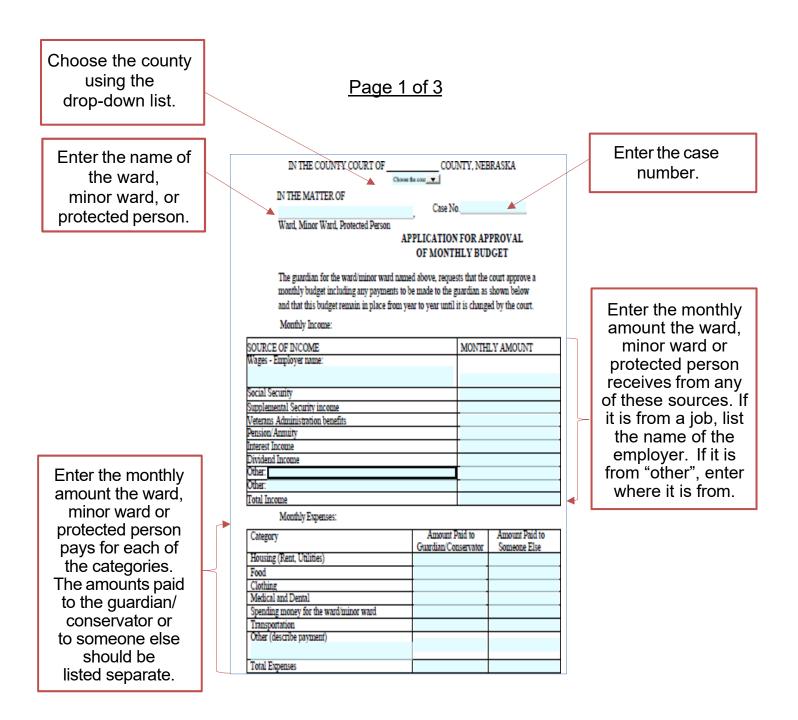
## COMPLETING THE APPLICATION FOR APPROVAL OF MONTHLY BUDGET

Use this form is to ask the court to approve a monthly budget for the ward, minor ward or protected person.



If you are asking the court to let you take cash withdrawals from the ward's account(s) or to get cash back on transactions, enter the amount per month. Provide a good reason for this request. **After you print**, but before you file, you will initial in front of the statement.

Read this entire statement carefully.

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(Initial if being requested) I request that the court authorize cash withdrawals by the guardian or cash back on transactions of up to \$\_\_\_\_\_\_per month. I request this because: (fill in reason)

I acknowledge that I will receive a notice of hearing from the court when I file my Application for Approval of Monthly Budget. It is my responsibility to send a copy of:

this Application for Approval of Monthly Budget of Guardian; and
 the notice of hearing

to all interested persons no less than 14 days prior to the hearing date. I must then file a Certificate of Mailing showing I sent them to all interested persons.

The Certificate of Mailing Form (CC 16:2.49) is found at: https://supremecourt.nebraska.gov/sites/default/files/CC-16-2-49.pdf.

I swear or affirm, **under the penalties of perjury**, that I have examined the above document, and to the best of my knowledge and belief, they are true, correct and complete.

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name, the date signed, your Signature: Date: address, telephone Printed Name: number, and your (of guardian and/or conservator) email address. Street Address/P.O. Box: City/State/ZIP Code: Telephone Number: Email address: If completed by an attorney: Check the box if Bar Number: there is a Is there more than one guardian and/or conservator? yes 🖌 no 🗌 co-guardian or Signature: Date: co-conservator. Printed Name; If "yes" is checked, (of co-gaardian and/or co-conservator) Street Address/P.O. Box: the second City/State/ZIP Code: signature block Telephone Number: appears. Email address: If completed by an attorney: Bar Number:

If completed by an attorney, enter your Bar Number.

If there is a co-guardian or co-conservator, they will sign the form, and enter their printed name, the date signed, their address, telephone number, and email address. Sign the form, and enter your printed

\* Pursuant to Neb. Rev. Stat. § 30-2601, interested persons are defined as:

- children and spouses;
- future heirs if the ward/incapacitated person/protected person would die without leaving a valid will (brothers and sisters who are adults, grandparents, etc.);
- a trustee of any trust executed by the ward/incapacitated person/protected person;
- if there are no individuals defined as "interested persons" above, include any
  person or organization named as a "devisee" in the ward's/incapacitated person's/
  protected person's most recent will;
- after death of the ward/incapacitated person/protected person, interested person also includes the personal representative of a deceased ward's/incapacitated person's/ protected person's estate, the deceased ward's/incapacitated person's/ protected person's heirs in an intestate estate, and the deceased ward's/ incapacitated person's/protected person's devisees in a testate estate;
- any governmental agency paying benefits on behalf of the ward/incapacitated person/protected person; and
- any person designated by order of the court to be an interested person.

If there are no interested persons identified for a ward/incapacitated person/protected person, the court may appoint a guardian ad litem (Nebraska Supreme Court Rule § 6-1449(B)). The cost of the guardian ad litem may be taken from the assets of the ward/incapacitated person/protected person.