

**STATE OF MICHIGAN
IN THE PROBATE COURT FOR THE COUNTY OF MACOMB**

In the Matter of _____, an alleged incapacitated person

File No. _____-GA

_____ /

REPORT AND RECOMMENDATION OF GUARDIAN AD LITEM

This matter is before the Court on a Petition filed by _____ [*relation to proposed ward*] and proposed guardian of _____. I was appointed guardian ad litem pursuant to this Court's Order dated _____.

I. SERVICE ON ALLEGED INCAPACITATED PERSON. I personally served the Alleged Incapacitated Person with a copy of the Petition and Notice of Hearing at [address] on _____, 2019 at _____ .m.

II. INTERESTED PERSONS The interested persons in this matter are as follows:

<i>[Name</i>	<i>Relationship to the Ward]</i>
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III. INTERVIEWS

(A) [Ward]. On _____ I personally visited _____ at _____. _____ is ___ years old and suffering from _____. [*provide brief background on proposed ward*].

When I met with _____, [*describe your visit with the proposed ward, and any other relevant information*].

When I explained the purpose of my visit, _____ stated that [*whether proposed ward agrees to guardianship/conservatorship, whether they request an attorney, etc*].

_____ 's condition is not the result of an automobile accident.

(B) [family interviews].

(C) [medical professional interview].

IV. ALLEGED INCAPACITATED PERSON'S ASSETS/LIABILITIES

_____ confirmed that _____ has the following assets:

Social Security (per month)

\$ _____

Checking account Approx.

\$ _____

List any other assets with their values

Also include a completed MCPC Financial Review Form.

V. CONCLUSION AND RECOMMENDATION

[Your final comments] .

Therefore, based upon my investigation, I recommend that the petition for guardianship be GRANTED/DENIED.

I have complied with the requirements of MCLA 700.5305(1).

Date: _____

, Guardian ad litem