funds:

Have you made previous withdrawals from this or any other restricted account without a written order of this Court?

No

Yes (If yes, explain carefully; give details about amount, date, reason, for each withdrawal):

6. Request regarding restricted funds: (check one box)

I ask that the Subject Person's restricted funds be released to them in this matter because they are now an adult entitled to control the funds currently held for their benefit by the Conservator.

I ask that the Subject Person's restricted funds be released to their estate because the Subject Person has died.

Other (Explain): _____

7. Therefore, I ask, the Court to enter an order terminating the Conservatorship, discharging the Conservator, and directing the release of funds as requested in the Petition

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.

Petitioner's Signature
(May be the Subject Person, if 18 or older)

Date

STATE OF _____

COUNTY OF _____

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

by _____.

(notary seal)

Deputy Clerk or Notary Public

Subject Person's Signature
(if not same as Petitioner)

Date

STATE OF _____

COUNTY OF _____

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

by _____.

(notary seal)

Deputy Clerk or Notary Public