

IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT, IN AND FOR MIAMI-DADE COUNTY, FLORIDA PROBATE DIVISION

Case Number: \_\_\_\_\_ Amended Form? : \_\_\_\_\_ If Yes, version of the Amended Form? : \_\_\_\_\_

Guardianship Inception Date: \_\_\_\_\_ Guardianship Type: \_\_\_\_\_ IN RE: THE GUARDIANSHIP OF: \_\_\_\_\_ Section: \_\_\_\_\_

Guardian Name: \_\_\_\_\_ Name of Representative Payee for Social Security Income: \_\_\_\_\_

SIMPLIFIED ANNUAL GUARDIANSHIP ACCOUNTING

FROM: \_\_\_\_\_ To : \_\_\_\_\_

Ward's Social Security #: \_\_\_\_\_ Property Guardian Type: \_\_\_\_\_ Report Type: \_\_\_\_\_

SUMMARY

- 1. Beginning Balance from Prior Accounting Period \_\_\_\_\_
- 2. Interest Income: \_\_\_\_\_
- 3. Settlement Proceeds: \_\_\_\_\_
- 4. Total Income: \_\_\_\_\_
- 5. Financial Institution Service Charges: \_\_\_\_\_
- 6. Total Service Charges: \_\_\_\_\_
- 7. Balance at Close of Accounting Period \_\_\_\_\_

**Note:** Balance at Close of Accounting Period should agree with fiscal year-end statement. This form should only be used when all of the Ward's assets are in designated depositories and the only transactions that occur in that account are interest accrual, deposits from a settlement, or financial institution service charges. See § 744.3679(1), Fla. Stat. Ward's Social Security #:

Pursuant to order of the above entitled court, all the assets of the Ward are in the following designated depositories under Sec. 69.031, Florida Statutes.

#	Financial Institution	Account Number
1	_____	_____

**CERTIFICATION AND SIGNATURE OF GUARDIAN(S)**

(Check all that apply)

- The ward was declared totally incapacitated.
- The ward is a minor.
- All assets are in a designated depository account.
- The year end statement from the account is attached.
- The guardian has custody and control of the property as reflected in the year end statement.

UNDER PENALTIES OF PERJURY, I declare that I have read and examined the foregoing accounting, and the facts alleged are true, to the best of my knowledge and belief.

Guardian Signature	Guardian Name	Date signed by Guardian	
_____	_____	_____	
Guardian Taxpayer Identification #	Guardian Telephone #	Guardian's Email Address	
_____	_____	_____	
Guardian Mailing Address	City	State	Zip
_____	_____	AK	_____

**CO-GUARDIAN**

Co-Guardian Signature	Co-Guardian Name	Date signed by Co-Guardian	
_____	_____	_____	
Co-Guardian Taxpayer Identification #	Co-Guardian Telephone #	Co-Guardian's Email Address	
_____	_____	_____	
Co-Guardian Mailing Address	City	State	Zip
_____	_____	AK	_____

**CERTIFICATION AND SIGNATURE OF PREPARER**

I have prepared the Annual Accounting based upon the information provided by the guardian(s) with no independent verification of the information contained herein. I have not audited or reviewed the Annual Accounting or documents supporting the preparation of the Annual Accounting and, accordingly, do not express an opinion or any other form of assurance as to the accuracy of the information contained in the Annual Accounting.

<hr/> <b>Preparer Signature</b>	<hr/> <b>Preparer Name</b>	<hr/> <b>Date Signed by Preparer</b>
<hr/> <b>Preparer Taxpayer Identification #</b>	<hr/> <b>Preparer Telephone #</b>	<hr/> <b>Preparer's Email Address:</b>
<hr/> <b>Preparer Mailing Address</b>	<hr/> <b>Preparer City</b>	<hr/> <b>State</b> AK
		<hr/> <b>Zip</b>

**CERTIFICATION AND SIGNATURE OF GUARDIAN'S ATTORNEY**

The undersigned hereby notifies the Court of the filing of the Annual Accounting of the guardian of the property. This Annual Accounting is the representation of the guardian. I have not audited the accompanying Annual Accounting. The undersigned attorney represents that he/she has examined the contents of this Annual Accounting and that it conforms to the requirements of the Florida Guardianship Law.

<hr/> <b>Attorney Signature</b>	<hr/> <b>Date signed by Attorney</b>	<hr/> <b>Attorney Name</b>
<hr/> <b>Attorney Florida Bar Number</b>	<hr/> <b>Attorney Email Address</b>	<hr/> <b>Attorney Mailing Address</b>
<hr/> <b>Attorney Telephone #</b>	<hr/> <b>Attorney Fax #</b>	
<hr/> <b>Attorney City</b>	<hr/> <b>State</b>	<hr/> <b>Zip</b>