PACKET ME—GUARDIANSHIP FOR A MINOR WITH NO CONTROL OVER THE ESTATE OF THE MINOR WARD ANNUAL REPORT

Who may use Packet ME? Guardians for a minor who are not serving as conservator and who DO NOT have control of any of the minor ward's property, money, assets, possessions or income (including Social Security or other disability or other benefits)

What are you reporting to the court? The current status of your minor ward's health during the reporting period.

When are the forms to be used? A guardian must file a completed Packet ME with the court every year. Your first reporting year ends one year after the date the court entered an Order appointing you as Guardian. Packet ME must be filed within 30 days. The reporting year ending date and Packet ME filing date will be the same in all following years.

For example, if the Order of Appointment was entered on June 10, 2018, then your first reporting year begins June 10, 2018 and ends June 9, 2019 with your first Packet ME due to be filed by July 9, 2019. The second reporting year will end June 9, 2020 and the second Packet ME will be due to be filed by July 9, 2020.

What information will you need to gather?

- List of Interested Parties

The cost of filing this packet is $5.

If you need additional copies of this packet, forms are available on the Supreme Court website: **https://supremecourt.nebraska.gov/forms.**

Hearings on Packet ME *:* A court hearing will only be scheduled if the court has any questions about the report, if an interested person files an objection to the report, or if the Guardian files a separate Application for Approval of Annual Accounting and/ or Fees.

Specific Instructions: Packet ME :

►**Condition of Ward**: The Guardian answers questions to provide information on the minor ward's well-being.

►**Notice of Right to Object**: You must complete this form.

►**Certificate of Mailing**: This Certificate informs the court that you have mailed copies of the Packet ME to all "interested persons." List the names and addresses of the interested persons you sent the forms to on this form. Only mail the completed Packet ME to "interested persons".

►**Filing with the Court** Pay the filing fee and file the original completed and signed Packet ME with the Court

Packet Worksheet

Please Note: If you download this annual report from the Judicial Branch website and type in the blanks on this page, the information will automatically fill in the corresponding blanks on the following pages.

It is your responsibility to make sure the information transferred correctly.

Minor ward and Case information:

☑ Printing the form and handwriting the answers.

☐ Completing the form electronically.

Name of minor ward: _____

County the case is filed in: _____

Case Number: _____

Annual reporting period: _____ to _____

Interested persons (Include government agency paying benefits and bonding company, if any):

Name:	Address:
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

☐ If there are more interested persons than listed above, check the box to the left and include them on a separate sheet of paper. – Note – You will file the separate sheet with the additional names and addresses with the court when you file the certificate of mailing form.

Guardian information:

Name of Guardian: _____

Street Address/P.O. Box of Guardian: _____

City/State/ZIP Code: _____

Telephone Number: _____ Email address: _____

If this is being completed by an attorney, Bar Number and Firm Name:

_____

Co-Guardian information: Is there more than one guardian? yes ☐ no ☑

Name of Co-Guardian: _____

Street Address/P.O. Box of Co-Guardian: _____

City/State/ZIP Code: _____

Telephone Number: _____ Email address: _____

Bar Number and Firm Name (Attorneys only): _____

The following reports were waived by order of the court:

☐ Annual report of guardian for a minor Date waived _____

GUARDIANSHIP FOR A MINOR ANNUAL REPORTING FORMS PACKET ME - NO AUTHORITY OVER THE ESTATE

IN THE COUNTY COURT OF _____ COUNTY, NEBRASKA

IN THE MATTER OF

Case No. _____

_____
Minor ward

ANNUAL REPORT OF GUARDIAN FOR A MINOR

I, the undersigned, am the guardian of the above named minor ward. My annual report to the court is as follows:

1. Present age of minor ward: _____

2. Current physical address of the minor ward:

   _____

3. The minor ward's residence is:
   - ☐ guardian's home
   - ☐ nursing home/skilled care facility/assisted living
   - ☐ boarding/extended family home
   - ☐ other: _____

4. If The minor ward has changed residence within the past year, state reasons for change:

   _____
   _____

5. If you do not live with the minor ward, how often do you see the minor ward? ☐ Daily ☐ Weekly ☐ Monthly ☐ Other (describe)

   _____
   _____

6. At any time during the past year, did the minor ward have a social worker or case worker?
   ☐ Yes ☐ No.
   If yes: Name: _____

7. During the past year, the minor ward has attended _____ school and is in the _____ grade.

8. State any information about the minor ward you believe is important for the court to know.

_____
_____
_____
_____

I swear or affirm, **under the penalties of perjury**, that I have examined the Annual Report of Guardian on Condition of Ward, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of Guardian _____ Date _____

Print or Type Name of Guardian _____ Street Address/P.O. Box of Guardian _____

Bar Number and Firm Name (attorneys only) _____ City/State/ZIP Code of Guardian _____

Phone _____ Email Address _____

Is there more than one guardian? yes ☐ no ☑

_____
Ward
_____County Court

Case No. _____

NOTICE OF RIGHT TO OBJECT

The following documents have been filed in the above referenced case:

Annual Report;

Other(if any):

_____
_____
_____
_____

If you object to the contents or accuracy of these filings, you may file an objection and request a hearing before the court. You have 10 days from the date these documents were filed with the court to complete and file the Objection form which can be obtained on the Nebraska Supreme Court website, https://supremecourt.nebraska.gov/sites/default/files/CC-16-2-17.pdf.

_____ Date _____
Signature of Guardian

_____ _____
Print or Type Name of Guardian Street Address/P.O. Box of Guardian

_____ _____
Bar Number and Firm Name (attorneys only) City/State/ZIP Code of Guardian

_____ _____
Phone Email Address

Is there more than one guardian? yes ☐ no ☑

_____
Ward
_____ County Court
Case No. _____

CERTIFICATE OF MAILING

I,_____,swear or affirm, **under the penalties of perjury**, that copies of the forms listed below were mailed to all interested persons (including government agencies providing benefits) and bonding company, if any, at the addresses set forth below on _____:

Annual Report;

Other(if any):

_____
_____
_____

NAME	**ADDRESS**

☐ See attached (more names and addresses than above)

_____ Date _____
Signature of Guardian or their attorney

_____ _____
Print or Type Name of Guardian or their attorney — Street Address/P.O. Box of Guardian or their attorney

_____ _____
Bar Number and Firm Name (attorneys only) — City/State/ZIP Code of Guardian or their attorney

_____ _____
Phone — Email Address

Is there more than one guardian? yes ☐ no ☑