

AOC 855 Doc. Code: INV
 Rev. 10-12
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 Commonwealth of Kentucky
 Court of Justice www.courts.ky.gov
 KRS 387.100



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

Case No. _____
 Court _____ District _____
 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 under18 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. **Real Property:** (Include description, address, probable value and probable value of rent.) **Value**
- | | |
|-------|----------|
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |

2. **Personal Property:**
- a. Motor Vehicles (Autos, Trucks, Farm Equipment) **Value**
- | | |
|-------|----------|
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |

- b. Household Appliances and Jewelry **Value**
- | | |
|-------|----------|
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |

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.	<u>Claims against</u> the Ward:	Value
	_____	\$ _____
	_____	\$ _____

6.	<u>Claims by the Ward</u> against others:	Value
	_____	\$ _____
	_____	\$ _____

_____ Date

_____ Guardian/Conservator Signature

_____ Guardian's Phone Number

_____ Address

Subscribed and sworn to before me this _____ day of _____, _____.

_____ Name/Title