



**GUARDIAN OF THE PERSON
INCOME AND EXPENSE WORKSHEET**

(must be attached to Annual Report on Location, Condition and Well-Being of a Ward)

The form on the next page must be used as an attachment to an Annual Report when:

(1) there is no Guardian of the Estate

AND

(2) the Guardian of the Person is managing funds of the Ward pursuant to Court order *other than Social Security funds*.



GUARDIAN OF THE PERSON INCOME AND EXPENSE WORKSHEET

(must be attached to Annual Report on Location, Condition and Well-Being of a Ward)

| | | | |
|---|--|---|---|
| CAUSE NUMBER | | | |
| WARD'S NAME | | | |
| GUARDIAN'S NAME | | | |
| REPORTED PERIOD (MM/DD/YYYY) | TO | | |
| SAVINGS | | | |
| TOTAL SAVINGS ON HAND AT THE BEGINNING OF THE REPORTING PERIOD (including any Interest Earned) | | | \$ |
| INCOME | | | |
| MONTH AND YEAR | INCOME SOURCE | ANNUAL INCOME RECEIVED (other than Social Security) | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| TOTAL INCOME | | | \$ |
| GROSS ASSETS (SAVINGS & INCOME) = | | | \$ |
| EXPENDITURES | | | |
| MONTH AND YEAR | EXPENSES FOR FOOD AND HOUSING | EXPENSES FOR MEDICAL/DENTAL | EXPENSES FOR CLOTHING, PERSONAL ITEMS, RECREATION, MISCELLANEOUS |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| SUBTOTAL | \$ | \$ | \$ |
| TOTAL EXPENDITURES | | | \$ |
| NET ASSESTS (GROSS ASSETS – TOTAL EXPENDITURES) = | | | \$ |