Case Number:_____

COMPLAINT ABOUT A GUARDIAN OR CONSERVATOR

ROA: CGCO- Complaint about a Guardian or Conservator

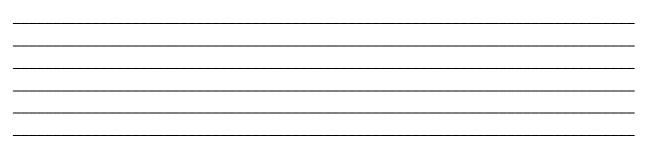
Please answer each question. If you do not know the answer or it is not applicable please write "Unknown" or "N/A." The court may not review this complaint if you do not fill in each blank.

Ward

Name of Ward:				
County where case is filed:	Case Numb	er:		
(Note: You can check the iCourt Porta	al if above is unknown: <u>https://m</u>	vycourts.idaho.gov	v/odysseyportal)	
Complainant				
Your Name:				
Your Address:				
Your Phone Number ()	Your Email:			
Your relationship to the ward or to the case:				
Guardian or Conservator				
Type of Case: 🛛 Guardianship	Conservatorship	I	🗆 Both	
Name of Guardian or Conservator				
Guardian or Conservator Address:				
Phone Number <u>()</u>	Email:			
Description of your complaint				
Have you notified or sent a complaint to other authorities?		□ Yes	□ No	
If yes, include the name of the aut staff, law enforcement, Attorney of you complained or sent complaint	General's Office, Idaho State B			

Attach a copy of the complaint, if any.				
Is the ward aware of your concern?				
🗆 Yes	□ No	If yes, what was the ward's response?		
Have you discussed your concerns with the guardian or conservator?				
🗆 Yes	🗆 No	If yes, what was the response?		

Briefly describe how the guardian or conservator has failed to comply with his or her statutory duties and responsibilities. Describe what the guardian or conservator did or did not do, what they said, or any other actions of the guardian/conservator you are concerned about. Be as specific as possible and include dates, times, and places. Please attach copies of relevant documents, such as court orders, petitions, letters to the ward, etc.



Consent and Affirmation

I understand that the filing of a complaint constitutes my consent to the disclosure of the content of my complaint to the appointed guardian or conservator, judicial officers, and others. I understand that my complaint will be filed in the court file.

I certify (or declare) under penalty of perjury pursuant to the law of the State of Idaho that, to the best of my knowledge, the aforementioned is true and correct.

Date

Name

Mail or deliver completed form to the courthouse located in the county where the case is filed. A list of mailing addresses can be found at: <u>www.isc.idaho.gov.</u> Please keep a copy of this complaint for your records. The court may not review this complaint if you fail to complete this form in its entirety.