	Name:		
Your Address: Your City, State, Zip Code: Your Telephone Number: Attorney Bar Number (if applicable): Representing  Self or  Attorney for			FOR CLERK'S USE ONLY
		COURT OF ARIZONA VAPAI COUNTY	
In the Matter of the Guardianship And/or Conservatorship of:  Adult Minor		NO: 1300GC PROOF OF NOTICE REGARDING DISCI	OF HEARING
		TERMINATION and/or RELEASE of FUNDS in a:	
		☐ GUARDIANSHIP and CO☐ GUARDIANSHIP (only)☐ CONSERVATORSHIP (	
that	DER OATH OR BY AFFIRMATION: the contents of this document are true a	and correct.	
1.	<ul> <li>I PROVIDED COPIES OF THE F</li> <li>□ PETITION for Appointment/Disc Guardianship and/or Conservator</li> </ul>	charge of Guardian and/or Conse	
	☐ NOTICE OF HEARING		
	OTHER (if applicable) List specifically	each court document you provided.	
2.	Relationship to person:  Date I gave the documents:  How I gave the documents ch	eck at least one box and complete t "Affidavit of Service" or of process e prepaid	the information: server or sheriff)

В.	Name:
	Relationship to person:
	Date I gave the documents:
	How I gave the documents check at least one box and complete the information:  Personal service (File "Affidavit of Service" or of process server or sheriff)  1st class mail, postage prepaid  Certified mail  Registered Mail (attach green return receipt card to this paper if applicable)  Hand delivery by (name)
C.	Name:
0.	Relationship to person:
	How I gave the documents check at least one box and complete the information:  Personal service (File "Affidavit of Service" or of process server or sheriff)  1st class mail, postage prepaid  Certified mail Registered Mail (Attach green card to this paper if applicable)  Hand delivery by (name)
D.	Nama
D.	Name:Relationship to person:
	Date I gave the documents:
	How I gave the documents check at least one box and complete the information:  Personal service (File "Affidavit of Service" or of process server or sheriff)  1st class mail, postage prepaid  Certified mail Registered Mail (Attach green card to this paper if applicable)  Hand delivery by (name)
	AFFIRMATION: By signing below I state to the Court under penalty of perjury that the nis document are true and correct to the best of my knowledge and belief.
Date	Signature
Affirmed befor	e me thisday of, 20
My commissio	n expires:
Or Seal, below	