

Person Filing: _____
Physical Address (if not protected): _____
City, State, Zip Code: _____
Mailing Address: _____
Telephone: _____
Email Address: _____
Licensed Fiduciary Number: _____
Representing Self, without a Lawyer



**SUPERIOR COURT OF ARIZONA
IN YAVAPAI COUNTY**

**In the Matter of the
Guardianship of:**

CASE NUMBER: _1300GC_____

**AMENDED LETTERS OF
APPOINTMENT AS PERMANENT**

Person in Need of Protection

Guardian of an Adult
[] General or [] Limited

**[] A minor at least 17.5 years of age, to
become effective at age 18**

HONORABLE: _____

ISSUANCE OF LETTERS:

- 1. This person is appointed: (name) _____**
as Guardian for the above captioned [] adult or [] minor at least 17.5 years of age, to
become effective at age 18.
- 2. Reasons for Appointment:** The above captioned person in need of protection is an
incapacitated ward.
- 3. Length of Appointment:** until further order of this court order, or _____.
- 4. Restrictions that apply to this permanent appointment by order of the court:**

