

IN THE MATTER OF _____,

Case No. _____

**ACCEPTANCE OF APPOINTMENT
OF GUARDIAN AND
CONSERVATOR
BY THE PUBLIC GUARDIAN**

Protected Person

The Public Guardian accepts appointment as guardian and conservator of the assets of _____, and swears they will
ward/protected person

perform, according to law, all duties as guardian and conservator.

The Public Guardian acknowledges the responsibilities as conservator by *initialing* all of the following:

After Entry of Order of Appointment:

The Public Guardian will file with the court:

- _____ Guardian/Conservator General Information Form ([Form CC 16:2.4](#))
- _____ Address Information form ([Form CC 16:2.5](#)).
- _____ Notice of Designation of Deputy Public Guardian and Associate Public Guardians form (Form CC 16:2.96).
- _____ Updated Notice of Designation of Deputy Public Guardian and Associate Public Guardians form (Form CC 16:2.96) if the designation changes after the initial filing.
- _____ Financial Institution Receipt of Order form **within 30 days** ([Form CC 16:2.6](#)). Showing they presented the order of appointment to all financial institutions where the ward/protected person has accounts and a printout showing the account balance.
- _____ Inventory, Affidavit of Due Diligence form **within 30 days** ([Form CC 16:2.9](#)).
- _____ A budget **within 30 days** that pursuant to [Neb. Ct. R. § 6-1433.02\(D\)](#) is for informational purposes only.

***If not required by the court, put "N/A" or "Not Applicable"**

_____ Personal and Financial Information Form
(Appendix Ch. 6, Art. 14, App. 8).

_____ * Proof of Restricted Account form (Form CC 16:2.11).

Within 10 days for any accounts restricted by court order.

**After Letters of Guardianship and/or Conservatorship are issued:
The Public Guardian will file with the court:**

_____ Financial Institution Receipt of Letters form (CC 16:2.6.1). Showing they presented the Letters of Guardianship and/or Conservatorship to all financial institutions where the ward/protected person has accounts and a printout showing the account balance.

_____ Updated Financial Information form (Form CC 16:2.40) with full account numbers **if** there were changes to the accounts.

The Public Guardian will file with the Register of Deeds:

_____ * The Letters of Guardianship and/or Conservatorship in any county where the ward has real property or an interest in real property, wherever located, within a reasonable time.(Unless certificate has been previously filed with the court)

Starting ONE YEAR after Entry of Order of Appointment, The Public Guardian will file Annual Reports.

1. Annual Report of Guardian on Condition of Ward.
2. Updated Inventory
And, if the Public Guardian has possession of the ward's assets:
3. Annual Accounting
4. Copies of all individual ledger statements and/or brokerage statements for the dates covered by the accounting. Any full account numbers, social security numbers, dates of birth or other personal information appearing on the accounting statements and/or brokerage statements will be blacked out. Accounting/brokerage statements will not be sent to interested persons.

***If not required by the court, put "N/A" or "Not Applicable"**

The Public Guardian MUST acknowledge all of the following:

_____ The Office of Public Guardian will notify the court of any address change of the ward/protected person **within 10 days.**

_____ The Office Public Guardian will notify the court of the death of the ward/protected person **within 10 days.**

_____ The Office Public Guardian will file Notice of Newly Discovered Assets ([CC 16:2.18](#)) within 30 days of when they become aware of additional assets in excess of \$500.00 which did not appear on the Inventory last filed with the court.

_____ The Office Public Guardian will NOT move the ward out of the State without first obtaining court permission.

_____ The Office Public Guardian will NOT make any cash withdrawals and/or get cash back.

Signature: _____ Date: _____

Printed Name: _____

Street Address/P.O. Box: _____

City/State/ZIP Code: _____

Telephone Number: _____

Email address: _____

If completed by an attorney: Bar Number: _____
