

IN THE SUPERIOR COURT FOR THE STATE OF ALASKA  
AT \_\_\_\_\_

In the Matter of the Protective Proceeding of: )  
 )  
 )  
 )  
 )  
 )  
 )  
 )  
 )  
 )  
 Respondent )  
 )

Case No: \_\_\_\_\_

**COURT VISITOR'S INFORMATION  
ON EXPERT APPOINTMENT**

I, \_\_\_\_\_, am appointed as the court visitor in this case.

My review of the existing records provides sufficient information for me to identify the following established provider as a potential expert:

Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

This provider already completed a report and/or provided records that address Respondent's alleged incapacity. This report and/or medical records dated \_\_\_\_\_ is/are attached to  
 the petition.  this notice.  other: \_\_\_\_\_

There are no established reports or records on the issue of Respondent's alleged incapacity. The court should order this provider to do an evaluation of Respondent.

My review of the existing records indicates there is no established provider to serve as the potential expert. I have investigated and recommend that the following provider be appointed as the court's expert and be ordered to do an evaluation of Respondent:

Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date Signature of Court Visitor

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

I certify that on \_\_\_\_\_ at \_\_\_\_\_ [date/time], I served this document by

- email  mail  hand-delivery to the following persons:
  - Petitioner  Respondent (through attorney)  Proposed Expert Named Above
  - Proposed Guardian/Conservator  Other: \_\_\_\_\_

Signature of Visitor: \_\_\_\_\_

**Instructions for Court:** Issue form PG-140 within 10 business days of receipt of this form.