

**PETITION FOR SETTLEMENT OF GUARDIAN
(VETERAN)**

**STATE OF ALABAMA
MONTGOMERY COUNTY**

**PROBATE COURT
CASE NO. _____**

TO THE HONORABLE JUDGE OF PROBATE COURT, MONTGOMERY COUNTY:

Your petitioner(s), _____, as Guardian(s) of the estate of _____, Incompetent Veteran and respectfully represent(s) unto your Honor that the petitioner(s) was/were duly appointed by this Honorable Court as Guardian(s) of the estate of said Incompetent Veteran, on the _____ day of _____, _____ and thereupon gave bond, qualified and entered upon the discharge of the duties as such Guardian(s).

Petitioner(s) as such Guardian(s) is/are desirous of having a _____ settlement of said guardianship, and as such Guardian(s) of the estate of said Incompetent Veteran, and respectfully submits to the Court the following accounts for said settlement covering the period of _____ through _____, and files herewith vouchers, and charges himself/herself/itself as follows: (Attach additional sheets if necessary.)

DATE	ITEMS OF RECEIPTS	AMOUNT
		\$
	TOTAL AMOUNT OF MONEY RECEIVED	\$

DISBURSEMENTS

Said Guardian(s) asks to be credited with the following payments to creditors of said ward, as per vouchers submitted herewith: (Attach additional sheets if necessary.)

DATE	FOR WHAT PAID OUT	CHECK NUMBER	AMOUNT PAID OUT
			\$
	TOTAL AMOUNT PAID OUT		\$

RECAPITULATION

BALANCE BROUGHT FORWARD

(From last accounting if applicable)

\$ _____

TOTAL AMOUNT RECEIVED

\$ _____

TOTAL AMOUNT PAID OUT

\$ _____

CASH BALANCE ON HAND

\$ _____

INVESTMENTS

\$ _____

REAL PROPERTY (estimated value) \$ _____

Address: _____

RENTAL INCOME ON REAL PROPERTY

(One year estimated income)

\$ _____

NET CURRENT VALUE OF ESTATE:

(Cash on hand, investments and rental income)

\$ _____

STATE OF _____
_____ **COUNTY**

Before me, _____, a Notary Public in and for said County and State aforesaid, personally appeared _____, as Guardian(s) of the estate of _____, Incompetent Veteran, who being duly sworn, makes oath that the account for the settlement is a full and correct statement of all dealings and transactions, and of all moneys and effects received and paid out by said Guardian(s) on account of said ward, and that said Guardian(s) has/have not used any of the funds of said ward for their own benefit.

Attorney for Petitioner(s)

Address: _____

Phone No. _____

Signature of Guardian(s)

Address: _____

Phone No. _____

SWORN to and subscribed before me this _____ **day of** _____, _____.

SEAL

Notary Public