

Address(es) and Phone(s): _____

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Siblings:_____

Address(es) and Phone(s):_____

Next of Kin:_____

Address(es) and Phone(s):_____

Friends:_____

Address(es) and Phone(s):_____

This person does / does not have a guardian in Texas.

This person is / is not a resident of Brazoria County. (If not, is the person located in Brazoria County?_____)

The person has / has not executed a Power of Attorney. (If so, to whom? _____)

The nature and degree of the person's incapacity is as follows: _____

I am aware of the following facts that indicate that the person needs a guardian:

The person has the following assets and income:

Home /

Value:_____

Bank Accounts /

Value:_____

Stocks & Bonds /

Value:_____

Other Assets /

Value:_____

Monthly Income /

Source:_____

Is the person in imminent danger of serious impairment to his / her physical health or safety unless immediate action is taken? Yes / No If yes, explain: _____

Is the person in imminent danger of having his / her estate seriously damaged or dissipated unless immediate action is taken? Yes / No If yes, explain: _____

I hereby swear that this information is true and correct to the best of my knowledge.

Signed,

Name:_____

Address:_____

Phone No.:_____