

COMMONWEALTH OF KENTUCKY  
**17TH JUDICIAL DISTRICT, DIVISION 2**  
600 COLUMBIA STREET  
NEWPORT, KENTUCKY 41071  
PHONE 859-292-6322 859-292-6361  
karent@kycourts.net

**KAREN A. THOMAS**  
CHIEF NORTHERN REGION DISTRICT JUDGE

CAMPBELL DISTRICT COURT

**DISTRICT COURT**  
**ADULT GUARDIANSHIP RESTRICTIONS**

As guardian or conservator of the person and property of an adult, you are undertaking important responsibilities in the areas of management of the ward's financial and personal affairs. These duties are strictly regulated by law and you are required to perform them diligently and in good faith. These instructions are being given to you by the Court to aid you in meeting your statutory responsibilities. *Unfortunately, Judges are prevented by the Judicial Code of Ethics to assist or give advice in the proper administration of Guardianship duties. It may be to the advantage of a Guardian or Conservator to seek assistance of an attorney and or accountant.*

1. You must take charge of the money and property belonging to the ward for whom you are appointed guardian or conservator. **You must not treat these assets as your own property.** You will be required to strictly account to the Court for all property or assets coming into your possession.
2. Set up a separate checking account in your name **as guardian or conservator and write checks against it only for expenses of the ward.** Do not co-mingle any property of the ward's with your own. Retain all cancelled checks and other receipts you receive for expenditures made on behalf of your ward. **You must**

have a cancelled check or receipt for every expenditure to show the Court with each accounting. Checks for cash to yourself should be kept to an absolute minimum. However, if a check is written to yourself for cash, a proper receipt is required to be filed with the check.

3. Do not place more money in the checking account than is required. The balance should be invested safely in interest-bearing investments which are approved by state law (KRS 386.020). Each account should be set up in the name of the ward with yourself as guardian. The Court has the right to inspect all bankbooks periodically. Interest payments belong to your ward and not to you or other members of the family. They are not part of your compensation for serving as guardian.

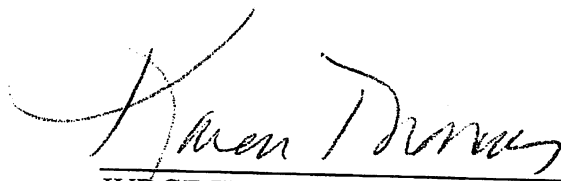
As guardian, you must file with the Probate Court the following items:

- A. An Inventory of the money or property coming into your hands as guardian within 60 days of your appointment.
- B. A Settlement of the financial status of your ward 120 days after the anniversary date of your appointment and then biennially until terminated. In each settlement, you must account to the Court for all money or property you collected for your ward and everything you paid out from his or her funds or property. You must have physical proof of the existence of all investments and bank accounts.

- C. An Annual Report of the physical condition of your ward. You may request a copy of AOC-790 from the Probate Clerk to fulfill this requirement.
- D. You must submit a Final Settlement to the Court upon the death of your ward or upon termination of your guardianship appointment.
- E. It may necessary to file an income tax return on behalf of your ward.

*Always remember that you will remain personally liable for all property coming into your care until released by the court.* Lastly, if you have a change of address, you must notify the Clerk of Probate Court.

This the 31 day of Jan 2011

  
\_\_\_\_\_  
JUDGE KAREN A. THOMAS  
17<sup>TH</sup> JUDICIAL DISTRICT  
DIVISION II



**60 DAY INVENTORY OR  
SUPPLEMENTAL INVENTORY**  
 MINOR  DISABLED PERSON

Case No. \_\_\_\_\_  
Court \_\_\_\_\_  
County \_\_\_\_\_

**NOTICE TO GUARDIAN/CONSERVATOR:** FILE THIS INVENTORY WITHIN 60 DAYS OF APPOINTMENT. IF OTHER PROPERTY LATER COMES TO YOUR KNOWLEDGE, A SUPPLEMENTAL INVENTORY MUST BE FILED WITHIN 60 DAYS OF OBTAINING SUCH KNOWLEDGE.

In re estate of \_\_\_\_\_, a  Minor under 18  Disabled Person.

\_\_\_\_\_ states that as  guardian  conservator, the following is a full, true and complete Inventory of the Estate which has come into his/her hands or the existence of which he/she has knowledge:

1. <b>Real Property:</b> (Include description, address, probable value and probable value of rent.)	<b>Value</b>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

2. <b>Personal Property:</b>	
a. Motor Vehicles (Autos, Trucks, Farm Equipment)	<b>Value</b>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

b. Household Appliances and Jewelry	<b>Value</b>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

3. **List all monies owed for** any item under 1 and 2:  
\_\_\_\_\_  
\_\_\_\_\_

4. **Monies or Cash on Hand:**

a. Monthly Government Benefits and Pensions, Social Security, SSI

**Value**

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

b. Savings, Checking Accounts and Certificates of Deposit:

**Value**

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

5. **Claims against** the Ward:

**Value**

_____	\$ _____
_____	\$ _____

6. **Claims by the Ward** against others:

**Value**

_____	\$ _____
_____	\$ _____

\_\_\_\_\_  
Guardian/Conservator

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Name/Title

AOC-790  
Rev.-6-92

Commonwealth of Kentucky  
Court of Justice

KRS 387.670



Case No. \_\_\_\_\_

Court \_\_\_\_\_

County \_\_\_\_\_

COMMONWEALTH OF KENTUCKY  
PETITIONER

VS.

\_\_\_\_\_  
RESPONDENT

ANNUAL REPORT  
OF GUARDIAN

\*\*\*\*\*

I, the undersigned, state that I am the  Guardian  Limited Guardian of the above-named Respondent, and report to the Court as follows:

1. Present age of Ward: \_\_\_\_\_

2. Date of birth: \_\_\_\_\_

3. Current address of Ward: \_\_\_\_\_

4. Ward's present living arrangement is:

- |                                          |                                            |
|------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Own home        | <input type="checkbox"/> Nursing home      |
| <input type="checkbox"/> Guardian's home | <input type="checkbox"/> Skilled care      |
| <input type="checkbox"/> Hospital        | <input type="checkbox"/> Intermediate care |
| <input type="checkbox"/> Relative's home | <input type="checkbox"/> Personal care     |

\_\_\_\_\_  
Relationship

Other: \_\_\_\_\_

5. Ward has been at present residence since \_\_\_\_\_  
(If Ward has lived elsewhere during the reporting period, list description and address of each residence and the length of stay at each):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. During this reporting period, the Ward's mental condition has:

Remained about the same.

Improved. Describe: \_\_\_\_\_  
\_\_\_\_\_

Deteriorated. Describe: \_\_\_\_\_  
\_\_\_\_\_

7. During this reporting period, the Ward's physical health has:

Remained about the same.

Improved. Describe: \_\_\_\_\_  
\_\_\_\_\_

Deteriorated. Describe: \_\_\_\_\_  
\_\_\_\_\_

8. During this reporting period, the Ward's social condition has:

Remained about the same.

Improved. Describe: \_\_\_\_\_  
\_\_\_\_\_

Deteriorated. Describe: \_\_\_\_\_  
\_\_\_\_\_

9. During this reporting period, the Ward has received the following services:

Medical: \_\_\_\_\_

Educational: \_\_\_\_\_

Social: \_\_\_\_\_

Vocational: \_\_\_\_\_

Other: \_\_\_\_\_

10. My visits and activities on behalf of the Ward were:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. The guardian  should  should not be continued or modified for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_

12. I  do  do not have responsibility for managing the Ward's estate. If so, an accounting of the estate  is attached  was filed last year.

13. A standby guardian  has  has not been appointed.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Guardian

\_\_\_\_\_  
Guardian's Phone Number

\_\_\_\_\_

\_\_\_\_\_  
Guardian's Social Security Number

\_\_\_\_\_  
Address

\*\*\*\*\*

SUBSCRIBED and SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_\_.

My Commission expires: \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

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**To be signed by Standby Guardian if one is appointed.**

I, the undersigned, state that I am the Standby Guardian of the above-named Respondent and continue to be willing to serve in the event of the death, resignation, removal or incapacity of the Guardian.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Standby Guardian


\_\_\_\_\_  
Standby Guardian's Phone Number

\_\_\_\_\_

\_\_\_\_\_  
Standby Guardian's Social Security Number

\_\_\_\_\_  
Address



AOC-856 Rev. 4-02 Page 1 of 2 Commonwealth of Kentucky Court of Justice <a href="http://www.kycourts.net">www.kycourts.net</a> KRS 387.175, 387.670, 387.710 395.610-.657; 395.990	Doc. Code: SET    <b>PERIODIC/FINAL SETTLEMENT OF          GUARDIAN/CONSERVATOR FOR</b> <input type="checkbox"/> MINOR <input type="checkbox"/> DISABLED PERSON	Case No. _____ Court <u>      District Probate      </u> County      _____
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**Notice to Guardian/Conservator:** File this Settlement one (1) year after appointment and annually thereafter. If the net estate is \$5,000 or less, file this Settlement every two (2) years after the original report.

**IN RE: Estate of** \_\_\_\_\_, a  Minor under 18  Disabled Person.

Comes \_\_\_\_\_, appointed as  Guardian  Conservator of the above estate on \_\_\_\_\_, 2\_\_\_\_. This  Periodic  Final Settlement indicates, by itemized statement and supported by receipts and vouchers, the assets received and disbursements made since the Inventory or last Settlement was filed. It is submitted pursuant to:

KRS 387.710    OR     KRS 387.175 and 395.610 - 395.657

**ASSETS & INVESTMENTS**

*(Include anything of value to the estate including government benefits, Social Security and SSI pension plan benefits, savings and checking accounts, certificates of deposit, all personal property, rents from real estate, and proceeds from the sale of real estate and personal property. Attach additional sheets of paper if necessary).*

<b><u>ITEM</u></b>	<b><u>AMOUNT</u></b>
_____	\$ _____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
<b>TOTAL ASSETS RECEIVED:</b>	\$ _____

<b><u>DISBURSEMENTS</u></b>	<b><u>AMOUNT</u></b>
_____	\$ _____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
<b>TOTAL DISBURSEMENTS MADE:</b>	\$ _____

<b><u>BALANCE</u></b>	<b>ASSETS LESS DISBURSEMENTS:</b>	\$ _____
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For Periodic Settlements - carry balance forward to next report.  
 For Final Settlements - indicate to whom balance was paid and attach receipt.

**IN PERIODIC SETTLEMENTS:**

PLAN FOR PRESERVING AND MAINTAINING ESTATE *(not to be filled out if estate has net value of \$5,000 or less)*

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**IN FINAL SETTLEMENTS:**

UNPAID CREDITORS - ALLOWED CLAIMS

_____	\$	_____
_____		_____
_____		_____
_____		_____
_____		_____
_____		_____
	<b>TOTAL</b>	\$ _____

CREDITORS - DISALLOWED CLAIMS

_____	\$	_____
_____		_____
_____		_____
_____		_____
_____		_____
_____		_____
	<b>TOTAL</b>	\$ _____

Above-named Guardian/Conservator submits this Settlement to the Court, and if a Final Settlement, asks that the Surety be discharged.

\_\_\_\_\_  
**Guardian's/Conservator's Signature**

Subscribed and sworn before me on _____, 2____. My commission expires: _____, 2____.
_____ Name/Title