

Total Personal Property Assets on Hand: <i>(This should equal the total personal property assets on hand, below)</i>	
--	--

Description of Assets on Hand Do not list financial account numbers here; list confidential information on Form 11.1	Value
1. Bank Account (include verification form 15-UVF)	
2. Stocks (include verification form 15-UVS)	
3.	
4.	
5.	
6.	
7.	
Less: accrued attorney fees and accrued conservator fees	()
Total Personal Property Assets on Hand <i>(This total must match total personal property assets on hand, above)</i>	

- Tangible personal property ____ was / ____ was not, disposed of during the year.
- Real estate ____ was / ____ was not, disposed of during the year.
(If real estate is sold during the year you must attach a closing statement to this account)
- The conservator represents that there is/are on file and in force the following bond(s) (list the name and address of each bonding company and the amount of each bond):

- The current address and phone number of the person subject to conservatorship is: _____

- ☐ I have never been removed for cause from serving as a conservator or guardian.
OR
☐ I have been removed for cause from serving as a conservator or guardian and the court location and court file number are: _____

- The following changes have occurred that affect the accuracy of information contained in the most recent criminal background study conducted under Minn. Stat. § 524.5-118: _____

(Describe changes or write N/A if no changes have occurred)

7. Pursuant to Minn. Stat. § 524.5-102, subd. 13c, a “professional guardian” or “professional conservator” means a person acting as guardian or conservator for three or more individuals not related by blood, adoption, or marriage. *(check boxes below if applicable)*

☐ I am a professional conservator according to the above definition.

☐ My answer to the above question reflects a change in my professional status since my last report to the court for this case.

8. ☐ I have received the following amount of reimbursement for services rendered to the person subject to conservatorship in the past year and this amount was not reimbursed by county contract:

\$ _____

9. I can be contacted at:

a. Telephone number: _____

b. Address: _____

10. CHOOSE ONE OF THE FOLLOWING:

☐ The conservator does not request a hearing to examine, settle, and allow this Account.

☐ The conservator requests a hearing to examine and, settle, and allow this Account.

☐ This is a Final Account and the conservator requests to be discharged from its duties and that the conservator's surety, if any, be discharged.

Note: A hearing is required:

*If this is a final account

*If it has been 4 years since the last account was heard and allowed, See Minn. Gen. R. Prac. 416 (note: hearings regarding accounts of \$20,000 or less may be waived by the court)

The Annual Account must be completed by the conservator and filed with the court. If not filed within 60 days after the anniversary date of the appointment as conservator, the court shall issue an order to show cause. A copy must also be provided to the person subject to Conservatorship and to any interested person of record with the court.

I have read this account, including the confidential portion therein, that this account is the true and full account of my administration of the estate and of all property belonging to the person subject to conservatorship which has come into my hands or to my knowledge, that I do not know of any error in the account, that I have read the petition and that it is true.

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.

Dated: _____, 20__

Signature of Conservator / Co-Conservator

Name: _____

County and state where signed: _____

Address: _____

Telephone: _____

E-mail address: _____

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.

Dated: _____, 20__

Signature of Co-Conservator

Name: _____

County and state where signed: _____

Address: _____

Telephone: _____

E-mail address: _____

Name of Conservator's Attorney:

Name: _____

License No.: _____

Address: _____

Telephone: _____

E-mail address: _____

AFFIDAVIT OF SERVICE

_____, states the following:

A a copy of the Annual or Final Account and Notice of Rights to Petition for Restoration to Capacity and Other Relief has been given to the person subject to conservatorship and to interested persons of record with the court.

The person subject to conservatorship was served ☐ by mail or ☐ personally with the Annual or Final Account and Annual Notice of Rights to Petition on _____ (date).

The present address and telephone number of the person subject to conservatorship is _____

The following interested persons of record with the court were served at the location listed with a copy of the = Annual or Final Account and Annual Notice of Rights to Petition: *(attach additional sheets if necessary)*

Name: _____

Address _____

Served ☐ by mail or ☐ personally on _____ (date)

Name: _____

Address _____

Served ☐ by mail or ☐ personally on _____ (date)

Name: _____

Address _____

Served ☐ by mail or ☐ personally on _____ (date)

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.

Dated: _____

County and state where signed:

Signature of Conservator

Name: _____

Address: _____

City/State/Zip: _____

Telephone: (_____) _____

E-mail address _____

**FILE THE ORIGINAL ANNUAL / FINAL ACCOUNT AND THIS AFFIDAVIT OF SERVICE
WITH THE COURT**