

STATE OF MICHIGAN PROBATE COURT GRAND TRAVERSE COUNTY CIRCUIT COURT - FAMILY DIVISION	ACCOUNT OF FIDUCIARY, LONG FORM <input checked="" type="checkbox"/> 1st Annual <input type="checkbox"/> Final <input type="checkbox"/> Interim Number <input type="checkbox"/> AMENDED	FILE NO. ##-##,###-xx
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In the matter of Jane Doe **(THIS IS AN EXAMPLE ACCOUNT)**

1. I, John Doe, am the Conservator
 Name Title

of the estate and submit the following as my account, which covers the period from 5/7/08 (date of appointment for 1st account)
 Month, day, year

to 5/6/09 (may not exceed 12 months).
 Month, day, year

2. SUMMARY

Balance on hand from last account or value of inventory if first account	\$	875,630
Add income in this accounting period (Total from Schedule A.)	\$	51,992
Total assets accounted for	\$	927,622
Subtract disbursements in this accounting period (Total from Schedule B.)	\$	25,555
Total balance of assets remaining (Itemize and describe in Schedule D.)	\$	902,067

If additional sheets are required for Schedules A or B, place all itemization on those sheets and include only category totals on these schedules.

SCHEDULE A: Income in this accounting period		SCHEDULE B: Expenses and other disbursements, including distributions to devisees and beneficiaries	
Social Security	8,460	Rent/Foster Care/Mortgage Payment	12,000
Retirement	30,200	Medical	3,000
Interest and Dividends	232	Entertainment (Movies, Dining Out, etc.)	700
Cash Gifts from Family or Conservator	1,000	Spending Money for Jane 12 mos x \$30	360
		Natural Gas	1200
		Electric	600
		Phone	240
		Attorney Fees	800
		Conservator Fees	720
		Income Tax	65
		Pre-paid Funeral Purchase	1,200
		Court Fees	170
		Insurance (Health, Home, Auto, Life, etc.)	4,500
Net gain, if any, from Schedule C	12,100	Net loss, if any, from Schedule C	
Total Income	\$ 51,992	Total Expenses and Disbursements	\$ 25,555

SEE SECOND PAGE

Do not write below this line - For court use only

SCHEDULE C: Gains and losses on disposition of assets (Use only if needed.)

DESCRIPTION	DATE ACQUIRED	DATE SOLD	VALUE AT TIME ACQUIRED BY FIDUCIARY	NET SALES PRICE	GAIN (LOSS)
Pre-paid Funeral	6/20/2008		1200		1,200
Increase in value of home at 280 Washington, TC					3,000
Decrease in value of 2004 Subaru					(750)
Gain on Investment Account at Morgan Stanley					8,650
TOTAL GAIN (LOSS)					12,100

If gain, transfer to Schedule A; if loss, transfer to Schedule B.

SCHEDULE D: Itemized assets remaining at end of accounting period

(If additional sheets are required, indicate on Schedule "See attached sheets.")

Pre-paid Funeral	1,200
Home at 280 Washington (2 x SEV of \$274,000) Held jointly with Bob Doe, equal shares	548,000
2004 Subaru	7,600
Checking Account at Northwestern Bank, TC	2,250
Investment Account held at Morgan Stanley, TC	252,727
IRA held at Traverse City State Bank	89,640
Whole Life Insurance Policy through Hartford, Cash Value	650
BALANCE OF ASSETS REMAINING (Show this amount on summary.)	902,067

NOTE: In guardianships and conservatorships, except as provided by MCR 5.409(C)(4), you must present to the court copies of corresponding financial institution statements or you must file with the court a verification of funds on deposit, either of which must reflect the value of all liquid assets held by a financial institution dated within 30 days after the end of the accounting period.

3. The interested persons, addresses, and their representatives are identical to those appearing on the initial application/petition, except as follows: (For each person whose address changed, list the name and new address; attach separate sheet if necessary.)

4. This account lists all income and other receipts and expenses and other disbursements that have come to my knowledge.

5. ☐ This account is not being filed with the court.

6. ☒ My fiduciary fees incurred during this accounting period (including fees that have already been approved and/or paid for this accounting period) are \$ 720.00. Attached is a written description of the services performed.

7. ☒ Attorney fees incurred during this accounting period (including fees that have already been approved and/or paid for this accounting period) are \$ 800.00. Attached is a written description of the services performed.

I declare under the penalties of perjury that this account has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

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.

NOTE: If the decedent died before October 1, 1993, you must attach proof of inheritance tax paid. If the decedent died between October 1, 1993 and December 31, 2004, you must attach proof of estate tax paid. If the decedent died on or after January 1, 2005, there is no Michigan estate tax or inheritance tax.

For accounts that must be filed with the court.

NOTICE TO INTERESTED PERSONS

1. You must bring to the court's attention any objection you have to this account. The court will not review the account otherwise.
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.