STATE OF INDIANA	)	IN THE ELKHART SUPERIOR COURT 6
COUNTY OF ELKHART	)	CASE NO:
IN RE THE GUARDIANS	SHIP OF:	
Name of Incapacitated Person		
PETIT	ION FOR ORDE	R REQUIRING PHYSICIAN'S REPORT
Comes now		, self-represented, and states as follows:
1. I have filed a l of action.	Petition for Appoints	ment of Guardian for Incapacitated Person in the above-entitled cause
	udicate the incapaci	ty of said person, it is necessary to obtain the report of a competent y.
3. The attending	physician of the per	rson is:
Name:		
Address:		
Phone:		
4. The physician	's report shall be ser	nt to the following address:

WHEREFORE, Petitioner requests that the Court order said physician to compile and provide a physician's report on the competency and capacity of the proposed protected person.

I affirm under the penalties for perjury that the foregoing representations are true.

/s/			
Signature		Date	
Printed Name			
Email Address	<del></del>		