

IN THE CIRCUIT COURT OF THE FOURTEENTH JUDICIAL CIRCUIT
ROCK ISLAND COUNTY, ILLINOIS
PROBATE DIVISION

In Re: _____)
))
)) No. _____
))
A Disabled Person (Minor) _____)

ANNUAL REPORT ON WARD (Minor)

I, (*Name of Guardian*) _____, Guardian of the Person of the above-named ward, submit the annual report as follows:

1. Age and current condition of the ward:

2. Present living arrangement of the ward (and his/her children):

3. Medical, educational, vocational, and other professional services provided to the ward by others:

4. Guardian's activities on behalf of the ward (and his/her minor children):

5. Appropriateness of placement:

6. Recommendation as to the need for continued guardianship:

By: _____
Guardian of the Person

Attorney or Representative(s):

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____