

THE HANDBOOK FOR GUARDIANS AND CONSERVATORS

Court in and for _____ County, New Mexico, and the Seal of said Court, this _____ day
of _____, 19__.

CLERK OF THE DISTRICT COURT

By: _____
Deputy

(SEAL)

Form 2—Acceptance of Appointment in Court Proceeding

Note: This form is for someone who is appointed both guardian and conservator for another. The language in this document will be modified if a person is appointed only as a guardian or conservator.

_____ JUDICIAL DISTRICT COURT
COUNTY OF _____
STATE OF NEW MEXICO

PB. No. _____

IN RE THE PROTECTIVE PROCEEDING
FOR _____, AN ADULT
INCAPACITATED PERSON.

ACCEPTANCE OF APPOINTMENT AS GUARDIAN AND CONSERVATOR

STATE OF NEW MEXICO)
) ss.
COUNTY OF _____)

I hereby accept the duties of guardian of _____ and conservator of her/his estate and do solemnly swear that I will perform said duties, according to law.

NAME
(address)
(phone)

Appendix—Forms

SUBSCRIBED AND SWORN TO before me this _____ day of
_____, 19____.

NOTARY PUBLIC

My Commission Expires:

Form 3—Sample Notice Letter from Guardian

Date

Name
Address
City State Zip

Re: Guardianship of the Person of _____, also known as

Ward's Birthdate:

Ward's Social Security Number:

Dear _____,

Please be advised that I have been appointed guardian of _____. I have enclosed a copy of the Letters of Guardianship for your files. Please contact me about any of _____'s health issues.

Sincerely,

Name
Address
City, State, Zip
Phone

Enclosure

Form 4—Sample Notice Letter from Conservator

Date

Name
Address
City State Zip

Re: Conservatorship of the Estate of _____, also known as

Conservatee's Birthdate:

Conservatee's Social Security Number:

Dear _____,

Please be advised that I have been appointed conservator of the estate of _____. Please have all future checks [this letter will vary, depending on what it is being used to do] made out to me _____, Conservator of the Estate of _____. I have enclosed a certified copy of the Letters of Conservatorship for your files. Please contact me about any of _____'s financial matters at the address listed on this letter.

Sincerely,

Name
Address
City, State, Zip
Phone

Enclosure

Form 5—Sample Inventory of Assets

[# OF DISTRICT] JUDICIAL DISTRICT COURT
COUNTY OF **[NAME OF COUNTY]**
STATE OF NEW MEXICO

No. **[case number]**

IN RE THE GUARDIANSHIP AND CONSERVATORSHIP
FOR **[NAME OF CONSERVATEE]**, AN ADULT
INCAPACITATED PERSON.

INVENTORY OF ESTATE
PURSUANT TO 45-5-418 NMSA 1978

[NAME OF CONSERVATOR], conservator for **[NAME OF CONSERVATEE]**, states that the following represents all of the property owned by **[NAME OF CONSERVATEE]** as of **[DATE OF APPOINTMENT AS CONSERVATOR]**, which has come to the knowledge of the aforesaid named conservator. The estimated value of the property as of **[DATE OF APPOINTMENT AS CONSERVATOR]**, is shown, together with encumbrances thereon:

ASSETS AND INCOME OF [NAME OF CONSERVATEE]:

<u>Description of Asset:</u>	<u>Value:</u>
------------------------------	---------------

<u>Income:</u>	<u>Amount:</u>
----------------	----------------

[NAME, ADDRESS, AND TELEPHONE
NUMBER OF CONSERVATOR]

Date: _____

VERIFICATION

I, the undersigned, state upon oath that I have reviewed the foregoing Inventory of the Estate of [NAME OF CONSERVATEE], and that it is complete and accurate as far as I am informed.

[NAME, ADDRESS, AND TELEPHONE
NUMBER OF CONSERVATOR]

SUBSCRIBED AND SWORN to before me this _____ day of _____,
20__, by [NAME OF CONSERVATOR].

Notary Public

My Commission Expires:

Form 6—Sample Conservator's Report

Note: This form is for someone who is appointed only conservator for another. The language in this document can be modified by

combining Forms 6 and 7 if a person is appointed as both guardian and conservator.

[# OF DISTRICT] JUDICIAL DISTRICT COURT
COUNTY OF [NAME OF COUNTY]
STATE OF NEW MEXICO

No. [case number]

IN RE THE CONSERVATORSHIP FOR
[NAME OF CONSERVATEE], AN ADULT
INCAPACITATED PERSON.

CONSERVATOR'S REPORT

Pursuant to Section 45-5-409 NMSA 1978, the undersigned duly appointed, qualified and acting conservator of the above-mentioned protected person reports to the court as follows:

1. My name is: _____

2. My address and telephone number is: _____

3. The name, if applicable, and address of the place where the person under conservatorship now resides are: _____

_____.

4. The name of the person primarily responsible for the care of the person under conservatorship at such person's place of residence is:

5. The name and address of any hospital or other institution where the person under conservatorship is now admitted on a temporary basis are:

6. A brief description of the physical condition of the person under conservatorship is: _____

7. A brief description of the mental condition of the person under conservatorship is:

8. A description of contracts entered into on behalf of the person under conservatorship during the past year: _____

THE HANDBOOK FOR GUARDIANS AND CONSERVATORS

9. Describe all financial decisions made during the past year including how all income was distributed, any sale, lease or mortgage of estate assets and any investment made on behalf of the person under conservatorship:

10. The reasons, if any, why the conservatorship should continue are:

Conservator's Account of Administration

The undersigned conservator hereby sets forth the following summary of receipts and disbursements of the estate during the period from ____ to ____ **[REPORTING PERIOD]**:

A. Assets of the estate as of **[BEGINNING DATE OF REPORTING PERIOD]**:

B. Receipts of estate from _____ to _____ **[REPORTING PERIOD]:**

C. Disbursements from estate from _____ to _____ **[REPORTING PERIOD]:**

D. Assets of estate as of **[LAST DAY OF REPORTING PERIOD]**:

**[NAME, ADDRESS, AND TELEPHONE
NUMBER OF CONSERVATOR]**

Date: _____

Form 7—Sample Guardian’s Report

Note: This form is for someone who is appointed only guardian for another. The language in this document can be modified by combining Forms 6 and 7 if a person is appointed as both guardian and conservator.

[# OF DISTRICT] JUDICIAL DISTRICT COURT
COUNTY OF [NAME OF COUNTY]
STATE OF NEW MEXICO

No. [case number]

IN RE THE GUARDIANSHIP FOR
[NAME OF WARD], AN ADULT
INCAPACITATED PERSON.

GUARDIAN'S REPORT

Pursuant to Section 45-5-314 NMSA 1978, the undersigned duly appointed, qualified and acting guardian of the above-mentioned incapacitated person reports to the court as follows:

1. My name is: _____.

2. My address and telephone number are: _____

_____.

3. The name, if applicable, and address of the place where the incapacitated person now resides are: _____

_____.

4. A description of the incapacitated person's place of residence and of programs, activities or services in which the incapacitated person is involved is as follows:

5. The name of the person primarily responsible for the care of the incapacitated person at such person's place of residence is: _____.

6. The name and address of any hospital or other institution where the incapacitated person is now admitted on a temporary basis are:

7. A brief description of the incapacitated person's physical condition is:

8. A brief description of the incapacitated person's mental condition is:

9. A brief description of contracts made on behalf of the incapacitated person during the past year is: _____

_____.

10. A brief description of major decisions made on the incapacitated person's behalf during the past year is:

_____.

11. The reasons, if any, why the guardianship should continue are:

_____.

Signature of Guardian: _____

Date: _____