

Note: file only upon death of incapacitated person

No. \_\_\_\_\_

IN THE MATTER OF  
THE GUARDIANSHIP OF

IN THE COUNTY COURT OF  
SCURRY COUNTY TEXAS

\_\_\_\_\_,  
AN INCAPACITATED PERSON

### GUARDIAN OF THE PERSON'S FINAL REPORT

I, \_\_\_\_\_, represent that I am the guardian of  
\_\_\_\_\_, who is referred to herein as the Incapacitated Person  
or "IP" and that my Final Report to the Court is as follows:

1. The IP died on \_\_\_\_\_ (date of death).
2. The IP died at \_\_\_\_\_ (place of death).  
Please attach death certificate if available.
3. Did the IP have a Will? Yes or No. Has a personal representative been appointed? Yes or No.  
If yes, list name \_\_\_\_\_ address \_\_\_\_\_  
\_\_\_\_\_ and phone : \_\_\_\_\_
4. Is any of the IP's personal property still in your possession? Yes or No. If no, to whom did you distribute the Ward's personal property? Name \_\_\_\_\_  
Address \_\_\_\_\_  
And phone: \_\_\_\_\_

I swear that the answers set forth above are correct to the best of my knowledge and that I am giving such answers subject to the penalties of making a false affidavit. I hereby request the Court to close this guardianship, to discharge me as guardian of the person and to release me and the sureties on my bond.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Telephone number

SWORN TO AND SUBSCRIBED before me by \_\_\_\_\_  
\_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
Notary Public, State of \_\_\_\_\_