

Insert Court Examiner's name

**EXAMINER'S REPORT
ON ANNUAL REPORT OF GUARDIAN,
COMMITTEE OR CONSERVATOR*
(MHL § 81.31)**

Name of Incapacitated Person: _____

Name of Guardian*: _____

Index No.: _____

Name of Judge or Justice Appointing Guardian: _____

Date of Order/Judgment Appointing Guardian: _____

Period of Accounting: January 1 - December 31, 2_____

Date of filing of Guardian's Annual Report: _____

Date of filing of Guardian's Last Annual Report: _____

Reporting Guardian is: _____ Guardian of both Person and Property
_____ Guardian of Person only
_____ Guardian of Property only

If the reporting Guardian is only of the person, there _____ is or _____ is NOT also a guardian of the property.

Have you _____ approved or _____ not approved the guardian's report?

* As used in this report, the term "guardian" shall also be deemed to refer to committees or conservators appointed prior to April 1, 1993.

I - GENERAL

1. Does the annual report provide all of the information concerning the incapacitated person required by § 81.31 (b) (1) - (5) of the Mental Hygiene Law (MHL)?

Yes _____ No _____

If not, in what respect is the report deficient?

2. Has guardian discharged the duty to visit the incapacitated person at least four times a year as required by MHL § 81.20 (5) (a)?

Yes _____ No _____

If not, please explain.

II - PERSONAL NEEDS

Complete this section only if guardian has been granted powers with respect to personal needs.

3. To the extent that the guardian is charged with providing for personal needs, does the report contain each of the following items required by § 81.31 (b) (6) of the MHL?
- a. statement as to whether current residential setting is best suited to the current needs of the incapacitated person? Yes _____ No _____
 - b. summary of professional medical treatment given to the incapacitated person in preceding year. Yes _____ No _____
 - c. plan for medical, dental and mental health treatment, and related services for coming year. Yes _____ No _____

- d. information concerning the social condition of the incapacitated person (see MHL § 81.31 [b] [6] [iv]). Yes ____ No ____

If not, in what respects is the report deficient?

III - PROPERTY MANAGEMENT

Complete this section only if guardian has been granted powers with respect to property management.

4. To the extent the guardian is charged with property management, does report contain an accounting of the property of the incapacitated person as required by § 81.31 (b) (7) of the MHL?

Yes ____

No ____

5. Provide the following figures from the guardian's accounting:

a. Value of estate as of date of last report \$ _____

b. Income received \$ _____

c. Disbursements paid \$ _____

d. Closing balance of estate \$ _____ **

**Any concerns or explanations regarding the accounting should be set forth in your response to Question 6 below.

6. Is the examiner satisfied that the accounting is accurate and complete and have all items of income and disbursement been satisfactorily verified by bank statements, bills, receipts, cancelled checks and the like?

Yes ____

No ____

If not, please explain

IV - TERMINATION OR ALTERATION OF POWERS

7. Does the report contain any facts indicating a need to terminate the guardian's appointment or to alter the guardian's power?

Yes _____

No _____

If yes, please explain:

8. If report indicates any reason for a change in powers authorized by the Court, has guardian made application within 10 days of filing of report as required by MHL § 81.31 (e)?

Yes _____

No _____

If application has not been made, please explain briefly.

COMPENSATION

9. Examiner's compensation is governed by 22NYCRR 806.17 (c). Attach request for payment of reasonable and necessary disbursements. In estates of \$5000.00 and under, submit a standard state voucher.

Date of this Report

(your signature)

(your name and address)
