

B. DISBURSEMENTS

Date of Payment	To Whom Paid	Purpose of Payment	Amount
			\$
			\$
			\$
			\$
			\$
			\$
TOTAL			\$

C. ASSETS ADDED

Date	Description of Transaction	Gross Purchase Price	Value at date of acquisition if other than by purchase
			\$
			\$
			\$
			\$
			\$
			\$
TOTAL			\$

D. ASSETS DELETED

Date	Description of Transaction	Gross Sale Proceeds	Selling Costs	Carrying Value	Gain or (Loss)

SUMMARY

Total Income..... \$ _____
Total Disbursements..... \$ _____
Total Assets Added..... \$ _____
Total Assets Deleted..... \$ _____
Total Changes..... \$ _____

A Summary of the Fiduciary Estate to be carried forward to next account:

A. REAL ESTATE \$ _____
B. CASH & CASH EQUIVALENTS \$ _____
C. PERSONAL PROPERTY \$ _____
D. STOCKS \$ _____
E. BONDS \$ _____
F. OTHER \$ _____
TOTAL \$ _____

The Fiduciary bond, if any, has been filed in this action in the amount of \$ _____ .

VERIFICATION:

I solemnly affirm under the penalties of perjury that the contents of this document are true to the best of my knowledge, information, and belief.

Signature of the Fiduciary _____ Date _____ Signature of the Fiduciary _____ Date _____
Address _____ Address _____
City, State, Zip _____ Telephone _____ City, State, Zip _____ Telephone _____

Name of Fiduciary's Attorney

Address

City, State, Zip

Fax _____ E-mail _____ CPF ID No. _____