



Maine Elder Law Firm
A practice of **RUDMAN • WINCHELL**

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GUARDIANSHIP/CONSERVATORSHIP WORKSHEET

INFORMATION ABOUT PROTECTED/INCAPACITATED PERSON:

Full legal name: _____

Residence address: _____

Current location, if different from residence address: _____

Date of birth: _____ Social Security number: _____

Name of spouse: _____

If deceased, spouse's date of death: _____

Will the Protected/Incapacitated Person attend the hearing? Yes No

Is the Protected/Incapacitated Person currently represented by counsel? _____. If yes, state name, address, and phone number of counsel. _____

State name and address of examining physician and/or licensed psychologist: _____

INFORMATION ABOUT NOMINATED GUARDIAN/CONSERVATOR:

Full legal name: _____

Mailing address: _____

Email address: _____

Phone: home: _____ work: _____ cell: _____

Social Security number: _____

Relationship to Protected/Incapacitated Person: _____

**PROTECTED/INCAPACITATED PERSON'S PARENTS, DOMESTIC PARTNER,
ADULT CHILDREN, AND CURRENT GUARDIAN OR CONSERVATOR:**

<i>Full legal name</i>	<i>Date of birth</i>	<i>Mailing Address</i>	<i>Relationship</i>

ASSET INFORMATION FOR CONSERVATORSHIP

REAL ESTATE (*Provide copies of deeds and leases and recent property tax bills, if available*)

<i>Location</i>	<i>Deed reference</i>	<i>Tax Map/Lot</i>	<i>Estimated value</i>	<i>Mortgage</i>	<i>Co-owner</i>

BANK ACCOUNTS:

<i>Bank</i>	<i>Account #</i>	<i>Approximate balance</i>	<i>Co-owner</i>

STOCKS, BONDS, MUTUAL FUNDS:

<i>Broker</i>	<i>Account #</i>	<i>Approximate balance</i>	<i>Co-owner</i>

LIFE INSURANCE ON DECEDENT'S LIFE:

<i>Insurance company</i>	<i>Policy #</i>	<i>Policy amount</i>	<i>Owner of policy</i>	<i>Beneficiary</i>

LIFE INSURANCE OWNED BY DECEDENT ON LIFE OF ANOTHER PERSON:

<i>Insurance company</i>	<i>Policy #</i>	<i>Policy amount</i>	<i>Insured</i>

ANNUITIES:

<i>Company</i>	<i>Policy #</i>	<i>Policy amount</i>	<i>Beneficiary</i>

RETIREMENT ACCOUNTS: (IRA, 401(k), etc.)

<i>Account administrator</i>	<i>Account #</i>	<i>Approximate balance</i>	<i>Beneficiary</i>

VEHICLES, BOATS, PLANES:

<i>Make/Model/Year</i>	<i>Approximate value</i>	<i>Co-owner</i>

OTHER TANGIBLE PERSONAL PROPERTY:

(Collections, antiques, art work, farm equipment, jewelry, furniture, etc.)

<i>Description</i>	<i>Approximate value</i>	<i>Co-owner</i>

Is the Protected/Incapacitated Person the grantor or beneficiary of any trusts? _____

DOCUMENTS TO BRING TO INITIAL MEETING (if available):

- Copy of Will, if any
- If petitioning for Conservatorship: Current account statement for each of Protected/
Incapacitated Person's accounts
- Bank accounts
- Brokerage accounts
- Certificates of deposit
- IRA, 401(k) or other retirement account
- Life insurance policies
- Annuity policies
- Brokerage statements
- Stock certificates
- Vehicle title documents
- Copies of deeds or leases for real estate

Completed by: _____

Dated: _____

*Updated 05/8/2015