GUARDIAN AND CONSERVATOR ACCOUNTING PROCEDURES

GENESEE COUNTY PROBATE COURT HONORABLE JENNIE E. BARKEY

To obtain forms please visit the Michigan Supreme Court website:

www.courts.mi.gov - click on "Court Forms"

Genesee County Probate Court

900 South Saginaw Street, Room 502

Flint, MI 48502

(810) 257-3528

www.gcprobatecourt.com

(Updated 5/2020)

This program and/or service is funded in whole or in part by the Genesee County Senior Millage.

STATE OF MICHIGAN

PROOF OF RESTRICTED ACCOUNT AND

FILE	NO
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PROBATE COURT GENESEE COUNTY CIRCUIT COURT - FAMILY DIVISION	ANNUAL VERIFICATION OF FUNDS ON DEPOSIT (CONSERVATORSHIP OF MINOR)	13-140001-CY
in the matter of Mary R. Doe USE NOTE: This form must be completed ordered by the court, and annually thereal	d and filed with the court within 28 days of the co	nservator's qualification, or as otherwis
Name of financial institution/insurance company/bit Genesee Bank	•	
Address 321 Main Street Flint, MI 48501		Telephone no. 333-4444
Name of authorized representative James Smith	Title Branch Manager	
I certity that the estate funds of the minor	are currently on deposit with us under a restric	cted account as follows:
Type of account Certificate of Deposit	Account number 111-222-333-4	Balance \$33,083.80
Account caption (include name of conservator) John C. Doe, Conservator for Mary R. Do	pe, a minor	
Attached is a copy of the corresponding fi	inancial institution's statement.*	
I further certify that		
	ot be released or withdrawn except by written o	•
	t withdrawal except by written order of this cou	urt.
3. We are liable for funds released or wit	thdrawn without written order of this court.	
Date	Signature of authorized rep	oresentative
	- ,	
* For annual verification, the correspondir annual accounting period.	ng financial institution's statement must be date	ed within 30 days after the end of the

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Approved, SCAO JIS CODE: INV

STATE OF MICHIGAN
PROBATE COURT
COUNTY OF GENESEE

INVENTORY (CONSERVATORSHIP)

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	_	INO.

PROBATE COURT COUNTY OF GENESEE	□AI	MENDED		
JSE NOTE: The conservator must ser .105 and 5.125. Then the conservator				
In the matter of				
, Name (type or print)		$_{\scriptscriptstyle \perp}$, am the conservator and s	ubmit the follow	ring as a complete and
accurate inventory of all the assets of t I have listed on this inventory any pro ownership.				
PERSONAL PROPERTY AND REAL PRO protected individual and others, specify th in the column "Total Value of Property." If the and amount of the lien. Definitions and ins	ne type of ownership in the ne property has been used to	description and check the box secure a loan, show the nature	AMOUNT	TOTAL VALUE OF PROPERTY (without reduction for lien)
				П
		ТОТ	ALASSETS	
declare under the penalties of perjury nformation, knowledge, and belief.	that this inventory has be	een examined by me and tha	at its contents ar	e true to the best of my
		Date	_	
attorney signature		Signature		
attorney name (type or print)	Bar no.	Name (type or print)		
ddress		Address		
City, state, zip	Telephone no.	City, state, zip		Telephone no

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DEFINITIONS:

- Real property means land, including a building or house that is built on the land.
- **Personal property** means everything that a person owns except real property. Personal property includes bank accounts and checking accounts.

INSTRUCTIONS TO COMPLETE THE INVENTORY:

- 1. List all real and personal property in the column "Personal Property and Real Property Description."
- 2. When listing real property, provide the legal description of the property and the name of any other owner.
 - a. If real property has been used to secure a loan (including an equity line of credit), show the nature and amount of the lien.
 - b. If the value of real property is determined by an appraisal, include the appraiser's name and address and a description of the property appraised.
 - c. Property that the protected individual owns jointly or in common with others must be listed along with the type of ownership. The court may require additional information to support the value of property that is stated in the inventory.
- 3. When listing personal property, provide enough detail to adequately determine the value. Some items should be listed separately and some items should be combined under one category. Provide the name and address of each financial institution listed. The address of a financial institution shall be either that of the institution's main headquarters or the branch used most frequently by the conservator.
 - a. Examples of items that should be listed and valued separately are:

Automobiles

· Prepaid burial contracts

Jewelry

· Life insurance (cash value)

· Bank accounts

Annuities

Mutual funds

AntiquesFurniture

- Stocks and bonds
- Any other individual item of high value (such as a fur coat)
- b. Examples of items that can be listed in categories are:
 - Household items such as dishes, flatware, curtains, linens, utensils, clothing, furnishings, etc. can be grouped into several
 categories or combined into one category.
 - Multiple copies or pieces of a specific item that have the same value such as stocks and bonds.
- c. If personal property has been used to secure a loan, show the nature and amount of the lien.
- d. If the value of personal property is determined by an appraisal, include the appraiser's name and address and a description of the property appraised.
- e. Property that the protected individual owns jointly or in common with others must be listed along with the type of ownership. The court may require additional information to support the value of property that is stated in the inventory.

Approved, SCAO JIS CODE: ACC FILE NO. STATE OF MICHIGAN ACCOUNT OF FIDUCIARY, LONG FORM **PROBATE COURT COUNTY OF GENESEE** Number AMENDED In the matter of. In a quardianship or conservatorship, the ward's or protected individual's current address and telephone number are: $_{\scriptscriptstyle -}$, am the $_{\scriptscriptstyle \overline{}$ 1. I, Name of the estate and submit the following as my account, which covers the period from Month, day, year _ (may not exceed 12 months). Month, day, year 2. SUMMARY Balance on hand from last account, or value of inventory if first account\$ Add income in this accounting period (Total from Schedule A.) Total assets accounted for\$_ Subtract disbursements in this accounting period (Total from Schedule B.)....... If additional sheets are required for Schedule A or B, place all itemization on those sheets and include only category totals on the schedules below. SCHEDULE B: Expenses, losses, and other disbursements, SCHEDULE A: Income and gain in this accounting period including distributions to devisees and beneficiaries Investment gain Investment loss Disposition gain, if any, from Schedule C Disposition loss, if any, from Schedule C **Total Income** Total Expense, Loss,

(SEE SECOND PAGE)

USE NOTE: If this form is being filed in the circuit court family division, please enter the court name and county in the upper left-hand corner of the form.

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and Disbursement

and Gain

SCH	EDULE C: Gair	n and loss on dis DATE	position of assets VALUE AT TIME	(Use only if needed.) PROCEEDS OF SALE/	
DESCRIPTION	ACQUIRED	SOLD/DISPOSED	ACQUIRED BY FIDUCIARY	DISPOSITION	GAIN (LOSS)
			TIDOGIAICI		
TOTAL GAIN (LOSS) If gain, transfer to Schedule A. If					
ii gairi, transier to ochedule A. ii	ioss, transfer to oci	neddie B.			
SCH			aining at end of acc	• .	
	If additional sheets	s are required, indicat	te on Schedule "See attac	ched sheets."	
BALANCE OF ASSETS RINOTE: In guardianships and con					
you must present to the court copies	of corresponding fir	nancial institution stat	ements or you must file w		
of which must reflect the value of all					
The interested persons, add except as follows: (For each		•			
except as follows. (For each	i person whose add	ress changed, list the	e name and new address	, attacii separate sheet ii ne	ecessary.)
4. This account lists all income	e and other recei	pts and expenses	and other disbursen	nents that have come to	my knowledge.
5. This account is not being					, ., ., ., ., ., ., ., ., ., ., ., .,
My fiduciary fees incurre accounting period) are \$				e already been approve on of the services perfor	
7. Attorney fees incurred d					
accounting period) are \$		Attached	is a written descriptio	n of the services perfor	med.
I declare under the penalties of		account has beer	n examined by me an	d that its contents are ti	ue to the best of m
information, knowledge, and be	illei.				
			Date		
Attorney signature			Fiduciary signature		
Allomey signature			riduciary signature		
Attorney name (type or print)		Bar no.	Fiduciary name (type or	print)	
Address			Address		
City, state, zip		Telephone no.	City, state, zip		Telephone no
		-	27 T		•
·			ESTED DEDSONS		
For accounts that must be filed with	tne court.)	OTICE TO INTERI	EGIEDFEKOUNO		

- the court does not normally review the account without an objection.
- 2. You have the right to review proofs of income and disbursements at a time reasonably convenient to the fiduciary and yourself.
- 3. You may object to all or part of an accounting by filing a written objection with the court before the court allows the account. You must pay a \$20.00 filing fee to the court when you file the objection. (See MCR 5.310[C].)
- 4. If an objection is filed and is not otherwise resolved, the court will conduct a hearing on the objection.
- 5. You must serve the objection on the fiduciary or his/her attorney. ${5 \atop 5}$

Approved, SCAO JIS CODE: PAA

STATE OF MICHIGAN PROBATE COURT GENESEE COUNTY	PETITION TO AL	LOW ACCOUNT(S)	FILE NO.
In the matter of			
One or more accounts listing all in knowledge during the accounting			sbursements, which have come to my
2. The interested persons, addresse petition, except as follows: (for each			
3. The attached accounts include:☐ a. fiduciary fees and expenses☐ b. attorney fees and costs in the			
I REQUEST:			
The court approve my fees and e itemized statements attached to the itemized statements.		s and costs in the amount(s	s) stated above as set forth in the
5. That the account(s) be allowed a ☐ interim account.	s my		
specify whether 1st, 2nd, 3rd, annual,	or final	account(s).	
	That bond be canceled. continued. \Box closed.		
I declare under the penalties of perj my information, knowledge, and bel		een examined by me and th	nat its contents are true to the best of
		Date	_
Attorney signature		Fiduciary signature	
Attorney name (type or print)	Bar no.	Fiduciary name (type or print)	
Address		Address	
City, state, zip	Telephone no.	City, state, zip	Telephone no.

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STATE OF MICHIGAN PROBATE COURT COUNTY OF GENESEE	NOTICE (OF HEARING	FILE NO.	
In the matter of First, middle, and last nam	е			
TAKE NOTICE: A hearing will be held	d on		at _ at _	ime
at		_ before Judge		
Location for the following purpose(s): (state the r		_		Bar no
If you require special accommodation to help you fully participate in court p				
		Date		
Attorney name	Bar no.	Petitioner name		
Address		Address		
City, state, zip	Telephone no.	City, state, zip		Telephone no
USE NOTE TO COURT: If this hearing must comply with MCR 5.109(2).	g is for a guardianship r	natter involving an Inc	lian child as defined in MCF	₹ 3.002(12), you
USE NOTE: If this form is being filed in the circ	uit court family division, pleas	e enter the court name and	county in the upper left-hand corn	ner of the form.
	Do not write below th	is line - For court use on	ly	

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STATE OF MICHIOPROBATE COURTIONS OF GEN	Γ	PR	OOF OF SERVICE	FILE NO.	
In the matter of					
1. Titles of the par	oers served or ma	iled:			
☐ 2. According to	court rule, I serve nail (copy of return re		class mail registered ma ne papers described above on:	ail (copy of return	receipt attached)
Name		Complete addr	ress of service		Date
☐ 3. According to	court rule, I serve	d by personal serv	ice the papers described above o	on:	
Name		Complete addr	ress of service		Date and Time
☐ 4. After diligent	search and inquir	/, I have been unabl	e to find and serve the following ir	nterested perso	ons. I have served these
		ed are copies of for		·	
-					
I declare under the of my information,			service has been examined by me	and that its cor	ntents are true to the bes
Service fee \$	Miles traveled Fee		Date		
Incorrect address fee		TOTAL FEE	Signature		
Ψ	Ψ		Name (type or print)		
IOE NOTE WITH	an ta basa a Maria a	atheres of the second of the s			-0 h
JOE NUTE: If this forf	in is being tiled in the	Circuit court family divisi	on, please enter the court name and cou	unty in the upper l	en-nand corner of the form.