

IN THE TRIAL COURT OF THE  
SAC & FOX TRIBE OF THE MISSISSIPPI IN IOWA  
TRIBAL COURT  
Meskwaki Settlement  
307 Meskwaki Road  
Tama, Iowa 52339-9629

In Re the Guardianship of:

Court Case No.

\_\_\_\_\_   
D.O.B. \_\_\_\_\_

\_\_\_\_\_   
**Initial/Annual/Final  
Report of Guardian**

Ward.

The following report submitted to the Court is the:

- \_\_\_ Initial Report
- \_\_\_ Annual Report
- \_\_\_ Final Report

**NOW COMES** \_\_\_\_\_, Guardian of

\_\_\_\_\_, (name of ward) in the above case, and presents a report as  
of \_\_\_\_\_ (date) on the ward as follows:

1. Ward's Meskwaki Name: \_\_\_\_\_

Ward's Clan: \_\_\_\_\_

2. Ward's Age: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

3. Social Security Number: \_\_\_\_\_

4. Ward's Present Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

5. Give a description of the present living arrangements of the ward, including a  
description of each residence where the ward has resided during the reporting period.

\_\_\_\_\_  
\_\_\_\_\_

6. Compared to commonly accepted community standards, the ward's present living conditions are:

\_\_\_\_ Above Average      \_\_\_\_ Good      \_\_\_\_ Needs Improvement

7. Guardian's Present Address: \_\_\_\_\_  
\_\_\_\_\_

8. In your opinion, what is the ward's current mental and physical condition?

\_\_\_\_ Above Average      \_\_\_\_ Good      \_\_\_\_ Needs Improvement

When improvement needed, briefly describe all problems and your plans to seek improvement: \_\_\_\_\_  
\_\_\_\_\_

9. Briefly give a summary of the medical, educational, vocational, and other professional services provided for the ward.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Is the ward presently receiving medical care for a physical or mental condition? If so, please briefly describe the condition and give the name and address of the care provider if it is the ward's physician: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. What was the date of the ward's last physical exam? \_\_\_\_\_

12. Is the ward presently attending school: \_\_\_\_\_ Yes      \_\_\_\_\_ No

State the name of the school and present grade, or reason ward is not attending:

\_\_\_\_\_  
\_\_\_\_\_

If applicable, the ward's progress in school is:

\_\_\_\_ Above Average      \_\_\_\_ Good      \_\_\_\_ Needs Improvement

When improvement needed, briefly describe all problems and your plans to seek improvement: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

13. Briefly describe the ward's income, assets, debts, disbursements, and other relevant financial information for the reporting period.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. Give a description of the guardian's visits with and activities on behalf of the ward.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

15. Please give your recommendation as to the need for continued guardianship and reasons: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

16. Please list a summary of attendance at family, clan, or tribal functions or social events since the last report given. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

17. Please give any other information you believe may be useful to the Court.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*\*\* NOTE: WAIT TO SIGN THIS PAGE UNTIL BEFORE A NOTARY \*\*\***

I certify under penalty of perjury and pursuant to the laws of the Sac and Fox Tribe of the Mississippi in Iowa that the preceding is true and correct.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
\_\_\_\_\_

**Signature of Guardian/s, In Front of Notary**

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Subscribed and sworn to before me this  
\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public