ACCOUNTING QUESTIONNAIRE

Protected Person's Legal Name:				
Current Address of PP:				
Accounting Period:	, 20	_ through	, 201	
	Conservator (Date of Le	tters of C/S:)	
	Guardian (Date of Letters of G/S:) Other:			
Frequency of Accounting:	□ Semi-Annual □ Annual □ First □ Second	□ Final	□ Other:	
If Final Accounting, what reason?:	□ Funds □ Death (I	Date:)	
	□ Other:			
	(Date Bond fond established yet			
ASSET		VALUE	DATE OF	
			VALUE	
TOTAL VALUE OF ASSETS	at start of Acct Period	· \$		

Please list below all CURRENT assets in the Conservatorship estate (use back of sheet if more space is needed):

ASSET	VALUE	DATE OF VALUE
TOTAL VALUE OF ALL CURRENT ASSETS:	\$	

1. <u>Please make sure to include ALL assets/accounts, including</u>: pre-paid funeral plans, miscellaneous personal property, jewelry, physical property/houses, automobiles, recreational vehicles/boats, investment accounts as well as checking, savings, CD and money market accounts.

2. Please make sure to list the above-values as of the exact ending date of the current accounting period.

3. <u>Please list any notes or comments below:</u>

ACCOUNT SUMARIES

For each account / asset listed above, please provide the following information requested below, as it relates to the entire accounting period:

PLEASE MAKE SURE THAT THE BEGINNING DATES AND ENDING DATES (AND THEREFORE ALL AMOUNTS) CORRESPONDING WITH THE **EXACT** DATES OF THIS ACCOUNTING PERIOD.

Account Name & #:		Account Name & #:	
Beginning Balance:	\$	Beginning Balance:	\$
Date of Beginning Bal.:	·	Date of Beginning Bal.:	
Total Deposits:	\$	Total Deposits:	\$
Total Withdrawals:	\$	Total Withdrawals:	\$
Ending Balance:	\$	Ending Balance:	\$
Date of Ending Bal.:		Date of Ending Bal.:	
Account Name & #:		Account Name & #:	
Beginning Balance:	\$	Beginning Balance:	\$
Date of Beginning Bal.:		Date of Beginning Bal.:	
Total Deposits:	\$	Total Deposits:	\$
Total Withdrawals:	\$	Total Withdrawals:	\$
Ending Balance:	\$	Ending Balance:	\$
Date of Ending Bal.:		Date of Ending Bal.:	
Account Name & #:		Account Name & #:	
Beginning Balance:	\$	Beginning Balance:	\$
Date of Beginning Bal.:		Date of Beginning Bal.:	
Total Deposits:	\$	Total Deposits:	\$
Total Withdrawals:	\$	Total Withdrawals:	\$
Ending Balance:	\$	Ending Balance:	\$
Date of Ending Bal.:		Date of Ending Bal.:	
Account Name & #:		Account Name & #:	
Beginning Balance:	\$	Beginning Balance:	\$
Date of Beginning Bal.:		Date of Beginning Bal.:	
Total Deposits:	\$	Total Deposits:	\$
Total Withdrawals:	\$	Total Withdrawals:	\$
Ending Balance:	\$	Ending Balance:	\$
Date of Ending Bal.:		Date of Ending Bal.:	
Account Name & #:		Account Name & #:	
Beginning Balance:	\$	Beginning Balance:	\$
Date of Beginning Bal.:		Date of Beginning Bal.:	
Total Deposits:	\$	Total Deposits:	\$
Total Withdrawals:	\$	Total Withdrawals:	\$
Ending Balance:	\$	Ending Balance:	\$
Date of Ending Bal.:		Date of Ending Bal.:	

DOCUMENTATION & ATTACHMENTS

<u>Please include clearly readable copies of the following documents with this completed form:</u>

1. BANK STATEMENTS

- A. Statement for each asset account clearly showing the beginning balance, as listed.
- B. Statement for each asset account clearly showing the ending balance, as listed.

Note: If there are any discrepancies in the balances listed on this document and the balance listed on the banking statements, please make a separate notation for each such discrepancy, clearing stating the reasoning.

2. INVESTMENT STATEMENTS

- A. Statement for each asset account clearly showing the beginning balance, as listed.
- B. Statement for each asset account clearly showing the ending balance, as listed.

Note: If there are any discrepancies in the balances listed on this document and the balance listed on the investment statements, please make a separate notation for each such discrepancy, clearing stating the reasoning.

3. ACCOUNT REGISTERS

A. Typed, chronological registers for each account, starting with the beginning balance (*must be the same as the first balance at the end of the previous year's accounting*) and ending with the current value of each asset account as of the *final date of the current accounting period*.

<u>PLEASE NOTE</u>: We only need copies of all <u>Account Registers</u>. There is no need to include any additional paperwork such as Profit & Loss Reports or Reconciliation Reports.

4. REQUEST FOR PAYMENT: If you are requesting payment for services rendered as Conservator and/or Guardian during the period of this Accounting, please make sure to include a detailed list of services, hours and total requested pay with this Questionnaire when you return it to our office.

What is the best way to contact you? _____

Please return to:

JASON BROESDER Attorney at Law, LLC Attn: Malissa – Accounting 312 South Ivy Street / Medford, OR 97501 Phone: (541) 773-1222 / Fax (541) 779-5405

Feel free to communicate by email to Malissa: malissa@broesderlaw.com