

RECEIVED:



- Instructions:**
- 1) A guardian of an adult with intellectual disability who has been granted authority to manage finances may use this form to file an inventory of the assets of the adult with intellectual disability.
 - 2) If the assets of the adult with intellectual disability exceed \$10,000, a conservator of the estate under C.G.S. sections 45a-644 to 45a-663 will be necessary to manage finances.
 - 3) List real property (and attach a complete copy of the recorded deed) and personal property in the manner described. List all solely owned assets, including fractional shares; use market value as of date of acquisition. Do not include real property located outside the state of Connecticut, jointly owned property or property passing by beneficiary designation.
 - 4) The fiduciary must send a copy of the inventory to each party and attorney and certify to the court that a copy has been sent.
 - 5) For more information, see C.G.S. sections 45a-340 et seq. and 45a-677a, and Probate Court Rules of Procedure, section 43.4.
 - 6) Type or print in ink. Use an additional sheet, or PC-180, if more space is needed.

Probate Court Name

District Number

In the Matter of

Fiduciary (Include position of trust.)

Date of Appointment as Fiduciary

INITIAL INVENTORY

SUBSTITUTE OR CORRECTED

SUPPLEMENTAL

	Net Value
Description	
(a) REAL PROPERTY (Attach a complete copy of the recorded deed. Provide property address, decedent's or respondent's interest in the property, fair market value, balance of unpaid mortgage and net value of interest. If unpaid mortgage is higher than fair market value, net value is reported as zero.)	
(b) PERSONAL PROPERTY	
1. Motor Vehicle(s) (Provide year, make, model and vehicle identification number.)	
2 Bank Accounts (Provide name of financial institution and last four digits of the account number for each account.)	

In the Matter of _____

Description	Net Value
(b) PERSONAL PROPERTY	
3. Stocks and Bonds (Provide description, number of shares and value per share.)	
4. Other Personal Property (Include description.)	
5. Total from Additional Sheets Attached, if any	
TOTAL	

The representations made in this inventory are made under penalty of false statement.

Signature of Fiduciary	
Type or Print Name	
Date	
Signature of Fiduciary	
Type or Print Name	
Date	

CERTIFICATION

I hereby certify that a copy of this inventory was sent to the following persons as required by Probate Court Rules of Procedure, section 43.4:

Signature of fiduciary or attorney _____

Type or Print Name _____

Date _____