

**PERSONAL AND
FINANCIAL INFORMATION
FOR GUARDIANSHIPS AND
CONSERVATORSHIPS**

**THIS DOCUMENT IS CONFIDENTIAL AND SHALL NOT BE MADE PART OF THE COURT FILE
OR PROVIDED TO THE PUBLIC PURSUANT TO NEB. CT. R. § 6-1464.**

***TO THE GUARDIAN AND/OR CONSERVATOR: Only file this form with the court. Do not
send this form to anyone else.***

IN THE COUNTY COURT OF _____ COUNTY, NEBRASKA

Case Number: _____

IN THE MATTER OF

Ward/Minor Ward/Protected Person

CONFIDENTIAL

<u>Full</u> name of the ward, minor ward, or protected person:	<u>Full</u> date of birth of the ward, minor ward, or protected person:	<u>Full</u> Social Security number of the ward, minor ward, or protected person:

FINANCIAL INFORMATION OF THE WARD, MINOR WARD, OR PROTECTED PERSON

Does the ward, minor ward, or protected person have any accounts at any financial institution? Yes No.

If yes complete the following information:

Name(s) and address(es) of financial institution(s)

Full account number(s)

Signature(s)

Date

Name(s)

Street Address/P.O. Box Number

Bar Number and Firm Name (attorneys only)

City/State/ZIP Code

Phone

E-mail Address