

INSTRUCTIONS - FINAL ACCOUNTS

Procedure on Final Accounting by Guardian

A Final Account is always required. Regardless of whether you are proceeding by Notice of Motion or Petition for Decree, the Guardian must prepare a Final Account covering the period from the date of appointment through the date of preparation of the Final Account (see sample format for Final Account). The main purpose of the Final Account is to account for all financial activity throughout the entire guardianship proceeding. This, in turn, allows for turnover of all remaining assets to the appropriate person(s) or entities and for judicial discharge of the Guardian(s) and their surety (if any) from further responsibility.

Notice of Motion -vs- Petition for Decree: Proceeding by Notice of Motion allows all interested parties to receive a copy of the Final Account in advance of consideration by the Judge so that these parties may express any objections in writing. By contrast, proceeding by Petition for Decree means that all interested parties have signed notarized statements acknowledging receipt of the Final Account and consenting to judicial approval of that Final Account.

If Proceeding by Notice of Motion

1. Prepare Notice of Motion (see sample). Insert a future date that is at least 14 days after you will have (a) paid all fees to the County Clerk, (b) filed your original paperwork and (c) served all interested persons/entities with copies by **certified mail**. (This future date is called the return date and is the date your packet of motion papers will physically be sent to the Judge with any other papers received from any other interested party. You may therefore want to pick a return date three or four weeks in the future to give yourself enough time to complete your filing and service (mailing) obligations while still leaving the required 14 days after mailing.)
2. If compensation to a Guardian is being requested out of remaining assets, the Guardian must include an Affidavit In Support of Compensation, stating in reasonable detail the nature of each task performed, the date it was performed and the amount of time involved. The

compensation being sought must also be listed in schedules D and E of the Final Account.

3. If the need for the Final is due to the death of the Incapacitated Person or Person in Need of a Guardian, obtain from the Surrogate's Court a certified copy of Letters Testamentary (if the deceased had a will) or Letters of Administration (if there was no will). If the need for the Final is due to any other reason, this item (#3) does not apply.

4. Prepare a proposed Order Settling Final Account (see sample).

5. File with the Nassau County Clerk at 240 Old Country Road, Mineola, NY 11501, the original Final Account, Notice of Motion, and any supplemental affidavits (e.g., the Affidavit In Support of Compensation), and pay the \$45.00 required fee.

6. File with the Guardianship Part of the Supreme Court at 100 Supreme Court Drive, Mineola, NY 11501, one or more original affidavits stating when each interested person/entity was mailed (by certified mail) a copy of the Notice of Motion, Final Account, any additional papers (see sample Affidavit of Service) and a proposed Order Settling the Final Account (see sample). The Affidavit of Service must be received by the Guardianship Part on or before the return date you inserted in the Notice of Motion.

If Proceeding by Petition for Decree

1. Prepare a proposed Decree (see sample) and a Petition for Judicial Approval of Final Account by Decree (see sample Petition).

2. If compensation to a Guardian is being requested out of remaining assets, the Guardian must include an Affidavit In Support of Compensation, stating in reasonable detail the nature of each task performed, the date it was performed and the amount of time involved. The compensation being sought must also be listed in schedules D and E of the Final Account.

3. If the need for the Final is due to the death of the Incapacitated Person or Person in Need of a

Guardian, obtain from the Surrogate's Court a certified copy of Letters Testamentary (if the deceased had a will) or Letters of Administration (if there was no will). If the need for the Final is due to any other reason, this item (#3) does not apply.

4. Obtain from each and every interested person/entity a Consent to the Final Accounting that has been sworn to by that person or by a representative on behalf of that entity (see sample Consent from Other Interested Party, sample Consent from Executor(trix) or Administrator(trix), and sample Consent from Surety [Surety means bonding company]).
5. File with the Guardianship Part of the Supreme Court at 100 Supreme Court Drive, Mineola, NY 11501, the originals of the proposed Decree, Petition for Judicial Approval of Final Account by Decree, the Final Account, all consents and affidavits, and a certified copy of the Letters Testamentary or Letters of Administration.

**ALL SUBMITTED PAPERS MUST BE ON REGULATION SIZE PAPER (8¹/₂ x 11) AND
EITHER TYPEWRITTEN OR CLEARLY PRINTED IN BLACK INK.**

FOR FURTHER INFORMATION CONTACT THE GUARDIANSHIP PART, (516) 4933121.

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF NASSAU

----- X
In the Matter of the Final Accounting of

**Notice of Motion (for
Judicial Settlement of Final Account)**

as Guardian of

Index No. .-1 -

an Incapacitated Person
(or Person in Need of Guardian), now deceased.
-----X

PLEASE TAKE NOTICE that upon the Order Directing Final Account of this Court dated the ____ day of, 202_____, a copy of which is annexed hereto, the Final Accounting of _____ as Guardian of the Property of _____, the above-named Incapacitated Person/Person In Need of a Guardian, which was duly filed in the Office of the Clerk of the County of Nassau on the ____ day of, 202_____ a copy of which is annexed hereto, (*optional* - and upon the Affidavit in Support of Compensation by, sworn to the ____ day of, 202_____, a copy of which is annexed hereto,) the undersigned will move this Court at an I.A.S. Part to be held at the Courthouse, Supreme Court Drive, Mineola, New York, on the ____ day of, 202_____, at 9:30 o'clock in the forenoon of that day, or as soon thereafter as counsel can be heard, for an order judicially settling, determining and allowing the account as filed, for the fixing of compensation, and for payment of the outstanding bills and other claims made against the assets of the above-named Incapacitated Person/Person In Need of a Guardian as more fully set forth in said accounting, and granting such other and further relief as to the Court may seem just and proper.

Yours, etc.

Name:

Relationship to proceeding:

Address:

To:

SAMPLE FORMAT FOR FINAL ACCOUNT

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF NASSAU

-----X

In the Matter of the Final Accounting of

,

FINAL ACCOUNT

as Guardian of

Index No. _ _____ -1 -

an Incapacitated Person
(or Person in Need of Guardian), now deceased.

-----X

I, _____ < do hereby render the following Final Account of my proceeding as Guardian of the above-named, an Incapacitated Person/Person In Need of a Guardian.

By Order and Judgement of a Justice of the Supreme Court State of New York dated the ____ day of _____, 20____, I was duly appointed Guardian of the above-name _____, an Incapacitated Person/Person In Need of a Guardian.

By an Order of the Hon. _____, Justice of the Supreme Court dated the ____ day of _____, 20____, I was directed to file a Final Account of proceedings as Guardian in the within proceeding covering the period from the date of my appointment to the date of the filing of said Final Account.

SCHEDULE A, attached hereto, contains a full and true statement and description of each article or item of personal property, and the value thereof, and each sum of money, either principal or interest, of the above-named Incapacitated Person/Person in Need of a Guardian which has been received by me during the period from ___/___/20____ [date of appointment as Guardian] to the date of this accounting.

SCHEDULE B, attached hereto, contains a full and true statement of all moneys expended by me as Guardian of the above-named Incapacitated Person/Person in Need of a Guardian during the period from _____ / / 20 _____ *[date of appointment as Guardian]* to the date of this accounting.

SCHEDULE C, attached hereto, contains a full and true statement of the balance now remaining in my hands as Guardian of the above-named Incapacitated Person/Person in Need of a Guardian, the manner in which said moneys are invested or held at the present time, and the name of the institution(s) in which the said moneys are deposited.

SCHEDULE D, attached hereto, contains a full and true statement of the compensation due me as Guardian of the above-named Incapacitated Person/Person in Need of a Guardian.

SCHEDULE E, attached hereto, is a list of all claims against the Estate.

SCHEDULE F, attached hereto, contains the names and post office addresses of all persons interested in these proceedings to whom notice of this application is required to be given.

Dated:

(Signature of Guardian)

SCHEDULE A

*List all assets received on or near date of appointment of Guardian and give total.

Then list all assets received annually from that point to the date of accounting and total. If any Annual Reports have been previously approved by the Court, simply state the totals for each category for that year with no detail. Note these totals are the totals as reported by the Court Examiner, not the Guardian's Annual Report. **For the years without approved Annual Reports, all details must be listed.**

Assets Marshaled on or near date of appointment (Do not include Real Property)

Cash	\$
Investments	\$
Total	\$

Plus Other Assets (list Real Property, jewelry, etc.)

Year 1: Additional Assets Marshaled _____ / __ / ____ through 12/31/ *(first partial year)*

	\$
Additional Principal	\$
Changes in Principal	\$
Income	\$
Total	\$

If the first Annual Account was approved by the Court, just list totals, **if not, list all details.**

Year 2:	Additional Assets Marshaled 1/1/through 12/31/	\$
	Additional Principal	\$ _____
	Changes in Principal	\$
	Income	\$
	Total	\$

If the Annual Account was approved by the Court, just list totals, **if not, list all details**

Year 3:	same as above	\$ _____
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(Add a line for each additional year to present date)

Total assets received	\$
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Plus Other Assets (list Real Property, jewelry, etc. as Other Assets)

SCHEDULE B

List all disbursements made from date of appointment of Guardian to date of accounting.

Year 1: Disbursements made / through 12/31/ *(first partial year)* \$

If the annual for the first year was approved by the Court state the amount of the total disbursements, **if not, list each disbursement in detail.**

Year 2: Disbursements made 20 ____ (Next year) \$

If the annual was approved by the Court, state the amount of the total disbursements, **if not, list each disbursement in detail.**

Year 3: Disbursements made 20 ____ (Next year) \$

Same as above.

(Add a line for each additional year to present date)

Total Disbursements \$

SCHEDULE C

PART I

Receipts per Schedule A	\$ _____
Disbursements per Schedule B	-\$ _____
Balance charged to Guardian/Conservator/Committee	

PART II

ASSETS ON HAND

List the places and manner in which above balance is invested.

<u>Name of Institution/bank</u>	<u>Type of Account/Investment</u>	<u>A m o u n t</u>
		\$ _____
		\$ _____

(Add a line for each additional account)

Total Assets on hand

SCHEDULE D

Compensation claimed, if any, for services rendered as Guardian \$.

(If compensation to a Guardian is being requested out of remaining assets, the Guardian must include an Affidavit In Support of Compensation, stating in reasonable detail the nature of each task performed, the date it was performed and the amount of time involved.)

SCHEDULE E

List all claims against the Estate. State date of claim, identify the claiming party, the nature of the claim, and amount. Unpaid compensation to Guardians, and fees for legal services must be listed here. If there are no claims by any party, state "NONE". *(Submit copy of bills for claims listed in this schedule.)*

<u>Date</u>	<u>Claimant's Name</u>	<u>Nature of Claim</u>	<u>Amount</u>
			\$ _____
			\$ _____

(Add a line for each additional claim)

Total Claims \$

SCHEDULE F

List **names and addresses** of all parties to be given notice. In addition to all potential heirs, and the Court Examiner this list may include the nursing home (or other care facility), the Nassau County Department of Social Services, the Public Administrator, the surety (Insurance Company) on any Guardian's bond, the Veterans Administrator, appearing counsel, other claimants.

Potential Heirs (*state relationship*):

Nursing home/care facility (if any):

If your ward was receiving public assistance, list the government entity administering that assistance. (In Nassau, the entity administering Medicaid is Nassau County Dept, of Social Services, Suite 160, Attn: Legal Unit, 60 Charles Lindbergh Blvd., Uniondale, NY 11553):

Named Estate Representative in any Surrogates Court proceeding (If none, list the Public Administrator - Public Administrator, 240 Old Country Rd - Room 603, Mineola, NY 11501):

Surety (Insurance Company) on Guardian's bond, if any (or insurance broker for Surety):

Veterans Administrator, if receiving VA benefits:

SCHEDULE F - continued from prior page

Appearing counsel, if any:

Other claimants identified in Schedule E:

Court Examiner:

STATE OF NEW YORK) ss.: COUNTY OF)

I, being duly sworn deposes and says:

That I am the Guardian of the property of, that the foregoing final inventory and account contains, to the best of my knowledge and belief, a full and true statement of all my receipts and disbursements on account of my ward and all money and other personal property of my ward which have come into my hands or have been received by any other person of my order of authority, together with a full and true statement and account of the manner in which I have disposed of the same, and all the property remaining in my hands at the present time and a full and true description of the amounts and nature of each investment made by me as Guardian since the date of my appointment to the date of this accounting, and I do not know of any error or omission in the final inventory and account to the prejudice of my ward.

(Signature of Guardian)

Sworn to before me
this day of, 20 _____

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF NASSAU

----- X
In the Matter of the Final Accounting of

_____ as Guardian of

**Affidavit In Support
of Compensation**

Index No. -1 -

an Incapacitated Person
(or Person in Need of Guardian), now deceased. X

STATE OF NEW YORK)
COUNTY OF NASSAU) SS.:

, being duly sworn, deposes and says:

1. I am over the age of 18 years of age and reside at

2. By Order and Judgement of a Justice of the Supreme Court, State of New York dated the ____ day of, 20_____, I was duly appointed Guardian of the above-named _____, an Incapacitated Person/Person In Need of a Guardian.

3. In my capacity as Guardian I have previously been awarded compensation for my services to or on behalf of the Incapacitated Person/Person In Need of a Guardian as follows: *(list any prior awards, the period of time they covered and the dates of the Court's Orders)*

Affidavit In Support of Compensation - continued

4. Since the most recent award of compensation, I have performed the following services to or on behalf of the Incapacitated Person/Person In Need of a Guardian and these services have involved the following expenditures of time: *(Describe in reasonable detail your services as Guardian including the nature of each task performed, the date it was performed and the amount of time involved)*

5. By reason of the foregoing I respectfully request an award of compensation in the amount of \$, or such other amount as the Court finds warranted.

(Signature of Guardian)

Sworn to before me
this day of, 20 _____ .

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF NASSAU

-----X
In the Matter of the Final Accounting of

_____ as Guardian of

Affidavit of Service
by Certified Mail

Index No.-1 -

an Incapacitated Person
(or Person in Need of Guardian), now deceased. X

STATE OF NEW YORK)
COUNTY OF NASSAU SS.:

, being duly sworn, deposes and says: I am not a party to this action, am over the age of 18
years of age and reside at

. On the ____ day of

, 20 ____, I served the within **Notice of Motion**, and **Final Account**, and

(list any additional documents served) by mailing a copy to the address set forth after each
name by Certified Mail.

Name & Address of all persons/entities
listed in Schedule F of Final Account

1. Certified Mail Receipt No.

2. Certified Mail Receipt No.

3.

Affidavit of Service by Mail - continued

Certified Mail Receipt No.

4.

Certified Mail Receipt No.

5.

Certified Mail Receipt No.

6.

Certified Mail Receipt No.

7.

Certified Mail Receipt No.

(Signature of person who does mailing)

Sworn to before me

this day of, 20_____.

Notary Public

Copies of the Certified Mailing Receipts Should Also Be Attached.

At an I.A. Part of the Supreme Court of the State of New York, County of Nassau, held at the Courthouse located at 100 Supreme Court Drive, Mineola, New York, on the day of _____, 20 .

P R E S E N T :

HON.

_____,
Justice of the Supreme Court.

-----X
In the Matter of the Final Account of

**ORDER SETTLING
FINAL ACCOUNT**

as Guardian for the Personal Needs and Property Management of

Index No.:
Motion Seq. No.:

an Incapacitated Person/Person in Need of a Guardian, now Deceased / Due to Depletion Original

Return Date:

X

A proceeding having been commenced pursuant to Article 81 of the Mental Hygiene Law for the appointment of a Guardian for _____, an Alleged Incapacitated Person; and following a hearing conducted herein, the Court having found _____ to be an Incapacitated Person/Person in Need of a Guardian, and having appointed _____ as the Guardian for his/her Personal Needs and Property Management by Order and Judgment dated _____, and the Court approved a bond in the amount of \$ _____; and

By Order dated _____, the Court having directed _____ as Guardian for the Personal Needs and Property Management of _____, an Incapacitated Person, to file and settle a Final Inventory and Account of his/her proceedings as such from the date of his/her appointment to the date of the filing thereof due to the passing of _____, the

Incapacitated Person _____ Guardian for the Person and Property of _____

_____, an Incapacitated Person, now deceased,

having presented and filed a Final Account of his/her proceedings in the Office of the Clerk of the County of Nassau; and notice of these proceedings having been duly given to _____

; and _____, ESQ., the Court Examiner, as evidenced by the Affidavit of Service by _____

Certified Mail of _____ sworn to on the _____; and _____

Upon reading the aforesaid Order and Judgment dated _____; the Order Directing Final Account, the Final Report and Account dated and verified _____; the Notice of Motion dated _____ and returnable on _____; the Affidavit of Service by Certified Mail of _____ sworn to on the _____; the Affidavit of Services of _____

_____, Guardian, dated _____; and _____

NOW, on motion of _____, the Guardian, it is _____

ORDERED, that the Final Inventory and Account of proceedings of _____, as Guardian for the Property Management of _____, an Incapacitated Person, now deceased, be and the same hereby is judicially settled passed, and allowed as rendered and filed according to the following summary statement:

SUMMARY STATEMENT

PRINCIPAL RECEIVED UPON APPOINTMENT:	\$
ADDITIONAL PRINCIPAL:	\$
CHANGES TO PRINCIPAL:	\$
INCOME:	\$
TOTAL RECEIPTS:	\$
DISBURSEMENTS:	\$

CHARGE TO GUARDIAN:		\$
CASH AND PROPERTY ON HAND:		\$
Consisting of:	Cash:	\$
Investments with an Inventory Value Of:		\$

plus (any Real Property or personal assets)

and it is further

ORDERED, that _____, the Guardian for the Property Management shall pay from the funds of the Incapacitated Person the total sum of \$ _____ to _____, ESQ. as and for his compensation (\$ _____) and disbursements (\$ _____) for services rendered as _____; and it is further

ORDERED, that within THIRTY (30) DAYS of the date hereof, _____ the Guardian for the Property Management shall turnover the balance left in his hands after payment of the aforementioned fees, plus accrued interest, if any, to _____ the duly appointed fiduciary of the Estate of _____; and it is further

ORDERED, that within SIXTY (60) DAYS of the date hereof, the attorney Guardian shall file an affidavit with receipts, releases or cancelled checks evidencing compliance with the provisions of the within Order, together with an *Ex Parte* Order discharging the Guardian and his surety, and it is further

ORDERED, that the Guardian shall forthwith serve a copy of the within Order by first class mail or personally upon all persons served with the motion to settle the Final Account.

E N T E R :

_____, J.S.C.

**FORMS TO PROCEED
BY DECREE**

At an I.A. Part of the Supreme Court of the State of New York, County of Nassau, at the Supreme Court Building, 100 Supreme Court Drive, Mineola, New York, on the _____ day of _____, 20__ .

P R E S E N T :
HON.

Justice of the Supreme Court.

-----X
In the Matter of the Application for a Decree Releasing and Discharging

**DECREE DISCHARGING
GUARDIAN AND SURETY
UPON APPROVAL OF
FINAL ACCOUNT**

as Guardian of the Person and Property of

Index No.:

an Incapacitated Person, now Deceased

----- X

Upon reading and filing the annexed petition of _____, Guardian of the Person and Property of _____, an Incapacitated Person, now deceased, duly verified on the _____ day of _____, 20__ , in the above entitled matter, praying that a decree be made and entered herein releasing and discharging the petitioner from all further liability and responsibility as Guardian of the Property of _____, the Incapacitated Person herein, and releasing and discharging _____, the surety on petitioner’s bond, from all further liability and responsibility to persons interested in the property of said _____, the Incapacitated Person herein, to persons interested in the property of said _____, the Incapacitated Person herein, and it appearing that said _____, the Incapacitated Person herein, died on _____, a resident of Nassau County, New York, and it appearing that petitioner has fully accounted and has made full disclosure in writing of all his/her proceedings affecting the

property of the said Incapacitated Person to all persons interested, and upon reading the consents of

and _____ represented by petitioner to be all the persons interested in an accounting of the said Incapacitated Person's property, said consents being duly acknowledged and stating said persons' approval of the account of the petitioner and consenting to the discharge of the petitioner and the surety on petitioner's bond, and no one appearing in opposition, and due deliberation having been had thereon, and

Now, on motion of _____, it is

ORDERED, that the Guardian herein be and hereby is authorized to withdraw his/her compensation in the sum of \$ _____, and it is further

ORDERED, that the Guardian herein be and hereby is authorized to pay to from the funds of the Incapacitated Person the sum of \$ _____ as and for a fee for legal services, and it is further

ORDERED, that _____ be and he/she hereby is released and discharged from all further liability and responsibility as Guardian of the Property of _____, the Incapacitated Person herein, and _____, the surety on petitioner's bond be and it is hereby released and discharged from all further liability and responsibility to persons interested in the property of said, the Incapacitated Person herein.

E N T E R :

Copies faxed to:

J.S.C.

STATE OF NEW YORK
SUPREME COURT: NASSAU COUNTY

----- X

In the Matter of the Application for a Decree
Releasing and Discharging

as Guardian of the Property of

**Petition for Judicial Approval
for Final Account by Decree**

Index No./

an (Incapacitated Person) or
(Person in Need of Guardian)
Now Deceased (or Due to Depletion)

----- X

TO THE SUPREME COURT, STATE OF NEW YORK,
COUNTY OF NASSAU:

The petition of _____ respectfully states:

1. Petitioner, resides at

2. Petitioner was duly appointed Guardian of the Property of the above-named Incapacitated Person (or PING) by the order of this court dated _____, for an indefinite period of time.

3. Petitioner duly executed and filed in the Office of the Clerk of this Court the bond required by law and fixed and approved by this Court, and thereupon entered upon his/her duties as said conservator/guardian and continued in the exercise of his/her duties.

4. That the said Conservatee/Incapacitated Person died (intestate?) on _____, while a patient at _____. (leaving a Last Will and Testament (hereinafter sometimes referred to as "The Will"), dated _____, which has been duly admitted to probate, if not intestate) by the Surrogate's Court of Nassau County (File No. _____) _____ your petitioner was appointed Executor/Executrix by said Court, and Letters Testamentary were issued accordingly (copy of which is attached hereto).

5. Pursuant to Article "SECOND" of the Will, the Incapacitated Person devised and bequeathed his entire residuary estate to and _____.

STATE OF NEW YORK)ss.:
COUNTY OF NASSAU)

Signature of Guardian
Print Name of Guardian

Sworn to before me this
day of 20 .

Notary Public

STATE OF NEW YORK
SUPREME COURT: NASSAU COUNTY

----- X

In the Matter of the Application for a Decree
Releasing and Discharging

**Acknowledged Consent of
Interested Party to Discharge
of Guardian Without ,
Formal Accounting**

as
Guardian of the Property of

;
an Incapacitated Person
(or Person in Need of Guardian), now deceased
----- X

Index No.-I-

TO THE SUPREME COURT, STATE OF NEW YORK,
COUNTY OF NASSAU:

_____, residing at
, do hereby certify:

1. The undersigned is interested in the property of said Incapacitated Person/Person
in Need of Guardian in my capacity as _____

(Describe your relationship to the Incapacitated Person and/or this proceeding).

2. _____, as Guardian of the property of said
Incapacitated Person/Person in Need of Guardian has delivered to the undersigned the Final
Account of his/her proceeding affecting the property of the said Incapacitated Person/Person in
Need of Guardian_____, and has represented to the undersigned that the said
account is complete and accurate.

3. The undersigned caused said Final Account to be examined and approves
same.

4. The undersigned acknowledges that any and all claims of the undersigned against the
Guardian have been discharged.

Acknowledged Consent of Interested Party to Discharge - continued

5. The undersigned does hereby consent to the discharge of said Guardian as aforesaid, and to the discharge of any Surety on the Guardian's bond.

(Signature)

STATE OF NEW YORK)

) ss.:

COUNTY OF NASSAU)

On the _____ day of, 20 _____ before me personally came _____, to me known and known to me to be the individual described in and who executed the foregoing instrument and acknowledged to me that he/she executed the same.

Notary Public

-----X

In the Matter of the Application for a Decree
Releasing and Discharging

**Acknowledged Consent of Interested
Party to Discharge of Guardian
Without Formal Accounting
[Executor(trix)/Administrator(trix)]**

_____, as
Guardian of the Property of

Index No. - 1 -

_____,
an Incapacitated Person
(or Person in Need of Guardian), now deceased
----- X

TO THE SUPREME COURT, STATE OF NEW YORK,
COUNTY OF NASSAU:

I, _____, residing at hereby certifies that:

1. The undersigned is the Executor(trix)/Administrator(trix) of the Estate of _____, the deceased Incapacitated Person/Person in Need of Guardian in this proceeding, and appointed as such by the Nassau County Surrogate's Court (File No.) on the _____ day of, 20_____ (copy of which is attached).

2. The undersigned is interested in the property of said Incapacitated Person/Person in Need of Guardian in my capacity as Executor(trix)/Administrator(trix).

3. _____, as Guardian of the property of said Incapacitated Person/Person in Need of Guardian has delivered to the undersigned the Final Account of his/her proceeding affecting the property of the said Incapacitated Person/Person in Need of Guardian _____, and has represented to the undersigned that the said account is complete and accurate.

4. The undersigned caused said Final Account to be examined and approves same, and acknowledges that any and all claims of the undersigned against the Guardian have been discharged.

-----X

In the Matter of the Application for a Decree
Releasing and Discharging

as

Guardian of the Property of

**Acknowledged Consent of
Interested Party to Discharge of
Guardian Without Formal
Accounting [SURETY]**

STATE OF NEW YORK
SUPREME COURT: NASSAU COUNTY

Index No. -I-

,
an Incapacitated Person
(or Person in Need of Guardian), now deceased

TO THE SUPREME COURT, STATE OF NEW YORK,
COUNTY OF NASSAU:

I, _____ having an office at _____
do hereby certify:

1. The undersigned is a duly authorized representative of the Surety on the bond filed
by, as Guardian of the property of
, the Incapacitated Person/Person in Need of Guardian in
this proceeding.

2. _____, as Guardian of the property of said
Incapacitated Person/Person in Need of Guardian has delivered to the undersigned the Final
Account of his/her proceeding affecting the property of the said Incapacitated Person/Person in
Need of Guardian and has represented to the undersigned that the said account is complete
and accurate.

3. The undersigned caused said Final Account to be examined and approves
same.

4. The undersigned acknowledges that any and all claims of the Surety against the
Guardian have been discharged.

Acknowledged Consent of Surety to Discharge - continued

5. The undersigned does hereby consent to the discharge of said Guardian as aforesaid, and to the discharge of the Surety on the Guardian's bond.

(Print name of surety)

by: _____
Attorney-in-Fact

STATE OF NEW YORK)

) ss.:

COUNTY OF NASSAU)

On the ____ day of, 20 _____ before me personally came
, to me known and known to me to be the individual described in and who executed the
foregoing instrument and acknowledged to me that he/she executed the same.

Notary Public

LIST OF INTERESTED PERSONS

The following is a list of the persons and entities entitled to any Notice of Motion to Settle a Final Account, or from whom a Consent to Decree must be obtained:

- All persons and entities identified as being entitled to notice in the Order and Judgment appointing Guardian(s)
- Potential Heirs (if any),
- Court Examiner,
- Nursing home/care facility (if any), and, if so, also include Mental Hygiene Legal Service [Mental Hygiene Legal Service, ONE COURT STREET, RIVERHEAD, NY 11902],
- If your ward was receiving public assistance, the government entity administering that assistance. [In Nassau, the entity administering Medicaid is Nassau County Dept, of Social Services, Suite 160, Attn: Legal Unit, 60 Charles Lindbergh Blvd., Uniondale, NY 11553],
- Named Estate Representative in any Surrogate's Court proceeding. If none, substitute (1) the Public Administrator, and (2) any other persons or entities making claim against the estate of the deceased. [In Nassau, the address of the Public Administrator is: Public Administrator, 240 Old Country Rd - Room 603, Mineola, NY 11501],
- Surety (Insurance Company) on Guardian's bond, if any (or insurance broker for Surety),
- Veterans Administrator, if receiving VA benefits, and
- Appearing counsel, if any.