

IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR THE COUNTY OF DESCHUTES

In the Matter of the  
☐ Conservatorship ☐ Estate of

Case No: \_\_\_\_\_  
\_\_\_\_\_ Accounting  
(Accounting Number)

\_\_\_\_\_, ("the Fiduciary") presents this \_\_\_\_\_  
accounting.

**1**

**Accounting Period.** This accounting covers the period from \_\_\_\_\_ through  
\_\_\_\_\_ ("the accounting Period).

**2**

**Period Balance.** The total value of the estate assets, as reflected in the inventory or as the last date of the previous accounting (whichever is most recent), was \$ \_\_\_\_\_.

**3**

**Bonding.** (mark one):

☐ No bond had been required in this matter. The Court waived the requirement of a bond by order dated \_\_\_\_\_. (Skip to section 5 below.)

☐ A bond has been required in this estate. The current amount of the total bond, including riders is (Continue to subsection (a) of this section) \$ \_\_\_\_\_

(a) The total value of estate assets as of the last date of the accounting period is \$ \_\_\_\_\_

(b) The income in the estate estimated to be received during the next account period is: \$ \_\_\_\_\_

(c) Total of (a) and (b) \$ \_\_\_\_\_

(d) The current value of all estate assets that have been restricted by court order are: \$ \_\_\_\_\_

The date(s) of the court order(s) restricting assets is/are: \_\_\_\_\_

(e) TOTAL (amount to be bonded) \$ \_\_\_\_\_

**4**

**Change in Amount of Bond.** The fiduciary asks the court to change the amount of the surety bond or the restriction of assets as follows:

(check all that apply)

☐ No change

☐ Reduce the bond to \$ \_\_\_\_\_

☐ Increase the bond to \$ \_\_\_\_\_

☐ Restrict the following assets:

☐ Remove the restriction from the following assets:

5

**Asset Schedule.** The Asset Schedule is attached as Exhibit 1. This is a summary that lists all assets that existed during the accounting period.

6

**Receipts and Disbursements.** The list of receipts and disbursements for all assets are attached as Exhibit 2 to Exhibit \_\_\_\_\_. (Attach a separate exhibit for each asset listed in the Asset Schedule which has receipts or disbursements during the accounting period.) Also attached are depository statements for each bank or investment account, showing the beginning and ending balance of the account for the accounting period. (No depository statement is needed showing the beginning balance if it was provided to show the final balance in the previous accounting.)

7

**Vouchers.** (choose one)

- ☐ Vouchers showing every payment are also attached in Exhibit 2 to Exhibit \_\_\_\_\_ to the receipts and disbursements for any account from which payments are made.
- ☐ The Fiduciary asks the Court to waive the requirement of filing vouchers for this accounting. The vouchers for this accounting are located at the following address:

\_\_\_\_\_  
The vouchers will continue to be maintained and be available for examination at the location for one year after the closing of this estate.

- ☐ Vouchers are waived by Court rule.

8

**Return of Vouchers and Depository Statements.** (choose one)

- ☐ The fiduciary does not want to receive back the vouchers or depository statement, if any.
- ☐ Upon approval of this accounting, the Fiduciary requests that the Court return the vouchers and depository statements in the enclosed self-addressed, stamped envelope.

9

**Changes During the Accounting Period.** During the accounting period, the following changes in assets or financial circumstances occurred:

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**10**

**Disclosures of Dealing with Related Parties.** During the accounting period, the following transactions occurred between the estate and the Fiduciary, a member of the Fiduciary's family, a friend of the Fiduciary or the Fiduciary's family:

**11**

**Fees.** \_\_\_\_\_

**12**

**Notices.** \_\_\_\_\_

WHEREFORE, the Fiduciary prays for an order of this Court:

1. Approving the annual accounting;
2. Changing the required amount of the surety bond and asset restrictions as shown to be necessary and appropriate by this accounting.
3. Fees (if requested) \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Fiduciary

Title: (select one)

☐ Conservator

☐ Personal Representative

\_\_\_\_\_  
Printed Name of Fiduciary

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

STATE OF OREGON

County of Deschutes

ss.

I, \_\_\_\_\_, being sworn, say: I believe the information provided in this accounting is true.

\_\_\_\_\_  
Signature of Fiduciary

SUBSCRIBED AND SWORN TO BEFORE ME this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public of Oregon

## ASSET SCHEDULE

### Exhibit 1

| Exhibit No*   | Description of Asset | Beginning Value | Value of Later-acquired Asset | Value at Disposition | Current (ending) value | Restricted / Order Date |
|---------------|----------------------|-----------------|-------------------------------|----------------------|------------------------|-------------------------|
|               |                      |                 |                               |                      |                        |                         |
|               |                      |                 |                               |                      |                        |                         |
|               |                      |                 |                               |                      |                        |                         |
|               |                      |                 |                               |                      |                        |                         |
|               |                      |                 |                               |                      |                        |                         |
|               |                      |                 |                               |                      |                        |                         |
|               |                      |                 |                               |                      |                        |                         |
|               |                      |                 |                               |                      |                        |                         |
|               |                      |                 |                               |                      |                        |                         |
| COLUMN TOTALS |                      |                 |                               |                      |                        |                         |

\* The Exhibit Number corresponds to the Receipts and Disbursements exhibit number for each asset that has receipts or disbursements during the accounting period.

*Attach additional pages if needed*

ASSET (State here which asset): \_\_\_\_\_

**RECIEPTS**

| Date  | Source of Receipt | Description | Amount |
|-------|-------------------|-------------|--------|
|       |                   |             |        |
|       |                   |             |        |
|       |                   |             |        |
|       |                   |             |        |
| TOTAL |                   |             |        |

**DISBURSEMENTS**

| Date  | Check # | Name (payee) | Description | Amount |
|-------|---------|--------------|-------------|--------|
|       |         |              |             |        |
|       |         |              |             |        |
|       |         |              |             |        |
|       |         |              |             |        |
| TOTAL |         |              |             |        |

The Receipts and Disbursements exhibit for each separate asset includes any of the following that exists for the asset: receipts, account statements, disbursements, and vouchers (unless waived by the court). Each exhibit also includes reconciliation. Exhibits can be typed on blank paper using substantially the same format as this form.

|                |
|----------------|
| RECONCILIATION |
|----------------|

Value at beginning of accounting period: \$ \_\_\_\_\_  
(attach copy of opening depository statement for this asset)

Total Receipts: \$ \_\_\_\_\_  
(The total of all pages for this asset)

Total Disbursements: \$ \_\_\_\_\_  
(The total of all pages for this asset)  
(Attach vouchers proving disbursements)

Current Value: \$ \_\_\_\_\_  
(The value at the end of the accounting period)  
(Attach a copy of the closing depository statement for this asset)

*If the Current Value does not equal the depository statement balance, please explain:*

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