

SUPERIOR COURT OF ARIZONA IN PINAL COUNTY
Probate / Guardian / Conservator Information Sheet

IN THE MATTER OF: _____
(Please Print)

Case Number: _____ Date: _____

Description of Proposed Fiduciary / Guardian / Conservator (The person to be appointed Guardian / Conservator OR person seeking appointment as Personal Representative of the estate of someone who died)

Name: (First / Middle / Last)	Date of Birth:
Mailing Address:	Social Security Number:
Physical Address:	Race:
Home telephone:	Height: Weight:
Work Telephone:	Hair Color: Eye Color:
Relationship to Proposed Ward or Deceased:	
Fiduciary Certification No.	

Information about the Person Needing Protection (Minor or Incapacitated Adult)

Name of Person Needing Protection: (First / Middle / Last)	Date of Birth:
Mailing Address:	Social Security Number:
Physical Address:	Home Telephone:

If concerning an Estate matter (Information of the Decedent, Person Who Died)

Decedent's Name: (First / Middle / Last)	Decedent's Date of Birth:
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I state to the court that the information I have provided is true and correct, under penalty of perjury.

(Petitioner or Attorney Signature)

NOTICE: This document is used by the Court for administrative purposes only and may be maintained in electronic form. **It is not part of the public record.**