

**SAMPLE ACCOUNT FOR INCAPACITATED ADULT**  
**COMMONWEALTH OF VIRGINIA**

Court File No. ....

Circuit Court of .....

Estate of ....., an incapacitated adult

Residence of incapacitated person: .....

Type of Fiduciary:  Conservator  Guardian  Committee  
 Trustee for ex-service person  Limited Conservator

Name of fiduciary ..... Day telephone .....

Mailing address .....

Name of other fiduciary ..... Day telephone .....

Mailing address .....

This is account number  one  two  three  ..... Is this a final account?  yes  no.  
 From ..... (date of qualification or end of last account) to ..... (end of this account)

**ACCOUNT SUMMARY**

1. Beginning Assets (from Parts 1, 2 and 5 of the inventory or from the prior account)	\$ 102,306.65
2. Receipts*	\$ 37,328.08
3. Gains on Asset Sales (attach itemized list)	\$ 1,125.00
4. Adjustments (attach itemized list)	\$ 4,375.00
5. Total of 1, 2, 3 and 4 (must equal Total on Line 10)	\$ 145,134.73
6. Disbursements (attach itemized list)	\$ 34,085.00
7. Losses on Asset Sales (attach itemized list)	\$ 0.00
8. Distributions (final account only) (attach itemized list)	\$ 0.00
9. Assets on Hand (attach itemized list) (carrying value)	\$ 111,049.73
10. Total of 6, 7, 8 and 9 (must equal Total on Line 5)	\$ 145,134.73

\* Any amounts received as Designed Representative but not included in 2 above. (See Va. Code Section 26-17.10; Instruction III.A.) \$ 3,000.00

\*\* Market Value of Assets on Hand (See Instruction IX.D.) \$ 111,799.73

I (We) certify that this is a true and accurate accounting of the assets of this estate for the period described and that to the best of my/our knowledge all taxes have been paid or provided for.

Date ..... Fiduciary's signature .....

Date ..... Fiduciary' signature .....

**NOTE:** Virginia law requires that every account be signed by all fiduciaries.

RECEIPTS:

LMN Bank interest

6/25/06	53.51
7/25/06	54.17
8/25/06	55.73
9/25/06	56.59
10/25/06	56.82
11/25/06	57.80
12/25/06	58.99
1/25/07	59.40
2/25/07	60.10
3/25/07	60.95
4/25/07	61.44
5/25/07	62.30

STU Corporation, dividends

6/30/06	50.00
9/30/06	50.00
12/31/06	65.00
3/31/07	65.00

Employer's disability payments –	10 months @ \$490	4,900.00	
	2 months @ \$510	1,020.00	5,920.00

CDO Annuity – 12 months @ \$2,400	28,800.00
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ABC Bank, interest

6/30/06	415.10
9/30/06	418.55
12/31/06	420.92
3/31/07	425.71

TOTAL RECEIPTS	37,328.08
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GAINS ON ASSET SALES:

6/14/06 Net Proceeds of sale of 80 shares of NOP Company	5,125.00
less carrying value of	<u>4,000.00</u>
TOTAL GAINS	1,125.00

ADJUSTMENTS:

Correct 500 shares of STU Corp. from  
 \$119.75 per share on Inventory to  
 true Inventory value of \$128.50/share  
 TOTAL ADJUSTMENTS:

59,875.00  
64,250.00  
 4,375.00

DISBURSEMENTS:

Check #

#008 ABC Agency, bond premium  
 Sunshine Nursing Home  
 6/06-5/07, 12 months @ \$2,785/month  
 #009 Dr. John Doe  
 #015 Dr. John Doe  
 #024 Dr. Mary Roe

490.00  
 33,420.00  
 50.00  
 50.00  
75.00

TOTAL DISBURSEMENTS:

34,085.00

LOSSES ON ASSET SALES – none

0.00

DISTRIBUTIONS – none

0.00

ASSETS ON HAND:

Fifth National Bank,  
 Money Market Acct. #123789  
 500 shares of STU Corp. at carrying  
 value of \$128.50/share (5/31/07 market  
 value of \$130/share = \$65,000)  
 Third National Bank, Savings Acct.  
 TOTAL ASSETS ON HAND

20,907.73  
 64,250.00  
 25,892.00

111,049.73