

IN THE INTEREST OF

Amended

Name _____

**Annual Report on the
Condition of the Child
(\$48.9795, Wis. Stats.)**

Date of Birth _____

Case No. _____

1. LOCATION AND ADDRESS OF THE CHILD

A. The child lives at [Street, City, County, State, Zip] _____

B. The child's or guardian's address has changed within the last year. A Notice of Change of Address (JN-1552) was previously filed with the court. is attached.

2. HEALTH AND LIVING CONDITIONS OF THE CHILD

A. The child lives with me.
 The child does not live with me. I personally observe the living conditions and care of the child daily. weekly. monthly. Other: _____

B. Has the child's health changed in the last year?
 No change Improved Worsened
Please explain the child's health condition: _____

3. RECOMMENDATIONS REGARDING THE CHILD

See attached



Guardian's Signature

Name Printed or Typed

Guardian's Address

Email Address

Guardian's Telephone Number

Date

File with Court Official:

DISTRIBUTION:
1. Court