

Name of Person Filing: _____
 Mailing Address: _____
 City, State, and Zip Code: _____
 Day/Evening Phone Number: _____
 State Bar Number (if applicable): _____
 Representing: Self (Without a Lawyer) OR
 Attorney for: Petitioner Respondent

**SUPERIOR COURT OF ARIZONA
 MOHAVE COUNTY**

In the matter of the Guardianship
 and/or Conservatorship of

Case Number: _____

**AFFIDAVIT SUPPORTING PUBLICATION
 (Guardian/Conservator)**

_____ an Adult Minor Deceased

1. I am the petitioner or applicant and make this Affidavit to show the circumstances why notice by publication was used, and to show how service by publication was done.

2. Here are the names of people entitled to notice of this matter to whom I gave notice by publication:

Name: _____

Last known address: _____

Last date I tried to find person _____

Relationship of person to the minor: _____

Name: _____

Last known address: _____

Last date I tried to find person _____

Relationship of person to the minor: _____

Name: _____

Last known address: _____

Last date I tried to find person _____

Relationship of person to the minor: _____

Name: _____

Last known address: _____

Last date I tried to find person _____

Relationship of person to the minor: _____

3. I made a diligent search to find out the residence and whereabouts of the people entitled to notice, but the search has failed to reveal any information concerning their residence or whereabouts.

4. I contacted the persons listed below to find out the location of the following people entitled to notice:

Name of person I am looking for: _____

Address of person I contacted: _____

Name of person I contacted: _____

Name of person I am looking for: _____

Address of person I contacted: _____

Name of person I contacted: _____

Name of person I am looking for: _____

Address of person I contacted: _____

Name of person I contacted: _____

Name of person I am looking for: _____

Address of person I contacted: _____

Name of person I contacted: _____

Name of person I am looking for: _____

Address of person I contacted: _____

Name of person I contacted: _____

5. ABOUT THE PUBLICATION.

NOTICE OF HEARING was published IN A NEWSPAPER IN THIS County on the following dates.

A. _____ B. _____ C. _____

PROOF OF PUBLICATION is attached. (Attach an Affidavit of Publication supplied by the newspaper that published the notice.)

By signing this document, I state to the Court, under penalty of perjury, that the information presented is true and correct to the best of my knowledge and belief.

Petitioner's Signature

Date Signed