

**IN THE DISTRICT COURT OF THE MUSCOGEE (CREEK) NATION  
OKMULGEE DISTRICT**

IN THE MATTER OF )  
THE GUARDIANSHIP OF: )  
 ) Case No. GD-  
\_\_\_\_\_, )  
 )  
Minor Child or Incapacitated adult. )

**ANNUAL INVENTORY FOR THE WARD**

**COMES NOW** \_\_\_\_\_, Guardian of the Estate of \_\_\_\_\_ and state that the following is a true and correct inventory of the assets and liabilities of the Ward as of the date of filing.

**ASSETS**

1. Real Estate: The Ward does/does not possess any real property. If so, list address(s):

2. Financial Accounts: The Ward does not possess a financial account OR The following are the Ward's financial institution and branch; type of account; the last four digits of the account number(s) and balance in each account:

| <b>Financial Institution<br/>and Branch</b> | <b>Type of<br/>Account</b> | <b>Last Four Digits of<br/>Account Number</b> | <b>Balance of Account</b> |
|---|----------------------------|---|---------------------------|
|   |                            |   |                           |
|   |                            |   |                           |
|   |                            |   |                           |
|   |                            |   |                           |

3. Stocks, Bonds, and other Securities: (not held in an account listed above). List:

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4. Personal Property:

| <u>Item</u>                | <u>Value</u> |
|----------------------------|--------------|
| Clothes and personal items | \$           |
| Automobile/Boats           | \$           |
| Other                      | \$           |

5. Income:

| <u>Description</u>     | <u>Per Month</u> |
|------------------------|------------------|
| Income                 | \$               |
| Social Security of SSI | \$               |
| Veterans Benefits      | \$               |
| Pension                | \$               |
| Dividends and Interest | \$               |
| Other:                 | \$               |

**LIABILITIES/DEBTS**

1. Mortgages and Liens: name and address of each mortgage or lien holder and the amount  
owing the property encumbered: \_\_\_\_\_

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2. Installment Loans and Notes: name and address of each loan holder, the amount owing and the amount due monthly: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

3. Credit Cards: name and address of each credit card company, and the outstanding balance owing on each: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

4. Medical Bills: \_\_\_\_\_  
\_\_\_\_\_

I DECLARE UNDER PENTALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Guardian,

\_\_\_\_\_, OK \_\_\_\_\_