GUARDIAN OR CONSERVATOR MONTHLY REPORT
Kansas Guardianship Program
3248 Kimball Avenue, Manhattan, KS 66503-0353 (785) 587-8555 www.ks_prog.org
To submit KGP Monthly Reports electronically, contact cradeke@ksprog.org or call 1-800-672-0086

Report Month/Year

Recruiter/Facilitator

G or C

W or C

Change in address or phone of Guardian or Conservator

Change in address of Ward or Conseree

PERSONAL INVOLVEMENT WITH WARD or CONSERVatee (W or C)
1. Number of visits with w or c ______ If none, please explain
2. Approximate number of phone calls and/or written communications with or regarding w or c
3. Approximate hours per month devoted to guardianship or conservatorship responsibilities

ADVOCACY AND PROTECTIVE SERVICES PROVIDED Check box and provide written comments.
1. Health Care [Physical/Mental Health] ○ Remained the same ○ Improved ○ Changed/Worsened

2. Residential Supports and Services ○ Meets the person’s needs ○ Changes Needed ○ Other

3. Day Supports and Services ○ Meets the person’s needs ○ Changes Needed ○ Other

4. Note Special Events or Activities

FINANCIAL INFORMATION ○ Not Conservator
1. Income Benefit Source(s) ○ Social Security Benefit $ ___________ ○ Railroad Benefit $ ___________
   ○ VA Benefit $ ___________ ○ Pension $ ___________ ○ Other $ ___________
2. Who serves as payee? ○ Guardian or Conservator ○ Payee Program ○ Service Provider
3. Bank ___________ ○ Checking Account Balance $ ___________ ○ Date ___________
   ○ Savings Account Balance $ ___________ ○ Date ___________
4. Irrevocable Burial Trust/Cert of Deposit $ ___________ Supplemental Needs Trust $ ___________