In the Probate Court of Houston County State of Georgia

| In Re Estate of: Deceased/Ward/Minor (Circle one) | | Estate Number: Annual Return Final Return Dates of Reporting Period: | |
|--|--|--|--|
| | | | |
| | Return of I | - -iduciary | |
| | Summary of Cas | h Accounting | |
| A. | Beginning Cash Balance | - | |
| B. | Total Deposits/Receipts for all accounts | | |
| C. | Subtotal (add B to A) | | |
| D. | Total Withdrawals/Expenditures for all accoun | ts | |
| E. | <u>Cash Balance</u> (subtract D from C) | | |
| F. | Value of any other Estate Assets | · | |
| I/We | Verification and Certif | • | nd say that I/we are the |
| | onal Representative(s)/Conservators for the abov | e named estate/minor | /ward, that I/we reside at |
| do fu have retu | true account of the estate for the period stated, to urther certify to the Court that: all bond premium been filed; and all taxes due have been paid. Forn, my/our daytime phone number isess is | to the best of my/our kest of my/our kest of all ir repurposes of contacting to the contacting t | nowledge and belief. I/We ncome tax returns required ng me/us with regard to this and my/our email |
| Swo | rn to and subscribed before me on | . Signature of Fidu | ciary |
| Nota | ry public or Clerk of Probate Court | · | |
| | | Signature of Co-F | iduciary |

Transaction Register

| Account Number: Account Name: | |
|--|----------|
| Account Type: Checking Savings Money Market Other | |
| Include <u>ALL</u> sums deposited into and paid from the account, including interest, automatic deposits or withdrawals and all bank charges/ <u>AND</u> attach a bank statement for each account, including interest, automatic deposits or withdrawals and all bank charges/ <u>AND</u> attach a bank statement for each account, including interest, automatic deposits or withdrawals and all bank charges/ <u>AND</u> attach a bank statement for each account, including interest, automatic deposits or withdrawals and all bank charges/ <u>AND</u> attach a bank statement for each account, including interest, automatic deposits or withdrawals and all bank charges/ <u>AND</u> attach a bank statement for each account, including interest, automatic deposits or withdrawals and all bank charges/ <u>AND</u> attach a bank statement for each account, including interest, automatic deposits or withdrawals and all bank charges/ <u>AND</u> attach a bank statement for each account and all bank charges/ <u>AND</u> attach a bank statement for each account and all bank charges/ <u>AND</u> attach a bank statement for each account and all bank charges/ <u>AND</u> attach a bank statement for each account and all bank charges/ <u>AND</u> attach a bank statement for each account and all bank charges/ <u>AND</u> attach a bank statement for each account and all bank charges/ <u>AND</u> attach a bank statement for each account and all bank charges/ <u>AND</u> attach a bank statement for each account and all bank charges/ <u>AND</u> attach a bank statement for each account and all bank statement for each account for each account and all bank statement for each account f | ount |
| Beginning Balance | <u> </u> |
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| Total Deposits and Withdrawals | |
| Ending Balance | |

Other Assets in Estate

Attach a statement/proof of value at end date of return for each item *Attach supplemental pages including more assets if necessary.

| ate | | |
|-------|---|-------|
| alued | Investments held by Broker/Institution (Stocks, bonds, etc.) | Value |
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| alued | Other Assets (Real Estate, Automobiles, Collections, Jewelry, etc.) | Value |
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Total Value of Other Assets in Estate

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Account Verifications

Use the certificates on this page to verify balances in EACH account held AND attach an ORIGINAL bank statement for each account showing balance on ending date of Return. Please copy this page if you need additional certificates.

Certificate of Balances on Deposit

| Name and Address of Bank or financial ins | titution | |
|---|---|--|
| I do certify that on, 20 estate managed by this Fiduciary the follo | , there was on deposit in this institution to the credit of the wing: | |
| Checking Account balance: \$ | Account Number: | |
| Savings Account balance: \$ | Account Number: | |
| Certificates of Deposit Face Value : \$ | Certificate Number: | |
| Interest paid and credited to the above ac (DO NOT include accrued but unpaid inter | counts during period of Return totaled: \$est) | |
| I further certify that each account is prope Estate/Ward/Minor. | erly titled in the Fiduciary's Capacity for the benefit of the | |
| Signature of Certifying Official | Printed Name and Title of Certifying Official | |
| Certific | cate of Investments Held | |
| Name and Address of Bank or financial ins | titution | |
| do certify that on, 20, there were held by this institution to the edit of the estate managed by this Fiduciary the investments totaling \$ in a account. | | |
| I further certify that each account is prope Estate/Ward/Minor. | erly titled in the Fiduciary's Capacity for the benefit of the | |
| Signature of Certifying Official | Printed Name and Title of Certifying Official | |

IN THE PROBATE COURT OF HOUSTON COUNTY STATE OF GEORGIA

| IN RE: ESTATE OF | |) |
|---|--|--|
| | |) |
| CERTIFICATE OF MA | ILING OF |) ANNUAL/FINAL RETURN |
| I/We certify that I/We have on this date material first-class delivery a copy of this Return to the estate or if a conservatorship, to the ward of required by law. These include: • The heirs of intestate estates or company) if any. O.C.G.A. §53-7 • In adult conservatorships, the some of the conservatorships, the some of the conservatorships, the some of the conservatorships. | iled in an enthe beneficiar or minor and beneficiarie 7-68 urety (bondinand the guar | velope with proper postage affixed thereto for y(ies) of a testate estate or heir(s) of an intestate his or her guardians, and surety on the bond as s of a testate estate, and surety (bonding ng company) the ward, and the guardian (if any). ing company) and the guardian. If there is no dian are the same person, a copy must also be |
| provided to the minor. O.C.G.A. The parties provided with notice in complia | - | above are as follows (add additional pages, if |
| necessary): | | |
| NAME: | ADDRE | SS: |
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| This day of | , 20 | <u></u> · |
| Signature (Personal Representative) | | Signature (Co-Personal Representative) |
| Printed Name | | Printed Name |

| te Name: | | Estate Number: |
|---|---|---|
| es of Reporting Period: From to to | _ | |
| . • | ompleted by Court Staff of Bond Sufficiency | |
| Total value of personal and intangible property | \$ | |
| Plus: any other cash assets | \$ | |
| Plus: Annual Income (In Conservatorships ONLY) | \$ | |
| Total Value to be bonded | \$ | |
| Current Bond on Record dated | \$ | |
| Bond Excess or Deficiency | \$ | |
| Retu | ırn Audited | |
| Date Audited: | Ву: | , Cle |
| Order Admitti | ng Return to Record | |
| The foregoing Return and its affidavit have having remained on file in this office for at least allowed; and it is Ordered that said Return toget | 30 days and no objections having bee | en filed, the same |
| Date: Kriste | en W. Harris, Judge | |
| | ston County Probate Court | |
| Order Directing the Recording of R The foregoing Return having been filed a days and no objection to the same having been evidence waste or mismanagement, it is ORDER disapproval by the Court and that a copy of the | and examined and having remained or filed, but it appearing to the Court the ED that the Return be recorded witho | n file for at least at the return man out approval or |
| Date: Kr | isten W. Harris, Judge | |
| | uston County Probate Court | |