STATE OF WISCONSIN, CIRCUIT COURT, _								
IN THE MATTER OF				☐ Amended				
			ı	Petition for				
Name				ent of Conservator				
Date of E	Birth		Case No.					
UNDE	ER OATH, I STATE:							
	•		erly manage n	ny assets or income and volu	ntarily ask the court to			
2.	I am an adult resident My mailing address is:	n an adult resident of County, State of Wisconsin. mailing address is: [Street, City, State, Zip]						
3.	The approximate value of my property is as follows:							
	General Description		Amounts	General Description	Amounts			
	Cash/Bank Account		\$	Other Liquid Assets:	\$			
	Real Estate:		\$	Other Assets:	\$			
	B. I receive publ program bene	program benefits: No Yes, type and amount:						
		I Description	Amounts [Monthly]	General Description	Amounts			
					I IIVIONTNIVI			
	Social Securit	V:		Investment Income:	[Monthly]			
	Social Securit Pension:	y:	\$	Investment Income: Other:	\$ \$			
4. 5.	Pension: I do not do ha Name, address and ph I nominate as conserv	ve a current, valid Fination number:	\$ \$ ancial Durable	Other: Power of Attorney. Activ	s vated. See attached			
	Pension: I do not do ha Name, address and ph I nominate as conserv	ve a current, valid Fina	\$ \$ ancial Durable	Other: Power of Attorney.	s vated. See attached			
	Pension: I do not do ha Name, address and pl I nominate as conserv Type of Conservator Conservator	ve a current, valid Fination number:	\$ \$ ancial Durable	Other: Power of Attorney. Activ	s vated. See attached			
	Pension: I do not do ha Name, address and pl I nominate as conserv Type of Conservator	ve a current, valid Fination number:	\$ \$ ancial Durable	Other: Power of Attorney. Activ	s vated. See attached			

7. I understand that I will be personally examined by the court at the hearing and that the court will determine the suitability of the nominated conservator or standby conservator.

I REQUEST THE COURT:

1. Order a hearing on this Petition.

Make findings and appointments as reques	sted above.		
3. Waive bond.Set bond as appropriate.			
4. Other:			
State of			
County of	Petitioner		
Subscribed and sworn to before me on		Name Printed or Typed	
Notary Public/Court Official			
		Address	
Name Printed or Typed			
My commission/term expires:	Email Address		
☐ This notarial act involved the use of communication technology.	Telephone Number	Date	
DISTRIBUTION: 1. Court 2. Petitioner 3. Proposed Conservator/Proposed Standby Conservator 4. Presumptive Heirs 5. Agent under Durable Power of Attorney 6. Other:			