Nebraska State Court Form REQUIRED

CC 16:2.44 Rev. 04/2020

[Neb. Rev. Stat. §§ 30-2628,](https://nebraskalegislature.gov/laws/statutes.php?statute=30-2628) [30-2648,](https://nebraskalegislature.gov/laws/statutes.php?statute=30-2648) [Neb. Ct. R. § 6-1442](https://supremecourt.nebraska.gov/supreme-court-rules/chapter-6-trial-courts/article-14-uniform-county-court-rules-practice-procedure/%C2%A7-6-1442-conservator/guardian-inventory-accounts-initial-filing-annual-filing-amended-inventories)

IN THE COUNTY COURT OF COUNTY, NEBRASKA

**IN THE MATTER OF**  **CASE NO.:**

**Ward/Minor Ward/Protected Person**

**TO THE GUARDIAN: Complete only if funds have been spent from or added to the ward’s/protected person’s account(s) since the last inventory was submitted. Debit transactions, if any, must be included. Provide the information below or attach the information on separate pages similar to this form and format.**

**Bank Name:**

Last four digits of account number:

Beginning date of accounting:

ANNUAL ACCOUNTING

Ending date of accounting: **Beginning Balance:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Check Number** | **Received from/Paid to** | **Purpose** | **Amount received** | **Amount paid** | **Balance** |
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**(If more space is needed, use the "Additional Page" button below. Additional pages will number automatically.**

**of**

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I swear or affirm, **under the penalties of perjury**, that I have examined the Annual Accounting and, to the best of my knowledge and belief, it is true, correct, and complete.

Signature: Date: Printed Name: (of guardian and/or conservator)

Street Address/P.O. Box: City/State/ZIP Code: Telephone Number: Email address: If completed by an attorney:

Bar Number:

If there are more than one guardian and/or conservator, both must sign.

Signature: Date: Printed Name: (of co-guardian and/or co-conservator)

Street Address/P.O. Box: City/State/ZIP Code: Telephone Number: Email address: If completed by an attorney:

Bar Number:

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