

**IN THE CHANCERY (PROBATE) COURT FOR SUMNER COUNTY, TENNESSEE
AT GALLATIN**

IN RE: _____

Docket No: _____

**INTERIM/ANNUAL CONSERVATORSHIP ACCOUNTING
INSTRUCTION SHEET AND CHECKLIST**

Unless waived by Court Order(s), Accountings should be **filed within 30 days after the Six-Month Anniversay** from the date of Fiduciary's appointment and thereafter **annually** in accordance with T.C.A. §34-1-111.

The items required for a complete Accounting are listed below. **INCOMPLETE ACCOUNTINGS WILL NOT BE ACCEPTED IN THE CLERK'S OFFICE.**

If you have any questions, please call the Probate Clerk's Office at (615) 451-6036.

- **Detailed Interim/Annual Accounting - Conservatorship** form must be completed and included and completed as follows [*per T.C.A. §34-1-11 (d)(1)*]:
 - Signed.
 - Acknowledged.
 - Verify that Totals provided are correct.

- **A List of Financial Accounts**

- **A Financial Information Form(s)** must be completed for **EACH** financial account

- **Detailed Accounting Register must be included** [*per T.C.A. §34-1-11(d)(1)*]
 - Various software programs are acceptable (if the Probate Clerk's Office form is not used).
 - The **Detailed Accounting Register** must contain:
 - Date
 - Payee
 - Check or Debit
 - Amounts and Balances
 - **Separate Registers** should be used for **EACH** financial account.

- **Financial Statements** must be included as follows [*per T.C.A. §34-1-11(d)(1)(A)*]:
 - All financial accounts must be provided, i.e. checking, savings, Certificates of Deposit, annuities, stock accounts, mutual funds, brokerage accounts, etc. (Copies are acceptable)
 - Statements provided must pertain to the accounting period for which they are filed.
 - Images of cancelled checks or the actual cancelled checks ARE REQUIRED.

- **Status Report of the Fiduciary** must be included [*per T.C.A. §34-1-11(d)(2)*].

- The latest **IRS 1040 Tax Return** must be included [*per T.C.A. §34-1-11(d)(1)(C)*]:
 - If no Tax Return is due, a statement must be submitted stating: (a) no Tax Return is due; (b) the gross income; and (c) information from IRS/TCA which shows approval of exemption.

- **Corporate Surety Statement** must be included if Bond has not been waived [*per T.C.A. §34-1-11(d)(1)(D)*]:
 - This will state that the Bond set is still in effect.

- **A Filing fee of \$40.00** must be included [*per T.C.A. §8-21-401(c)(10)*]:
 - Please remit payment to Sumner County Clerk and Master.

IN THE CHANCERY (PROBATE) COURT FOR SUMNER COUNTY, TENNESSEE
AT GALLATIN

No: _____

Respondent

DETAILED INTERIM / ANNUAL ACCOUNTING – CONSERVATORSHIP

COMES NOW the Fiduciary in this matter and respectfully submits the attached
Accounting to the Court for the period of _____, 20____
to _____, 20_____.

The **combined** totals of **all accounts** required for the Accounting are as follows:

Beginning Balance for **all accounts combined**.....\$ _____
Total Receipts (+) for **all accounts combined**.....\$ _____
Total Disbursements (-) for **all accounts combined**.....\$ _____
Ending Balance for **all accounts combined**.....\$ _____

I, _____, Fiduciary, swear or affirm that this
settlement of the accounts exhibit a full, true, and just statement of each and every asset which
should be charged, and the credits to which are entitled, to the best of the my knowledge and belief.

Fiduciary

Sworn to and subscribed before me, this _____ day of _____, 20_____.

Commission Expiration Date

Notary Public / Deputy Clerk

EXAMINED this _____ day of _____, 20_____.

Mark T. Smith, Clerk and Master

APPROVED FOR RECORDING this _____ day of _____, 20_____.

Louis W. Oliver, III, Chancellor

LIST OF FINANCIAL ACCOUNTS

A separate *Financial Information Form* must be completed for EACH financial account.

	FINANCIAL INSTITUTION	TYPE OF ACCOUNT	ACCOUNT NUMBER (LAST 4 DIGITS ONLY)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			

[ADDITIONAL PAGE(S) MAY BE ATTACHED, IF NECESSARY]

FINANCIAL INFORMATION FORM

This form should be attached to **ALL** the depository accounts you are in control of as Personal Representative or Fiduciary such as checking, savings, money market, Certificate of Deposit, brokerage, stock, investment, IRA, Annuity, etc., and any other account(s) you report to the Court annually. A separate form **MUST** be included for **EACH** account.

For example, if the asset is a Certificate of Deposit which is maturing and you have purchased (or renewed) another C.D., you should list the status of the maturing C.D. as "closed" and the status of the new C.D. as "active" – providing the new maturity date, financial institution, and amount.

ASSET (*Money Market, Certificate of Deposit, checking account, savings account, etc.*):

ACCOUNT NO (last 4 digits only): _____

FINANCIAL INSTITUTION:

Beginning Balance.....	\$ _____
Total Receipts (+).....	\$ _____
Total Disbursements (-).....	\$ _____
Ending Balance as of _____	\$ _____
Maturity Date (if applicable).....	_____

ACCOUNT STATUS: Active
 Closed / Date Closed: _____

Is the Asset covered by your *Surety Bond* or by a *Freeze/Restricted Account Agreement*?
 A copy of the *Agreement* **MUST** be attached if it is a *Freeze/Restricted Account*.

Be sure that **ALL** account statements and imaged copies of the front and back of **ALL** cancelled checks (*if any*) are attached to this Summary, as well as the *Accounting Register*. **EACH** depository account should be itemized on separate *Accounting Register(s)*.

IN THE CHANCERY (PROBATE) COURT FOR SUMNER COUNTY TENNESSEE
AT GALLATIN

INTERIM / ANNUAL STATUS REPORT
OF THE WARD

IN THE MATTER OF:

DOCKET NO: _____

Respondent

I, _____, Fiduciary appointed for the above-referenced Respondent, state to this Court that this Respondent is in need of a Fiduciary due to the following mental and/or physical disabilities:

The Respondent resides at the following address: _____

Residential Type: Private Home Assisted Living/Group Home Commercial Institution

Contact Person (if not Fiduciary) at Residence: _____

Phone Number(s) of Contact Person: _____

I, the undersigned, do herewith affirm that I am aware of the Respondent's right to have a hearing on the issue of disability. I promise to notify the Court of any changes in the Respondent's mental and/or physical condition that might warrant either the modification or termination of this Conservatorship immediately, should I become aware of any improvements in the mental and/or physical condition described above.

This _____ day of _____, 20_____.

Signature of Fiduciary: _____

Address: _____

Phone Number: _____

E-Mail Address: _____

(THIS REPORT SHOULD BE FILED ANNUALLY – EVEN IF ACCOUNTINGS ARE WAIVED)

IN THE CHANCERY (PROBATE) COURT FOR SUMNER COUNTY, TENNESSEE
AT GALLATIN

Tax Return Coversheet / Statement

IN THE MATTER OF:

Respondent

DOCKET NO: _____

The Accounting must include one of the following:

- Check the box indicating that a Tax Return "was completed" and attach a copy of the latest IRS 1040 Tax Return to this coversheet; or
- If no Tax Return is due, check the box indicating that "no Tax Return is due", provide the amount of gross income, and check the appropriate box for approval of the exemption pursuant to information provided by the IRS or T.C.A. statute.

Check the box that applies:

A Tax Return was completed and the latest IRS 1040 Tax Return is attached to this coversheet.

No Tax Return is due.

The gross amount of income is: \$ _____

IRS information is attached which indicates approval of exemption; or

IRS confirmation of approval is not available, however, the following statute allows for the exemption: _____

SIGNATURE OF FIDUCIARY: _____

ADDRESS: _____

IN THE CHANCERY (PROBATE) COURT FOR SUMNER COUNTY, TENNESSEE
AT GALLATIN

CORPORATE SURETY STATEMENT
(CONSERVATORSHIP)

IN THE MATTER OF:

_____ Respondent

DOCKET NO: _____

We, _____, acting as Corporate Surety in the above referenced matter, pursuant to Tennessee Code Annotated, §34-1-111(d), hereby submit the following statement to the Court:

We are Surety on the Bond set by the Court in the above referenced matter and by the execution of this Statement to the Court, hereby acknowledge that we are Surety in this matter and that the Bond amount is \$ _____.

We further state that said Bond is in force for the next annual period and will remain in effect until the Surety is discharged by further orders of the Court.

This _____ day of _____, 20_____.

SIGNATURE OF SURETY: _____

NAME OF CORPORATE SURETY: _____

ADDRESS: _____
