

Form 23-1418: Inventory of Assets of Protected Person

IN THE TRIAL COURT OF THE SAC & FOX TRIBE OF THE MISSISSIPPI IN IOWA

In RE the Conservatorship of: _____, DOB: _____ <input type="checkbox"/> Minor Child <input type="checkbox"/> Adult	Case No. _____ <p style="text-align: center;">INVENTORY OF ASSETS OF PROTECTED PERSON</p>
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COMES NOW, _____, the Full Limited Conservator of the abovementioned person and hereby states that the following is a true and correct inventory of the assets and liabilities of the Ward as of the date of the Order appointing the Conservator. Upon diligent inquiry, I have not been able to discover any other debts or property belonging to this Estate of my ward. If additional debts and/or property come into the possession or to the knowledge of the Conservator, a supplemental inventory shall be filed within 30 days.

1. Protected Person's assets

A. Real Estate

Type of Real Estate	Jointly owned? <i>Check box if jointly owned</i>	Market Value <i>What it would sell for</i>	Debt total <i>amount owed on debt and to whom</i>	Net value <i>Market value minus debt owed</i>
Homestead Address:	<input type="checkbox"/>	\$ _____	\$ _____ to:	\$ _____
Other Real Estate:	<input type="checkbox"/>	\$ _____	\$ _____ to:	\$ _____

Check this box if you have attached a sheet with additional information.

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B. Vehicles *Includes cars, trucks, motorcycles, and other motorized vehicles.*

Vehicle(s) <i>Make (e.g., Ford)</i> <i>Year</i>	Jointly owned? <i>Check box if jointly owned</i>	Market Value <i>What it would sell for</i>	Debt total <i>amount owed on debt and to whom</i>	Net value <i>Market value minus debt owed</i>
Make: Year:	<input type="checkbox"/>	\$ _____	\$ _____ to:	\$ _____
Make: Year:	<input type="checkbox"/>	\$ _____	\$ _____ to:	\$ _____
Make: Year:	<input type="checkbox"/>	\$ _____	\$ _____ to:	\$ _____

Check this box if you have attached a sheet with additional information.

C. Securities, stocks, & bonds

Securities, stocks, & bonds <i>Company Name</i>	Jointly owned? <i>Check box if jointly owned</i>	Market Value <i>What it would sell for</i>	Debt total <i>amount owed on debt and to whom</i>	Net value <i>Market value minus debt owed</i>
	<input type="checkbox"/>	\$ _____	\$ _____ to:	\$ _____
	<input type="checkbox"/>	\$ _____	\$ _____ to:	\$ _____
	<input type="checkbox"/>	\$ _____	\$ _____ to:	\$ _____

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D. Life Insurance

Life Insurance <i>Company Name</i>	Jointly owned? <i>Check box if jointly owned</i>	Cash Value <i>Not death benefit</i>	Loan from cash value <i>Total amount still owed on loan</i>	Cash Value <i>Minus loan owed</i>
	<input type="checkbox"/>	\$ _____	\$ _____	\$ _____
	<input type="checkbox"/>	\$ _____	\$ _____	\$ _____
	<input type="checkbox"/>	\$ _____	\$ _____	\$ _____

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E. Financial Accounts

Checking & Savings Accounts <i>Bank or Credit Union name, type of account, and last 4 digits of account number</i>	Jointly owned? <i>Check box if jointly owned</i>	Cash Value	Personal loans or overdraft accounts <i>Total amount still owed, if any</i>	Net value <i>Cash value minus loan/overdraft owed</i>
	<input type="checkbox"/>	\$ _____	\$ _____	\$ _____
	<input type="checkbox"/>	\$ _____	\$ _____	\$ _____
	<input type="checkbox"/>	\$ _____	\$ _____	\$ _____

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Financial Accounts *continued*

Type of Account	Amount Received	Payment(s) Received
Tribal Per Capita	\$ _____	Once/Weekly/Monthly/Other
Monetary Award or Settlement <i>from any Court Action</i>	\$ _____	Once/Weekly/Monthly/Other

F. Household

Household contents <i>List all items valued at \$1,000 or more</i>	Jointly owned? <i>Check box if jointly owned</i>	Market Value <i>What it would sell for</i>	Debt total <i>amount owed on debt and to whom</i>	Net value <i>Market value minus debt owed</i>
	<input type="checkbox"/>	\$ _____	\$ _____	\$ _____
	<input type="checkbox"/>	\$ _____	\$ _____	\$ _____
	<input type="checkbox"/>	\$ _____	\$ _____	\$ _____
	<input type="checkbox"/>	\$ _____	\$ _____	\$ _____
	<input type="checkbox"/>	\$ _____	\$ _____	\$ _____
	<input type="checkbox"/>	\$ _____	\$ _____	\$ _____

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G. Retirement Assets

Retirement assets <i>Examples: Pensions, IRAs, 401(k)s, annuities, etc.</i>	Jointly owned? <i>Check box if jointly owned</i>	Market Value	Loan from retirement account <i>Total amount still owed, if any and to whom</i>	Net value <i>Market value minus loan owed</i>
	<input type="checkbox"/>	\$ _____	\$ _____ To:	\$ _____
	<input type="checkbox"/>	\$ _____	\$ _____ To:	\$ _____
	<input type="checkbox"/>	\$ _____	\$ _____ To:	\$ _____

Check this box if you have attached a sheet with additional information.

H. Income

Description	Per Month
Income	
Social Security of SSI	
Veterans Benefits	
Pension	
Dividends and Interest	
Other:	

Check this box if you have attached a sheet with additional information.

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2. Liabilities/Debts

A. Mortgages and Liens

Mortgage or Lien Holder <i>Include name and address</i>	Amount Owing	Payment(s) Made, if so, how much? <i>Include how often payments are made</i>
	\$ _____	\$ _____ w / b / m / o
	\$ _____	\$ _____ w / b / m / o
	\$ _____	\$ _____ w / b / m / o

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B. Installment Loans and Notes

Loan Holder <i>Include name and address</i>	Amount Owing	Payment(s) Made, if so, how much? <i>Include how often payments are made</i>
	\$ _____	\$ _____ w / b / m / o
	\$ _____	\$ _____ w / b / m / o
	\$ _____	\$ _____ w / b / m / o

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C. Credit Cards

Credit Card Company <i>Include name and address</i>	Amount Owing	Payment(s) Made, if so, how much? <i>Include how often payments are made</i>
	\$ _____	\$ _____ w / b / m / o
	\$ _____	\$ _____ w / b / m / o
	\$ _____	\$ _____ w / b / m / o

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VERIFICATION

Petitioner, by signing below declares under penalty and perjury and verifies under all applicable laws that he or she believes that the statements herein are true and accurate to the best of his or her knowledge and belief.

****PLEASE WAIT TO SIGN & DATE UNTIL IN FRONT OF A NOTARY****

Signature of Petitioner

Date

Printed Name

Mailing Address

City, State, Zip Code

Phone Number

Email Address

Signed before me on ____ day of _____, 20____.

 Signature of Notary Public, State of _____

Tribal Court Staff Title: _____