

COMPLETING THE CERTIFICATE OF MAILING SUPPLEMENTAL ANNUAL BUDGET REPORTING FORMS

Use this form is to give verification to the court that you or your attorney mailed supplemental annual budget reporting forms or documents that were not included in the annual filing.

This form will normally be used when you have received a Notice of Corrective Action informing you that items were missing from the annual reporting you filed.

Page 1 of 2

Choose the county using the drop-down list.

Enter the name of the ward, minor ward, or protected person.

Enter the case number.

Enter the date the copies of the forms were sent.

Check the box in front of the report(s) you are sending.

List the names and addresses of the interested person(s).

Check the box if there are more names and addresses than these and list them on a separate page.

IN THE COUNTY COURT OF _____ COUNTY, NEBRASKA
Choose the court

IN THE MATTER OF _____ Case No. _____
Ward/Minor Ward

**CERTIFICATE OF MAILING
SUPPLEMENTAL ANNUAL
BUDGET REPORTING FORM(S)**

I swear or affirm, under the penalties of perjury, that on _____
I mailed copies of the forms marked below to all interested persons and bonding company, if any, at the addresses set forth below:

☐ Annual Budget Report;
☐ Updated Inventory;
☐ Copy of the last bank statement and/or brokerage statement (if ordered by the court) that includes the ending date of the Annual Budget Report with personal information (social security number, date of birth, account numbers, etc.) blacked out; and
☒ Notice of Right to Object form.

NAME(S) OF INTERESTED PERSON(S)	ADDRESS(ES)
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

☐ See attached (more names and addresses than above)

Page 2 of 2

Sign the form, and enter your printed name, the date signed, your address, telephone number, and your email address.

Check the box if there is a co-guardian or co-conservator. If "yes" is checked, the second signature block appears.

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.

Signature: _____	Date: _____
Printed Name: _____	
(of guardian and/or conservator or their attorney)	
Street Address/P.O. Box: _____	
City/State/ZIP Code: _____	
Telephone Number: _____	
Email address: _____	
If completed by an attorney:	
Bar Number: _____	
Is there more than one guardian and/or conservator? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	
Signature: _____	Date: _____
Printed Name: _____	
(of co-guardian and/or co-conservator or their attorney)	
Street Address/P.O. Box: _____	
City/State/ZIP Code: _____	
Telephone Number: _____	
Email address: _____	
If completed by an attorney:	
Bar Number: _____	

* 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.