**State of Minnesota District Court**

County of: Court File Number:

Judicial District: Case Type: Guardianship/Conservatorship

**In Re: the Conservatorship of**

Petition to Terminate Conservatorship (GAC1104)
Minn. Stat. § 524.5-431

**Note:** Before the Court can discharge a Conservator, the Conservator must comply with final reporting and other requirements.

I declare under penalty of perjury that everything I have stated in this document is true and correct.

## Information about Petitioner

1. **Petitioner’s full name, address, and contact information.**
	1. First Name:

Middle Name:

Last Name:

* 1. Petitioner’s Address:

City/State/Zip:

* 1. Petitioner’s Telephone Number:
	2. Petitioner’s Email Address:
1. **Petitioner’s interest in this matter.**

What is your interest in the welfare of the person subject to conservatorship?

* Examples of someone who may be interested in the welfare of the person subject to conservatorship include the person subject to conservatorship, a spouse or sibling, an attorney for the person subject to conservatorship, and a government agency.

1. Why are you filing this *Petition*?

## Information in Support of Terminating (Ending) the Conservatorship

1. **Information about the conservatorship.**

A Conservator was appointed by Court Order dated: .

1. **Reasons the Conservatorship should be terminated.** Check all that apply:

[ ]  The person subject to conservatorship died on (date).

* Include a copy of the death certificate with this *Petition*.

[ ]  The conservatorship was established because the person subject to conservatorship was a minor the person subject to conservatorship turned 18 years old on (date).

[ ]  The person subject to conservatorship no longer needs the assistance or protection of a conservator. The following facts support this statement:

## Requests

Petitioner asks the Court for the following relief:

1. Terminate the conservatorship.
2. Discharge (name) as conservator after all conservator duties are completed.
3. Grant other relief that is in the best interests of the person subject to conservatorship.

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116

Date: Signature:

Name:

 Address:

County and state where signed City/State/Zip:

Phone:

Email: