Estate No. _____

☐ **ANNUAL RETURN** _____ **FINAL RETURN** ☐
(Conservator) (Personal Representative)

Period from _____ to _____

In Account with the Estate of _____
(Minor - Incapacitated Adult - Deceased)

Date	Receipts		
	ENDING BALANCE FROM LAST RETURN (OR BEGINNING BALANCE IF 1st RETURN)		
	INTEREST TO DATE		
	OTHER RECEIPTS (DEPOSITS):		
	TOTAL RECEIPTS		**$**

Date	Disbursements: List to whom paid and purpose.		
	TOTAL DISBURSEMENTS		**$**
	NET BALANCE ON HAND (RECEIPTS LESS DISBURSEMENTS)		**$**
	DEPOSITED IN:		

Number of Additional Sheets Attached _____

_____
Signature of Attorney, if any

IT IS ORDERED that the within return be allowed this _____ day of _____, _____.

_____
Judge, Probate Court
_____ **County**

I have compared the original vouchers with the items listed on the return and certify that the return is correct. *(As personal representative, I have delivered a copy of the within return to the heirs or beneficiaries, as required by law.) (As conservator, I have delivered a copy of the return to the surety on the conservator's bond, the ward, and the ward's guardian if any, as required by law.)*

_____
(Conservator) (Personal Representative)
Sworn to and subscribed before me, this _____ day of _____, _____.

_____
(Notary Public or Clerk, Probate Court)

_____
(Co-Conservator) (Co-Personal Representative)
Sworn to and subscribed before me, this _____ day of _____, _____.

_____
(Notary Public or Clerk, Probate Court)