STATE OF ILLINOIS
IN THE CIRCUIT COURT OF THE 20TH JUDICIAL CIRCUIT
ST. CLAIR COUNTY- IN PROBATE

IN THE MATTER OF THE GUARDIANSHIP OF:)
) NO. ____________________
____)
(Minor and Disabled Adult))

REPORT – CURRENT ACCOUNT

The undersigned _____________________________, guardian of the above
(name)
Minor/Disabled person, respectfully submits to the Court the following report of his/her acts and doings in the administration of this case during the interim period from ___________________, 20______; to _________________________, 20_____:

DATE	ITEMS OF RECEIPTS	TOTAL AMOUNT DOLLAR CTS.

Total Amount of Money Received or Collected:

DISBURSMENTS

The following payments are substantiated with the attached vouchers, which are arranged in the order listed below.

DATE	**ITEMS PAID OUT**	**CHECK NUMBER**	**TOTAL AMOUNTS DOLLARS CTS.**

TOTAL AMOUNT PAID OUT,

RECAPITULATION

	DOLLARS	CTS.
TOTAL AMOUNT RECEIVED,		
TOTAL AMOUNT PAID OUT		
BALANCE DUE,		

The following is an itemized account of notes, bonds, accounts and evidences of indebtedness which are herewith presented for inspection, composing the personal estate of my said Minor/Disabled person.

DESCRIPTION

KIND OF INSTRUMENT	DATE	PAYOR	SECURITITS	RATE OF INT.	AMOUNT	REMARKS

RECAPITULATION

Total Receipts ___________________________

Total Disbursements ______________________

Balance Due ____________________________

Dated ___________________________, 20_______

____
(Guardian)
Address: _____________________________
____
Phone #: _____________________________
Email Address: ________________________

____
(Guardian)
Address: _____________________________
____
Phone #: _____________________________
Email Address: ________________________

STATE OF ILLINOIS
COUNTY OF ST. CLAIR

____, the guardian if the case of

____, Minor or Disabled Adult

being duly sworn, says that the foregoing is a full and correct account of all the dealings and transactions, and of all monies and effects received and disbursed in the administration of this case during the interim period from ________________________________, 20 __________ to _________________________________, 20 _________.

____
(Guardian)

____
(Guardian)

Signed and sworn to before me

___________________, 20____________

____
(Clerk of the Circuit Court/ Notary Public)

By: ___________________________, Deputy