

STATE OF SOUTH CAROLINA)
)
 COUNTY OF: _____) IN THE PROBATE COURT
)
 IN THE MATTER OF: _____) **CONSERVATORSHIP ANNUAL ACCOUNTING**
) CASE NUMBER: _____

Conservator: _____

1. a. This is a full and true statement of account in the above matter, which protected person resides at _____, covering the period from the ____ day of _____, 20____ to the ____ day of _____, 20____.
- b. I have on file a surety bond approved by the Court in a penal sum of \$_____ with the _____ Company as surety.

2. Recapitulation of Accounts

Beginning balance of cash		\$	
Plus money received for all sources (item 3)		+ \$	
	TOTAL	\$	
	Less Total money spent (item 4)	- \$	
	TOTAL VALUE OF ESTATE	\$	

The Conservator represents that this account contains a correct statement of all receipts and disbursements and that its contents are true to the best knowledge and belief of the Conservator.

SWORN to before me this _____ day of _____, 20 _____

Signature: _____
 Name: _____
 Address: _____

 Notary Public for South Carolina
 My Commission Expires: _____

Telephone (O): _____
 (H): _____

Attach Bank or Brokerage Statements

3. MONEY RECEIVED

Date	RECEIVED FROM (List each source separately) Example: First Bank = Check #11111		Amount
_____	_____	\$	_____
_____	_____	\$	_____
_____	_____	\$	_____
_____	_____	\$	_____
_____	_____	\$	_____
_____	_____	\$	_____
	(Attach additional pages, if necessary)		
	TOTAL brought forward from attached pages	\$	_____
	TOTAL AMOUNT RECEIVED	\$	_____

(Enter under recapitulation, page 1, item #2)

4. MONEY SPENT

Date	To Whom Paid and Purpose		Amount
_____	_____	\$	_____
_____	_____	\$	_____
_____	_____	\$	_____
_____	_____	\$	_____
_____	_____	\$	_____
_____	_____	\$	_____
	(Attach additional pages, if necessary)		
	SUB-TOTAL brought forward from attached pages	\$	_____
	TOTAL AMOUNT SPENT	\$	_____

(Enter total on Recapitulation, page 1, item #2)

5. **CERTIFICATION OF BALANCE ON DEPOSIT:**

NAME AND ADDRESS OF INSTITUTION:

Account Type (i.e., Checking, Savings):

Balance on deposit* \$ _____

*Including interest of \$ _____ paid during the period covered by the accounting.

I CERTIFY THAT on the ____ day of _____, 20____, the last day of the period covered by this accounting, there was on deposit in this institution to the credit of this Fiduciary the following balance:\$_____.

SIGNATURE AND TITLE OF CERTIFYING BANK

CERTIFICATION OF INVESTMENTS (to be executed by the Clerk of Court, a bank official, an authorized official of an insurance or investment company, or an authorized official or agent of the corporate surety on fiduciary bond):

Kind of Bond or Security	Interest Rate	Date of Purchase	Face Value	Cost
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TOTAL COST \$ _____

I CERTIFY that the securities listed herein were exhibited to me by the Fiduciary as being the property of the protected person and in the custody and control of the Fiduciary.

Date

SIGNATURE AND TITLE OF CERTIFYING OFFICIAL