

ANNUAL ACCOUNTING/STATEMENT OF ASSETS
Beginning_____ Ending_____

CASE NUMBER _____

**IN THE MATTER OF THE
GUARDIANSHIP/CONSERVATORSHIP OF**

**ANNUAL ACCOUNTING/
STATEMENT OF ASSETS**

(Ward)

STATE OF NEBRASKA)
) ss.
COUNTY OF _____)

The undersigned Guardian/Conservator of person and property of the above named ward, being duly sworn, says this account is in all respects just and true, and that to the best of her/his knowledge and belief she/he has accounted for all the property of the ward that has come into her/his possession or knowledge, or the possession for anyone of her/him for said ward.

DATE: _____ GUARDIAN/CONSERVATOR: _____

Address: _____

Phone: _____

Subscribed and sworn to before me on this _____ day of _____, _____.

(Notary Public)

STATEMENT OF ASSETS

Item	Value
	\$

TOTAL: \$

To protect personal information, only the last 4 digits of the account should be provided on this form. Complete account information is provided on the Personal and Financial Information of Parties (CC 16:12) form.

CASE NUMBER _____

(Ward)

					Beginning Balance
Date	Check No.	Rec'd from/Paid to	Purpose	Amount paid or received	Balance

(Attach additional sheets if necessary)

Ending Balance