

CAUSE NO. _____

IN THE GUARDIANSHIP

OF

☐ MINOR ☐ ADULT

§ IN THE COUNTY COURT
§
§ AT LAW NO. 2 OF
§
§ HUNT COUNTY, TEXAS

INVENTORY, APPRAISEMENT, AND LIST OF CLAIMS

Date of Guardian's Qualification: ____/____/____
Bond Amount \$ _____ OR ☐ Waived

The following is a full, true, and complete inventory and appraisal of Ward's separate and community property, including personal property wherever located and of all real property located in the state of Texas, together with a list of claims due and owing to this estate as of the date of qualification of the Guardian, or that have come to the possession or knowledge of Guardian as of the date above.

SUMMARY OF WARD'S ASSETS

REAL PROPERTY	<i>(See Schedule A)</i>	\$
STOCKS, BONDS, AND SECURITIES	<i>(See Schedule B)</i>	\$
CASH (INCLUDING FINANCIAL ACCOUNTS)	<i>(See Schedule C)</i>	\$
JOINTLY OWNED PROPERTY	<i>(See Schedule D)</i>	\$
PERSONAL PROPERTY	<i>(See Schedule E)</i>	\$
<i>TOTAL ASSETS</i>		\$

LIST OF CLAIMS OWING TO ESTATE

☐ No Claims Due or Owing to the Estate)

Description	Community	Separate	Value
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
<i>TOTAL CLAIMS</i>			\$

The Inventory, Appraisement, and List of Claims should be approved, ordered, and entered into record.

Respectfully submitted,

Date

Attorney
State Bar No.:
Email:
Fax:
Phone:
Address:

CAUSE NO. _____ IN THE GUARDIANSHIP OF _____

SCHEDULE A

Real Property

(Please attach copy of any deeds to property owned by the Ward, include value of property)

☐ **WARD HAS NONE**

Description	Community	Separate	Value
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
TOTAL REAL PROPRTY VALUE		\$	

CAUSE NO. _____ IN THE GUARDIANSHIP OF _____

SCHEDULE B
Stocks, Bonds and Securities

(Please list any stocks and bonds owned by the Ward. Specify Institution/Last 4 Digits of Account, and Type of Account)

☐ **WARD HAS NONE**

Description	Community	Separate	Value
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
TOTAL STOCKS/BONDS/SECURITES		\$	

IN THE GUARDIANSHIP OF _____

(Please list any checking and/or savings accounts that are in the Ward's name.
Specify Institution/Last 4 Digits of Account, and Type of Account)

Description	Community	Separate	Value
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
TOTAL CASH		\$	

CAUSE NO. _____ IN THE GUARDIANSHIP OF _____

SCHEDULE D
Jointly Owned Property

(Please attach copy of any deeds to property jointly owned by the Ward, include value of property)

☐ **WARD HAS NONE**

Description	Community	Separate	Value
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
TOTAL JOINT OWNED PROPERTY VALUE		\$	

CAUSE NO. _____ IN THE GUARDIANSHIP OF _____

SCHEDULE E
Personal Property

☐ **WARD HAS NONE**

Description	Community	Separate	Value
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	\$
TOTAL PERSONAL PROPERTY VALUE		\$	

GUARDIAN'S OATH

STATE OF TEXAS §

COUNTY OF _____ §

I, _____, Guardian in the above listed case, having been duly sworn, state on oath that the foregoing Inventory, Appraisement, and List of Claims is a true and complete statement of all the property and claims of the ward's estate that have come to my knowledge.

Guardian

SUBSCRIBED AND SWORN TO BEFORE ME BY _____

on this the _____ day of _____, _____.

SEAL:

Notary Public, State of Texas

CAUSE NO. _____

IN THE GUARDIANSHIP

OF

§
§
§
§
§

IN THE COUNTY COURT

AT LAW NO. 2 OF

HUNT COUNTY, TEXAS

ORDER APPROVING INVENTORY, APPRAISEMENT AND LIST OF CLAIMS

The foregoing Inventory, Appraisement and List of claims of the above Estate having been filed and presented and the Court having considered and examined the same and being satisfied that it should be approved and there having been no objections made thereto, it is in all respects **APPROVED** and **ORDERED** entered of record.

Signed this _____ day of _____, 20 ____.

JUDGE JOEL D. LITTLEFIELD
HUNT COUNTY, TEXAS