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IN THE SUPERIOR COURT OF ARIZONA, _____ COUNTY

In the Matter of the Guardianship of:)
)
_____)
) **INFORMATION SHEET**
_____)
)
_____)
_____Minor(s)_____) Date: _____

Case No. _____

Description of Proposed (Co-)Guardian		Description of Proposed (Co)-Guardian	
Name: (first/middle/last)		Name: (first/middle/last)	
Address:		Address:	
Phone No:		Phone No:	
Date of Birth:		Date of Birth:	
Social Security No./Passport No./Green Card No.:		Social Security No./Passport No./Green Card No.:	
Sex:	Race:	Sex:	Race:
Height:	Weight:	Height:	Weight:
Hair Color:	Eye Color:	Hair Color:	Eye Color:
Relationship to Ward:		Relationship to Ward:	
Employer:		Employer:	
Address:		Address:	
Completed by:		Completed by:	

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