[NOTE: This form illustrates the accounting format required by UTCR 9.160. Each accounting must also comply with all other applicable statutes and court rules. An accounting filed in the court need not include check boxes, instructions in the form shown in bracketed italics, and portions of the form inapplicable to the individual accounting.]

		For the County of	F THE STATE OF OREGON	
		er of the <i>[Mark one]</i> vatorship □ Estate of	Department]) Case no)) [TITLE] ACCOUNTING) [The title must distinguish the a	accounting
		☐ Protected Person ☐ Deceased) from all prior accountings by a) accounting number, time perio) "FINAL".]	
Acc ("the The or nve	ounting e accou beginr first an ntory. I	nservator personal representative (g, covering the period from unting period"). In total balance for the accounting period period to the accounting period period to the accounting period period to the period pe	period is \$, 20 d in the
	onag	·	I.	
	Bondi	ng and Asset Restrictions. [Mark (a) or (b).]	
(a)		No bond is required because so state and show date of the order. and identify the statute or rule.]		
(b)		The current amount of the total bond	d, including riders, is \$.
		[Complete the following information	for interim (annual) accounts only.]	
		Value of the assets on last date of the Plus: estimated income for next accurate assets and income Less: value of restricted assets and (Orders restricting assets or	ounting period income	\$ \$ \$
		Unrestricted assets and income req	uiring bond or new restrictions	\$

(c)	c) The Fiduciary requests the following changes in the amount of the existing bond or ir restrictions on assets or income. [Check all that apply.]							
		Reduce the bond to \$ Increase the bond to \$ Restrict the following assets:						
(d)	[If app	propriate, explain the Fiduciary	y's request for	the bond and r	estrictions.]			
			2.					
the	ıll asset Fiduci	t Schedule. The following <i>[olits</i> owned by the estate or consary's estimate of the value of t	servatorship a	t any time durin	g the account	ing period and		
		Description of Asset*	Beginning Value	Value of Later- Acquired Asset	Value at Disposition	Current (Ending) Value		
TO	TALS							
a F	cquired or a de	ets restricted by court order, or disposed of during the acc pository (an account into whic he separate paragraph or ext	ounting period ch funds are re	l, include the da eceived or from	te of acquisiti which funds	on or d ⁱ sposal. are disbursed)		
			3.					
esta	l accura	ceipts and disbursements. ate schedules of funds receive conservatorship during the accormat.]	ed in and disb	ursed from eac	h depository	account of the		
(a)	[St	ate name of depository and a	ccount numbe	er.]				
	Date	Source of Receipt OPENING BALANCE		Explanation	l	Amount		

Date	Source of Receipt		Explanation	Amount			
TOTAL RI		PLUS (+) OPENING BALA	NCE				
Date	Check #	Payee	Explanation	Amount			
ENDING E		(Total Receipts, Plus (+) Ope	ening Balance, Minus (-) Total Disbursements)				
Reconcile the ending	e any diffe g balance	shown on any ending d	BALANCE punting ending balance for the depository depository statement filed with this account whibit for each additional depository account	nting.]			
			4.				
Vouchers and Depository Statements. [Vouchers are documents evidencing each disbursement and showing the name of the payee, date, and amount. Depository statements are statements from banks, brokerage firms, insurance companies, and similar entities with which estate assets are deposited showing the balance in the depository account at the beginning and end of the accounting period. If vouchers and depository statements are filed with the account, skip to (c). Otherwise mark (a) or (b).]							
(a) 🚨	☐ The filing of vouchers and depository statements was waived. ☐ By court order dated						
(b) 🗖	The Fiduciary requests that the Court waive the requirement of filing vouchers and depository statements for this accounting. The vouchers and depository statements are located at the following address: The vouchers and depository statements will be available for examination by interested persons at that location until one year after the approval of the final accounting herein.						
(c) 🗖	The Fiduciary requests that vouchers and depository statements filed with this accounting be returned. A self-addressed envelope with adequate postage for return of the documents is attached to the vouchers.						

Narrative Description of Changes during the Accounting Period. During the accounting period the following changes in the assets or financial circumstances occurred:

5.

[Describe all changes not clearly disclosed in the Asset Schedule, including, without limitation, corrections to previously declared values, omitted assets, the closing of an account, the sale or purchase of an asset, a significant change in living expenses, or a stock split.]

(a) [Use as many subparagraphs as necessary to separately describe each change.]

(b)

6.

Fiduciary Disclosures. [Disclose and explain every transaction if the transaction was any of the following: (a) A gift. (b) A transaction with a person or entity with whom the Fiduciary has a relationship which could compromise or otherwise affect decisions made by the Fiduciary. The disclosure shall include, but is not limited to, payment for goods, services, rent, reimbursement of expenses, and any other like transactions. (c) A payment for goods or services provided by a person not engaged in an established business of providing similar goods or services to the general public. (d) A payment for goods or services at a rate higher than that ordinarily charged to the general public.]

(a) [Use as many subparagraphs as necessary to separately describe each transaction.]

(b)

7.

Fees. [Insert any information regarding requests for Fiduciary or attorney fees and costs.]

8.

Notice. [Insert any required information addressing the Fiduciary's notice requirements.]

9.

Other Matters. [Add as many additional paragraphs as may be needed to justify requests for court orders included in the prayer of the accounting and to comply with requirements applicable to the particular accounting, such as the representations concerning tax filings required by ORS 116.083(3)(a) in a final account for a decedent's estate. If necessary, add an appropriate indication of relief requested to the title of the accounting. It is the responsibility of the Fiduciary and the attorney for the Fiduciary to identify and comply with all requirements imposed by statue, rule, or court order.]

WHEREFORE the Fiduciary prays for an order:

1.	Approving this accounting.	[If applicable.	Generally annual ad	ccounts in decedent's
estates will no	t be approved by the Court	until the final a	account is approved	[.]

- 2. Setting the amount of the bond at \$_____. [Include this provision only if a change of the bond amount is requested in Paragraph 1.]
- 3. Changing the asset restrictions as follows: ______. [Include this provision only if a change of the asset restrictions is requested in Paragraph 1.]

\$	4.	Directing as reasonab							Fiduciary's licable.]	s tee	and
	5.	[Set forth	any addii	tional re	elief requ	ested.]					
and		ereby declare understand it i						•			-
	Dat	ed		, 20	_						
				-			-	igning al	bove]		<u> </u>
					viaik OH	7 / LI (./	JUSEL VAID	л ш Рег	SULIALTEDIE	SEIIIAI	IVE

IN THE CIRCUIT COURT OF THE STATE OF OREGON COUNTY **Probate Department** In the matter of the Guardianship Estate Case No __ of: **DEPOSITORY CERTIFICATION OF FUNDS ON DEPOSIT** ☐ A Protected Person ☐ Deceased I hereby certify that the following funds were on deposit in the name of this conservatorship/ estate as of _____ (date): Type of Account Account # Balance Maturity (last 4 digits) I hereby declare that the above statement is true to the best of my knowledge and belief, and that I understand that it is made for use as evidence in court and subject to penalty for perjury. DATE SIGNED: Signature Print Name and Title

Note: This document must be signed by an officer or person authorized to certify the accounts at the institution.

Address and Telephone Number

Name of Financial Institution

EXHIBIT ___: Fiduciary Advancements & Reimbursements

The fiduciary discloses the following advancements and reimbursements paid during the accounting period. Documented proof of the amount and purpose of each disclosed transactions are attached to this exhibit.

Date	Adv or Reimb.?	From Account	Payee (who was paid)	Reason for payment