No. _____-G

In the Guardianship of	§	**In County Court**
	§	**At Law No. _____**
_____, an Incapacitated Person	§	**Brazos County, Texas**

Annual Account for the Estate of _____

(Beginning Date___/____/20_____ – Ending Date___/_____/20_____)

_____ (Guardian's name) Guardian of the estate of _____(Ward's name) Ward, an incapacitated person, presents this verified account which is a full, true, and complete accounting of the Ward's estate located in the State of Texas according to section 1163.001 *et seq*. of the Texas Estates Code and shows in support:

1. This account covers the twelve-month period from ___/___/20___ to ___/___/20___.

2. The Court approved Guardian's inventory on ___/___/20___ and Guardian's bond in the amount of $_____ was approved by the Court on ___/___/20___.

3. The following claims against the estate have been presented, and the following action has been taken with respect to each: ☐ No claims against the estate have been presented.

Description of Claim Paid	Claim Allowed/Rejected	Date Paid

4. The following personal property has come to Guardian's attention or into Guardian's possession and was not previously listed or inventoried:

Property Description	Date Discovered	Value

5. The following changes have occurred in the personal property of the estate but have not been reported:
_____
_____
_____.

6. The following real property has come to Guardian's attention or into Guardian's possession and was not previously listed or inventoried:

Property Description	Date Discovered	Value

7. The following changes have occurred in the real property of the estate but have not been reported:
_____
_____
_____.

8. Attached to this account are verifications from all depositories in which money or other personal property belonging to this estate is being held in safekeeping.

9. Separately submitted to the Court are ledgers, bank statements, receipts, cancelled checks, and other supporting documentation including proper vouchers for each item of credit claimed or referenced in this account.

Estate Assets on Hand at Beginning of Accounting Period

(Each Schedule must indicate beginning value, activity during Accounting period, and value at the end of the Accounting period. Backup documentation for each Schedule must be delivered to the Court at the time of filing of the accounting.

Real Property (See Schedule A) $_____

Stocks, Bonds, and Securities (See Schedule B) $_____

Cash/Financial Accounts (See Schedule C) $_____

Jointly Owned Property (See Schedule D) $_____

Personal Property (See Schedule E) $_____

Total Assets: **$_____**

Estate Assets on Hand at End of Accounting Period

Real Property (See Schedule A) $_____

Stocks, Bonds, and Securities (See Schedule B) $_____

Cash/Financial Accounts (See Schedule C) $_____

Jointly Owned Property (See Schedule D) $_____

Personal Property (See Schedule E) $_____

Total Assets: **$_____**

10. The following disbursements were reported in Schedule ___, but were made by Guardian from the corpus of Ward's estate and without prior court authorization under section 1156.004 of the Texas Estates Code. Guardian respectfully requests that the Court approve and ratify these payments:

Disbursement	Date Expended	Amount

11. Guardian requests that this Court authorize reimbursement of certain disbursements made for Ward's benefit during this reporting period, but paid for by the Guardian or other person. This account indicates that there are ample funds in Ward's estate from which these payments may be reimbursed. The disbursements are as follows:

Description of Disbursement	Date Paid	Amount Paid	Name of Person Seeking Reimbursement

12. Guardian has previously received court authorization to make disbursements from Ward's estate to cover expenses authorized under section 1156.001 of the Texas Estates Code. Ward's income continues to be less than Ward's needs for support and maintenance. Guardian requests that the Court authorize the expenditures detailed in Schedule C-2 and, if needed, Schedule C-4 to this account from Ward's estate in the amount of $_____ per month during the next accounting period from ___/___/20____ to ___/___/20___ to cover these expenditures.

13. Guardian requests, based on this account, that this Court increase/reduce his/her bond from the amount of $_____ to the amount of $_____, an amount that would adequately protect Ward's estate as reflected in this annual account.

14. Guardian requests that this Court authorize the payment of any approved and unpaid claims set forth in this annual account. Ample funds exist for their payment. These claims are as follows:

Description of Claim	Person to receive Payment	Amount

Respectfully submitted,

_____
Guardian

_____
Attorney for Guardian
State Bar No.:_____
Phone:_____
Address:_____
_____
Email:_____

Guardian's Affidavit

I, _____, guardian of the estate of _____, an incapacitated person, appeared in person before me today and stated the following under oath:

"My name is _____. I am the guardian of the estate in the above-entitled and -numbered cause. This annual account contains a true, correct, and complete statement of the matters to which this account related. The bond premium for the next accounting period has been paid. All tax returns for the ward during this accounting period have been filed.

"The guardian has paid all taxes owed by the ward during the accounting period of this account as follows:

Name of Agency	Date Paid	Amount Paid

_____
Guardian's Signature

SIGNED under oath before me on _____/_____/20_____.

_____
Notary Public, State of Texas

Itemized Assets—Estate of _____

Schedule A
Real Property

Description	Community or Separate	Value at Beginning of Accounting Period	Value at End of Accounting Period
Property #1			
Property #2			
Property #3			
Total			

Schedule B
Stocks, Bonds, and Securities (Specify Institution/Last 4 Digits of Account, and Type of Account)

Description	Community or Separate	Value at Beginning of Accounting Period	Value at End of Accounting Period
Asset #1			
Asset #2			
Asset #3			
Total			

Schedule C
Cash/Financial Accounts (Specify Institution/Last 4 Digits of Account, and Type of Account)

Description	Community or Separate	Value at Beginning of Accounting Period	Value at End of Accounting Period
Account #1			
Account #2			
Account #3			
Total			

Account #1

Schedule C-1

Receipts

(Income from governmental benefits managed by a designated payee not to be included)

Source of Income	Date Received	Amount Received
Total Income		

Disbursements

Schedule C-2

(Reference Orders Approving Allowance/Payment of Expenses)

Description	Court Order Date	Check #/Method of Payment	Date Paid	Amount
1. Housing/Care Facility				
2. Medical Care				
3. Caretaker Services				
4. Court Costs				
5. Attorney's Fees				
6. Other (Continue enumeration of expense categories)				
Total Disbursements				

Account #2

Schedule C-3

Receipts

(Income from governmental benefits managed by a designated payee not to be included)

Source of Income	Date Received	Amount Received
Total Income		

Disbursements

Schedule C-4

(Reference Orders Approving Allowance/Payment of Expenses)

Description	Court Order Date	Check #/Method of Payment	Date Paid	Amount
1. Housing/Care Facility				
2. Medical Care				
3. Caretaker Services				
4. Court Costs				
5. Attorney's Fees				
6. Other (Continue enumeration of expense categories)				
Total Disbursements				

Account #3

Schedule C-5

Receipts

(Income from governmental benefits managed by a designated payee not to be included)

Source of Income	Date Received	Amount Received
Total Income		

Disbursements

Schedule C-6

(Reference Orders Approving Allowance/Payment of Expenses)

Description	Court Order Date	Check #/Method of Payment	Date Paid	Amount
1. Housing/Care Facility				
2. Medical Care				
3. Caretaker Services				
4. Court Costs				
5. Attorney's Fees				
6. Other (Continue enumeration of expense categories)				
Total Disbursements				

Schedule D
Jointly Owned Property

Description	Community or Separate	Value
Total		

Schedule E
Personal Property

Description	Community or Separate	Value
Total		