

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: \_\_\_\_\_