Person Filing: _____

_____

Mailing Address: _____
City, State, Zip: _____
Phone Number: _____
Representing Self

IN THE SUPERIOR COURT OF ARIZONA, COUNTY OF COCONINO

In the Matter of the Guardianship and/or Conservatorship of:

Case Number: GC_____

PETITION TO DISCHARGE THE:

Ward 1: _____
Ward 2: _____
Ward 3: _____
A Minor

[ ] GUARDIAN
[ ] CONSERVATOR
[ ] GUARDIAN AND CONSERVATOR

STATEMENTS TO THE COURT:

Birthdate of Ward 1: _____ Ward 2: _____ Ward 3: _____
I want the court to discharge the guardian and/or conservator of Ward: [ ] 1 [ ] 2 [ ] 3.
Guardian and/or Conservator's Name: _____ _____
If I am the guardian, a Guardian's Report is attached. If I am the conservator, a Conservator's Accounting Upon Discharge and Final Accounting are attached.
Name of Other Guardian and/or Conservator Not Seeking Resignation: _____

Termination of Guardianship Upon the Parent's Withdrawal of Consent:
[ ] I am the ward's parent. I signed a consent to the guardianship. Now I withdraw that consent.

Termination Upon the Guardian's and/or Conservator's Request:
I am the guardian. Guardianship should terminate because:
The ward has: [ ] turned 18 [ ] died [ ] married [ ] been adopted.
[ ] The parent withdrew consent.
[ ] Other: _____
I am the conservator. Conservatorship should terminate because:
The ward has: [ ] turned 18 [ ] died.
[ ] Other: _____
Proof of the terminating event is attached.

Resignation of the Guardian and/or Conservator:
I am the guardian and/or conservator, and I submit my resignation because:

_____

Venue: This court appointed the guardian and/or conservator.

Another Court Has Held a Hearing on This Guardianship and/or Conservatorship:
Court Name: _____ Case Number: _____
Case Name: _____
Judge's Name: _____ Judge's Phone Number: _____

Ward's Attorney:
Name: _____ Phone Number: _____
Street Address: _____ City, State, Zip: _____

Restricted Accounts:

Bank or Institution Name	Name on Account	Account Description	Value
_____	_____	_____	$_____
_____	_____	_____	$_____
_____	_____	_____	$_____

PEOPLE ENTITLED TO NOTICE:

Enter the name and address of 1) the ward over 13 and 2) their guardian other than you. If you want to end guardianship only, leave the rest of the table blank. Otherwise, also enter the name and address of 3) the ward's living parents, 4) the ward's closest adult relative if you can find no parent, spouse, or child over 17, 5) the ward's conservator other than you, 6) people having care or custody of the ward, 7) people who filed a demand for notice, 8) the ward's children over 17, and 9) the ward's spouse.

	WARD 1	WARD 2	WARD 3
THE WARD OVER 13			
NAME:	_____	_____	_____
Street Address:	_____	_____	_____
City, State, Zip:	_____	_____	_____
THEIR MOTHER			
NAME:	_____	_____	_____
Street Address:	_____	_____	_____
City, State, Zip:	_____	_____	_____
THEIR FATHER			
NAME:	_____	_____	_____
Street Address:	_____	_____	_____
City, State, Zip:	_____	_____	_____
THEIR CLOSEST ADULT RELATIVE			
NAME:	_____	_____	_____
Street Address:	_____	_____	_____
City, State, Zip:	_____	_____	_____

	WARD 1	WARD 2	WARD 3
THEIR GUARDIAN AND/OR CONSERVATOR			
NAME:	_____	_____	_____
Street Address:	_____	_____	_____
City, State, Zip:	_____	_____	_____
NAME:	_____	_____	_____
Street Address:	_____	_____	_____
City, State, Zip:	_____	_____	_____
PEOPLE HAVING CARE OR CUSTODY OF THEM			
NAME:	_____	_____	_____
Street Address:	_____	_____	_____
City, State, Zip:	_____	_____	_____
NAME:	_____	_____	_____
Street Address:	_____	_____	_____
City, State, Zip:	_____	_____	_____

	PEOPLE WHO FILED A DEMAND FOR NOTICE	THE WARD'S CHILDREN OVER 17
NAME:	_____	_____
Street Address:	_____	_____
City, State, Zip:	_____	_____
NAME:	_____	_____
Street Address:	_____	_____
City, State, Zip:	_____	_____

THE WARD'S SPOUSE

NAME: _____
Street Address: _____
City, State, Zip: _____

REQUESTS TO THE COURT:

1. Schedule a hearing to discharge the guardian and/or conservator.
2. Appoint a successor guardian and/or conservator if needed.
3. For each restricted account, direct the bank or financial institution to release the funds to the ward or transfer them to the successor conservator.

I have read this Petition, and it is true and complete to the best of my knowledge.

Guardian and/or Conservator's Signature: _____

State of Arizona)
)
County of _____)

Subscribed and sworn before me this date: _____ by: _____

Seal: Notary Public: _____
Notary Expiration Date: _____

I have read this Petition, and it is true and complete to the best of my knowledge.

Guardian and/or Conservator's Signature: _____

State of Arizona)
)
County of _____)

Subscribed and sworn before me this date: _____ by: _____

Seal: Notary Public: _____
Notary Expiration Date: _____

I have read this Petition, and it is true and complete to the best of my knowledge.

Parent's Signature: _____

State of Arizona)
)
County of _____)

Subscribed and sworn before me this date: _____ by: _____

Seal: Notary Public: _____
Notary Expiration Date: _____