

COURT OF COMMON PLEAS OF BUCKS COUNTY, PENNSYLVANIA ORPHANS' COURT DIVISION

ESTATE OF INCAPACITATED PERSON

Petition for Adjudication

In re

Account of Guardian

Audit List of,

The Petition of
.....
..... respectfully represents that:

State date and other details.

1. Petitioner was appointed plenary/limited guardian of the estate of the said incapacitated person on
.....,, by

State whether guardianship continues or has terminated. If continuing refer to Decree authorizing account (see 20 Pa. C.S.A. §5531). If terminated, state whether by competence or death of ward; or by death, resignation, etc. of guardian. State particulars.

2. The guardianship

State to whom, how and when notice was given. Submit copies of notice.

3. Written notice of the filing of the account and of the call thereof for audit was given to all parties to whom notice is required by Pa. O.C. Rule 6.3, by

See 20 Pa. C.S.A. §5533, Pa. O.C. Rules 6.3, 6.7 and 6.8 and Bucks O.C. Rules 5.4A and 6.3A.

State here any questions requiring adjudication, inserting or attaching full statements of fact. Set forth, in detail, position of accountant.

4.

State here any additional receipts or disbursements since filing account, to be included in adjudication.

See 20 Pa. C.S.A. 5533.1. Strike out if inapplicable.

5. State what assets, if any, have been distributed to personal representative; if assets have been so distributed, attach the personal representative's shore certificate and receipt:

Use only when all assets have been distributed to personal representative. Strike out if inapplicable.

Wherefore petitioner asks for discharge from all further liability and accountability for the assets so distributed to the personal representative.

Strike out if inapplicable. If distribution is to be made to a personal representative attach a short certificate. STATE WHETHER THE COURT SHOULD DIRECT A SCHEDULE OF DISTRIBUTION BE FILED.

Wherefore petitioner asks that distribution of the balance of principal and income subject to distribution, if any, heretofore properly made be awarded to

ATTORNEY FOR PETITIONER

ADDRESS

TEL #

PA LD. #

State of Pennsylvania :

: ss.

County of Bucks :

above-named petitioner . . . ,being duly according to law,

depos e(s) and say (s) that the facts set forth in the foregoing petition which are within (her, his, their)

personal knowledge are true, and as to facts based upon information received from others,

..... believe(s) them to be true.
(she, he, they)

..... and subscribed

before me this day

of

Do not write in this space.

Attach all riders and other papers pertaining to any paragraph of the petition, to this page and to this page only.

Fasten papers IN this space, but so that all writing is below this space.

DO NOT ATTACH PAPERS PROJECTING THIS FORM. FOLD IF NECESSARY.

File No.

Audit List of

COURT OF COMMON PLEAS OF
BUCKS COUNTY
ORPHANS' COURT DIVISION

ESTATE OF

Incapacitated Person

Petition For Adjudication

TO BE SUBMITTED HEREWITH:

1. Appearance for parties represented.
2. Copies of notices of audit.

ATTORNEY:

ADDRESS:

TEL. #:

PA. I.D. #:

If spaces provided in this form are insufficient to set forth the necessary and required facts and information, use space provided on page to which papers are to be attached to complete said facts and information.