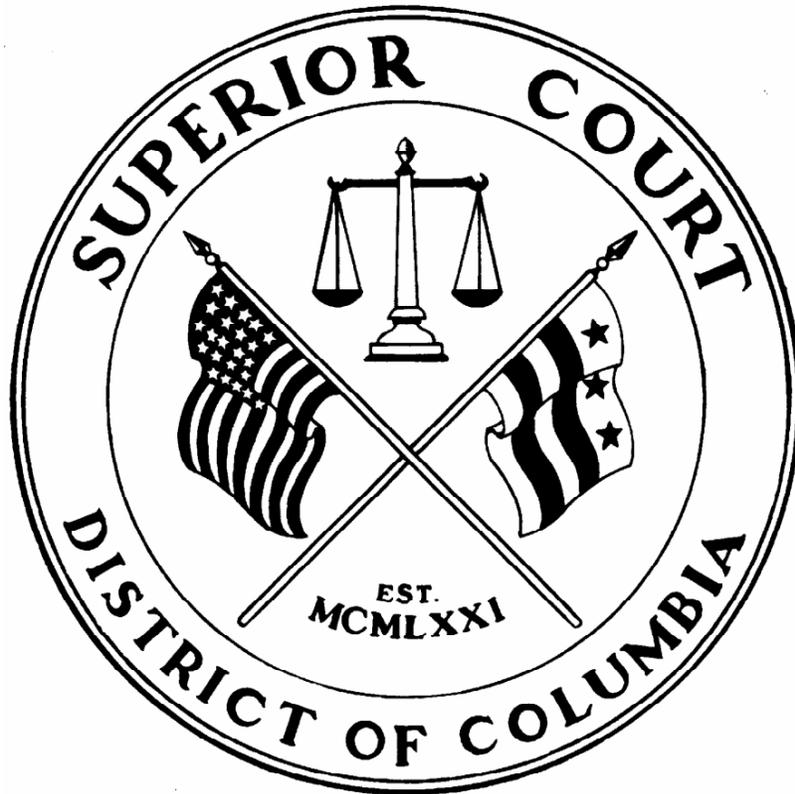


NOW THAT YOU'RE A CONSERVATOR  
GENERAL INFORMATION AND FORMS  
FOR A CONSERVATOR

**Office of the Register of Wills**



**Probate Division  
515 5<sup>th</sup> Street, NW, Third Floor  
Washington, DC 20001**

All attached forms and documents are available through the division's website:  
[http://www.dccourts.gov/internet/legal/aud\\_probate/main.jsf](http://www.dccourts.gov/internet/legal/aud_probate/main.jsf)

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## General Information

Enclosed are copies of many of the forms that a conservator may need to complete after appointment by the Court. These forms are also posted on the Court's website at

[www.dccourts.gov/dccourts/superior/probate/index.jsp](http://www.dccourts.gov/dccourts/superior/probate/index.jsp)

They can be completed online and printed out for filing.

More details regarding the duties of a conservator and frequently asked questions and answers can also be found on the website.

If there are still questions or problems after these resources have been consulted, the Office of the Register of Wills recommends that the conservator consult an attorney of the conservator's choosing. If the question concerns how to prepare an inventory, consider attending *Getting Started: Inventory Preparation Seminar*, offered once a month by the Auditing & Appraisals Branch of the Probate Division.

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD

In re:

\_\_\_\_\_  
An Adult

**ACCEPTANCE**

I hereby accept the duties of the office of

- Guardian
- Limited healthcare guardian
- Conservator

of \_\_\_\_\_ (ward) and consent to personal jurisdiction in any action instituted in the District of Columbia by any interested person against me as guardian, limited healthcare guardian, and/or conservator arising from the duties of my office and, if I am or become a non-resident, I do hereby irrevocably appoint the Register of Wills and successors in office as the person upon whom all notice and process issued by a competent court in the District of Columbia may be served with the same effect as personal service in relation to all suits or matters pertaining to the proceeding in which Letters of guardianship and/or conservatorship shall issue.

\_\_\_\_\_  
Signature of filer

\_\_\_\_\_  
Typed name of filer

\_\_\_\_\_  
Address (actual address/not Post Office Box)

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Email address

\_\_\_\_\_  
Unified Bar number (if filer is an attorney)

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_ INT \_\_\_\_\_  
\_\_\_\_\_ IDD \_\_\_\_\_

In re \_\_\_\_\_  
An Adult

**BOND OF CONSERVATOR**

KNOW ALL PERSONS BY THESE PRESENTS: That whereas the undersigned \_\_\_\_\_,  
whose address is \_\_\_\_\_,  
has been appointed conservator of \_\_\_\_\_  
by order of the Court dated \_\_\_\_\_, 20\_\_\_\_\_, and is required to give  
a bond, under seal, in the maximum amount of \_\_\_\_\_  
(\$\_\_\_\_\_ ) dollars, fixed by the Court, conditioned as by law and said order required;  
and whereas the condition of the undertaking is that the said  
\_\_\_\_\_ shall faithfully discharge all duties of the trust  
according to law as such conservator and in all things obey such order as the Court shall make in the  
premises:

We, therefore, the undersigned \_\_\_\_\_  
as principal\_ and \_\_\_\_\_  
as surety appearing and submitting to the jurisdiction of the Court, hereby undertake for ourselves  
and each of us, and each of our heirs, personal representatives, successors, and assigns to abide by  
and perform the order of the Court in the premises, and do further agree that upon default by the said  
principal in any conditions hereof, the damages, not exceeding the sum aforesaid, may be ascertained  
in such manner as the Court shall direct; that the Court may give judgment hereon in favor of any  
person thereby aggrieved against us for damages suffered or sustained by such aggrieved party; and  
that such judgment may be rendered in said cause against all or any of us whose names are hereto  
signed:

Signed, sealed, and delivered in  
the presence of:

_____	_____ (SEAL)
Witness	Signature of Conservator
_____	_____ (SEAL)
Witness	Signature of Conservator
_____	_____ (SEAL)
Witness	Bonding Company
_____	_____ (SEAL)
Witness	By

Surety approved this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

REGISTER OF WILLS  
CLERK OF THE PROBATE DIVISION

By: \_\_\_\_\_  
Deputy Clerk

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_ ADM \_\_\_\_\_  
\_\_\_\_\_ INT \_\_\_\_\_  
\_\_\_\_\_ IDD \_\_\_\_\_  
\_\_\_\_\_ SEB \_\_\_\_\_  
\_\_\_\_\_ GDN \_\_\_\_\_  
\_\_\_\_\_ TRP \_\_\_\_\_  
\_\_\_\_\_ CON \_\_\_\_\_  
\_\_\_\_\_ FEP \_\_\_\_\_

Estate of

\_\_\_\_\_  
Minor/Ward/Deceased

**PRAECIPE – CHANGE OF ADDRESS**

The Register of Wills will please note the following change of address effective immediately:

\_\_\_\_\_  
Name of interested person

\_\_\_\_\_  
\_\_\_\_\_  
New mailing address including zip code

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Typed name

\_\_\_\_\_  
Address (actual address/not Post Office Box

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Email address

\_\_\_\_\_  
Bar number (if filer is an attorney)

**CERTIFICATE OF SERVICE**

I certify that on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, a copy of this filing was either eServed in accordance with the provisions of Administrative Order 13-15 or served by first class mail, postage prepaid, on the following persons (list names and complete mailing addresses):

---

Signature

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD  
\_\_\_\_\_

In re

\_\_\_\_\_  
ward

**CHANGE OF ADDRESS OF WARD PRAECIPE**

The Register of Wills will please note that the ward has moved to a new location within the District of Columbia.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

New mailing address including zip code

\_\_\_\_\_

Telephone number

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Filer

\_\_\_\_\_  
Typed Name of Filer

\_\_\_\_\_  
Address (Actual address/not Post Office Box)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
E-mail address

\_\_\_\_\_  
Unified Bar number

**CERTIFICATE OF SERVICE**

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, a copy of the foregoing was either eServed in accordance with the provisions of Administrative Order 13-15 or served by first-class mail, postage prepaid, on the following persons (list names and complete mailing addresses):

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---

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Signature

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD  
\_\_\_\_\_

\_\_\_\_\_  
Ward

**NOTICE OF CHANGE OF ADDRESS OF WARD**

**(to be filed by Guardian for change of address of ward to a location outside the District of Columbia but within the geographical boundaries of a neighboring jurisdiction)**

The Register of Wills will please note the following change of address effective immediately:

1. Name of Guardian: \_\_\_\_\_

2. New mailing address of the ward including zip code:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Telephone number for the ward: \_\_\_\_\_

4. Date of the move: \_\_\_\_\_

5. Reason for the move: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Filer

\_\_\_\_\_  
Typed Name of Filer

\_\_\_\_\_  
Address (Actual address/not Post Office Box)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
E-mail address

\_\_\_\_\_  
Unified Bar number

**PLEASE NOTE: Neighboring jurisdictions include locations within the geographical boundaries of Montgomery County, Prince Georges' County, Arlington County, City of Alexandria, and Fairfax County.**

## CERTIFICATE OF SERVICE

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, a copy of this filing was either eServed in accordance with the provisions of Administrative Order 13-15 or served by first class mail, postage prepaid, on the following persons (list names and complete mailing addresses):

---

Signature

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
PROBATE DIVISION

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD  
\_\_\_\_\_

In re

\_\_\_\_\_  
ward

**PETITION FOR PERMISSION TO MOVE WARD OUTSIDE THE DISTRICT OF COLUMBIA AND NEIGHBORING JURISDICTIONS**

The guardian hereby seeks permission to move the ward outside the District of Columbia and neighboring jurisdictions.

1. Proposed new address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Reason for move:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Attorney, if any

\_\_\_\_\_  
Signature of Guardian

\_\_\_\_\_  
Typed Name

\_\_\_\_\_  
Typed Name

\_\_\_\_\_  
Address (Actual address/not Post Office Box)  
Box)

\_\_\_\_\_  
Address (Actual address/not Post Office  
Box)

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Unified Bar number

\_\_\_\_\_  
E-mail address

**VERIFICATION**

I, \_\_\_\_\_, being first duly sworn, on oath, depose and say that I have read the foregoing pleadings by me subscribed and that the facts therein stated are true to the best of my knowledge, information, and belief.

\_\_\_\_\_  
Signature of petitioner

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public/Clerk

**CERTIFICATE OF SERVICE**

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, a copy of this filing was either eServed in accordance with the provisions of Administrative Order 13-15 or served by first class mail, postage prepaid, on the following parties to the case, persons granted permission to participate, and persons who requested notice. (List each person by name and complete address. Use the "tab" key to move from box to box. Attach an additional sheet of paper if necessary. An example is given.)

Jane Doe Department of Human Services 2342 City Street, N.W. Washington, D.C. 20000
--

\_\_\_\_\_  
Signature

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**SPECIFIC INSTRUCTIONS TO CONSERVATORS**

Upon appointment, a conservator, limited or general, shall act as a fiduciary and observe the standards of care applicable to trustees. Specifically the conservator shall do the following:

(1) Upon appointment, the conservator shall qualify by filing bond (if the Court requires bond) and by filing an *Acceptance and Consent to Jurisdiction* unless the conservator has signed the acceptance and consent at the end of the *Petition for a General Proceeding*. These filings must occur within fourteen (14) days of the date of appointment.

(2) The conservator shall develop an individual conservatorship plan in consultation with the guardian (if any) and, to the maximum extent possible, the ward in accordance with the provisions of D.C. Code, §21-2065(b). The conservatorship plan must be filed within sixty days of the date of the appointment of the conservator.

(3) Implicit in the duties of a conservator charged with the responsibility of expending funds for the care and maintenance of a ward is the need to become or remain personally acquainted with the ward and to maintain sufficient contact to know the ward's capacities, limitations, and needs. This is especially true when no guardian has been appointed. To ensure awareness at all times of the incapacitated ward's needs and condition, it is recommended that the conservator visit the ward. The conservator shall file a change of address promptly if either the ward or the conservator moves.

(4) If there are sufficient funds, the conservator shall ensure that money is available each month for the personal use or incidental needs of the ward. If the ward lives in a nursing home, the conservator may consider contacting the appropriate nursing home officials to establish and fund a 'patient's account' with the home to be used for the monthly purchase of incidental needs of the ward. If the ward is a Medicaid recipient, the conservator shall use such amounts as are allowed by Medicaid regulations for the personal use or incidental needs of the ward.

(5) The conservator shall ensure that funds for the care, support, and maintenance of the ward are paid to the nursing home or other authorized caretaker promptly as due.

(6) Whenever it appears to the conservator that the financial resources of the ward are being depleted and that the protected individual will soon become eligible for Medicaid benefits, the conservator shall make timely application for said benefits to ensure uninterrupted funding for the protected individual's care and maintenance.

(7) If the conservator has reason to believe that the ward is in need of protective services because of abuse or neglect by another, the conservator shall immediately report this belief to Adult Protective Services either orally or in writing. The report shall include the name, age, physical description, and location of the adult alleged to be in need of protective services; the name and location of the person allegedly responsible for the abuse, neglect, or exploitation; the nature and extent of the abuse, neglect, or exploitation; the basis of the reporter's knowledge; and any other relevant information. D.C. Code, sec. 7-1903. Any person required to report who

wilfully fails to do so shall be guilty of a misdemeanor and, upon conviction, subject to a fine not exceeding \$300.00. D.C. Code, sec. 7-1912. For additional information, see the Adult Protective Service website at <http://dhs.dc.gov/dhs/csp/view,a,3,q,492691.asp>.

The above instructions are for guidance only and do not include all the conservator's duties and responsibilities. Individuals serving as conservators shall be governed by all applicable statutory provisions, rules of Court and Court orders issued regarding their wards.

# SUPERIOR COURT OF THE DISTRICT OF COLUMBIA

## CONSERVATORSHIP INFORMATION SHEET

The following information is provided to those individuals appointed as limited or general conservator of an incapacitated individual (ward) but is not intended to be all-inclusive. Individuals appointed as conservators shall be governed by all applicable statutory provisions, rules of court, and Court orders regarding their wards.

### **1. PERMANENT GENERAL CONSERVATOR**

A permanent general conservator is one appointed by the Court and on whom the Court has conferred, without limitation, title to all property of the protected individual (ward) and those powers enumerated in D.C. Code, sec. 21-2070 and sec. 21-2071 (2001 ed.).

### **2. PERMANENT LIMITED CONSERVATOR**

The Court establishes a limited conservatorship (1) by entry of an order specifying that only a part of the property of the ward vests in the conservator or (2) by limiting the powers conferred under D.C. Code, sec. 21-2070 or sec. 21-2071 either at the time of appointment or later.

### **3. SPECIAL CONSERVATOR OR TEMPORARY CONSERVATOR**

The Court may appoint a special conservator to discharge specific arrangements or transactions ordered by the Court (D.C. Code, sec. 21-2056(c)) or a temporary conservator (D.C. Code, sec. 21-2062).

### **4. TITLE BY APPOINTMENT**

The appointment of a conservator vests in the conservator title as trustee to all property of the ward presently held or after acquired or to the property specified in the court order, including title to any property held for the ward by custodians or attorneys in fact.

### **5. QUALIFICATION**

A limited or general conservator qualifies by executing an *Acceptance of Guardian/Conservator* form (unless the conservator signed the acceptance at the end of the *Petition for a General Proceeding*). If bond is required by order of the Court, the conservator must also execute and file a bond in the amount set by the Court to qualify. These filings must occur within fourteen (14) days of the date of appointment.

### **6. APPRAISAL**

A limited or general conservator shall promptly engage the services of a qualified appraiser if the value of the ward's personal property exceeds \$1,000.00. This appraisal is filed as part of the Inventory (see item 12). If the value is estimated as being less than \$1,000.00, the conservator shall file an affidavit setting forth the description and the value of the tangible personal property as part of the Inventory (see item 12). The Court has an appraiser on staff that can be used without cost if available.

## **7. RECORDING LETTERS OF CONSERVATORSHIP**

(a) Letters of conservatorship are evidence of the transfer of all assets (or the part of assets specified in the Letters) of a ward to the conservator. An order terminating a conservatorship is evidence of the transfer of all assets subject to the conservatorship from the conservator to the protected individual or to the personal representative of the individual.

(b) Letters of conservatorship and orders terminating conservatorships shall be filed or recorded in the Office of the Recorder of Deeds so that notice of the transfer of title is on file. The Recorder of Deeds is located at 1101 4<sup>th</sup> Street, S.W., Washington, DC, telephone number 202-727-5374.

## **8. GENERAL DUTY OF CONSERVATOR**

A conservator shall act as a fiduciary and observe the standard of care applicable to trustees in relation to the powers conferred. This duty is implicit in the title acquired by virtue of the proceeding.

## **9. POWERS OF CONSERVATOR**

The powers of a conservator in administration are set forth in D.C. Code, sec. 21-2070 and may be found at [www.dccouncil.washington.dc.us/dcofficialcode](http://www.dccouncil.washington.dc.us/dcofficialcode). The powers conferred are subject to any limitations that the Court may impose at the time of appointment or at a later date.

## **10. DISTRIBUTIVE DUTIES AND POWERS**

The distributive duties and powers of a conservator are set forth in D.C. Code, sec. 21-2071. The distributive duties and powers conferred are subject to any limitations that the Court may impose at the time of appointment or at a later date.

## **11. PETITIONS POST APPOINTMENT**

Application to the Court for an order after the appointment of a conservator shall be by the filing of a verified *Petition Post Appointment* that includes a *Notice of Right to Respond and/or Request an Oral Hearing* and a *Notice of Hearing on Subsequent Petition* in accordance with Superior Court, Probate Division Rule 311, an order appointing counsel, and a proposed order for the Court's signature. The petition shall state specifically what is being requested and why the request is being made and shall include such supplemental information and/or documentation as may be considered appropriate.

## **12. CONSERVATORSHIP PLAN AND INVENTORY**

A conservator, limited or general, shall file a conservatorship plan and a complete inventory of the financial resources of the ward with the Court no later than sixty (60) days from the date of appointment. The forms included on the Probate Division website shall be used. The inventory shall be verified and served by first-class mail upon those individuals listed in Superior Court, Probate Division Rule 329.

## **13. ACCOUNTS AND REPORT OF CONSERVATOR**

(a) Filing: A permanent conservator shall file an account and report:

(1) Annually within thirty (30) days after the anniversary date of the date of appointment.

(2) Within sixty (60) days of (a) the resignation or removal of the conservator, (b) as provided in Superior Court Rules, Probate Division 334, or (c) at such other times as ordered by the Court.

- (b) A temporary conservator shall submit an account and report within sixty (60) days of termination of appointment, but if appointed as permanent conservator, an account shall not be required by the temporary conservator;
- (c) A special conservator appointed pursuant to D.C. Code, sec. 21-2056 shall file a report setting forth all matters done within thirty (30) days of completion of the tasks ordered by the Court and not later than six (6) months after the order of appointment or at such other times as ordered by the Court;
- (d) Other requirements:
- (1) The beginning date of the first account shall be the date of appointment, and the account shall cover one year. All subsequent accounts shall begin on the ending date of the previous account and cover one year.
  - (2) The account shall be typewritten or machine printed on the forms on the Probate Division website;
  - (3) Each account shall have attached a *Report of Conservator*;
- (e) Service: The account and report shall be served on those individuals listed in Superior Court, Probate Division Rule 330(d).

#### **14. SUGGESTION OF DEATH**

Upon the death of the ward, the conservator shall file a *Suggestion of Death* form promptly to notify the Court that the ward has died and must serve a copy on all parties.

#### **15. FINAL ACCOUNT**

Upon death of the ward, the conservator shall file a final account, final report, and petition to terminate the conservatorship (see item 17) within sixty (60) days.

#### **16. RECEIPTS**

Promptly after full distribution and settlement of an estate, the fiduciary shall file with the Register of Wills receipts or canceled checks evidencing final distribution. These should be filed with either the Duty Auditor or the Auditor who audited the final account.

#### **17. TERMINATION OF ESTATE**

Upon death of the ward, the Conservator shall file a petition for termination of the conservatorship, accompanied by the final account and report within sixty (60) days of the ward's death. The conservator may also file a petition for expenditures within thirty (30) days of the ward's death. The hearing on the final account shall be held with the hearing on the petition for termination. Upon entry of an order of termination, the conservator shall file a verified statement evidencing transfer of assets, including receipts of final distribution and checks evidencing any expenditures, within sixty (60) days. If assets cannot be transferred within the sixty (60) days, the conservator shall file a petition to deposit funds into the estates deposit account maintained by the Office of the Register of Wills. (See Superior Court, Probate Division Rule 334(b).)

For termination of conservatorships other than upon death, a petition for termination may be filed, and the Court shall schedule a hearing. The Court thereafter may issue a preliminary order of termination and direct the filing of a final account and report within sixty (60) days. Upon approval of the final account, the Court shall enter a final order of termination. The final order shall provide for expenses of administration and direct the conservator to file a verified statement evidencing transfer of assets to the former ward or other appropriate person as determined by the Court. The conservator shall file the verified statement, together with receipts evidencing final

distribution and vouchers or cancelled checks evidencing any expenditures, within thirty (30) days of the order of termination. (See Superior Court, Probate Division Rule 334(c).)

**17. ADDITIONAL INFORMATION**

(a) The law that applies to conservatorships is D.C. Code, Title 21, Chapter 20.

(b) The court rules that apply to conservatorships established since 1981 are in the 300 series of the Probate Rules.

(c) No attorney fees are to be paid from estate funds unless specifically authorized by order of court after compliance with Superior Court, Probate Division Rule 308.

(d) No conservator shall commingle any estate assets with non-estate assets (i.e., no conservator shall mix any of the ward's assets with assets belonging to anyone else).

**(e) Conservators are hereby notified that any authority granted by the Court to administer funds of the ward terminates upon death of the ward. Upon death of the ward, no further expenditures shall be made.**

(f) Court clerks and staff cannot give legal advice. If legal questions arise, consult an attorney. Neither the Register of Wills nor any member of her staff is permitted to recommend lawyers. If legal help is needed, consider consulting the Lawyer Referral Service of the District of Columbia Bar.

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD

In re:

\_\_\_\_\_  
An Adult

**PETITION POST APPOINTMENT FOR**

(Briefly and plainly state relief requested.)

1. \_\_\_\_\_  
(Name of petitioner)  
\_\_\_\_\_  
(Interest of petitioner)  
Petitioner seeks the following relief: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Petitioner is entitled to this relief because (i.e., explain why you are entitled to what you asking for or asking the Court to do) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Attorney	Signature
Typed Name of Attorney	Typed Name
Address (Actual address/not Post Office Box)	Address (Actual address/not Post Office Box)
Telephone number	Telephone number
Unified Bar number	
E-mail address (optional)	

**VERIFICATION**

I, \_\_\_\_\_, being first duly sworn, on oath, depose and say that I have read the foregoing pleading by me subscribed and that the facts therein stated are true to the best of my knowledge, information, and belief.

\_\_\_\_\_  
Signature of petitioner

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public/Clerk

**CERTIFICATE OF SERVICE**

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, a copy of the foregoing

\_\_\_\_\_ was served by first class mail, postage prepaid, upon the parties to the above captioned case, persons granted permission to participate, and persons who requested notice. (List each person by name and complete address. Use the "tab" key to move from box to box. Attach an additional sheet of paper if necessary. An example is given.)

Jane Doe Department of Human Services 2342 City Street, N.W. Washington, D.C. 20000
--

\_\_\_\_\_  
Signature

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD

In re:

\_\_\_\_\_  
An Adult

**NOTICE OF RIGHT TO RESPOND AND/OR REQUEST AN ORAL HEARING**  
**(This notice must be served on all parties, and a copy must be filed with the petition post appointment.)**

Notice is hereby given that \_\_\_\_\_ has filed a Petition Post Appointment for \_\_\_\_\_. A copy is attached.

You are entitled to file a response or opposition to the petition and to request a hearing if you so choose. If you object to the petition or want to respond to the petition or want to request an oral hearing, you must file the objection, response, or request for an oral hearing within ten days after the petition was personally served on you or, if the petition was mailed to you, within thirteen days of the date that the petition was mailed. The Court rules that apply are Superior Court, Probate Division Rule 322(a) and (c), which can be found at [www.dccourts.gov/dccourts/superior/probate/index.jsp](http://www.dccourts.gov/dccourts/superior/probate/index.jsp).

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Typed Name

\_\_\_\_\_  
Address (Actual address/not Post Office Box)

\_\_\_\_\_  
Telephone number

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD

In re:

\_\_\_\_\_  
An Adult

**ORDER APPOINTING COUNSEL**

Upon consideration of the petition filed herein on the \_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_, it is by the Court this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,

**ORDERED** that \_\_\_\_\_ is appointed counsel for  
\_\_\_\_\_, the subject of the above proceeding. The counsel shall have  
access to any current medical, psychological, or sociological evaluation records of the subject. Counsel  
shall perform the duties set forth in D.C. Code, sec. 21-2033(b) and Superior Court, Probate Division  
Rule 305 and represent the subject at the hearing to be held on\_\_\_\_\_, 20\_\_\_\_, at  
\_\_\_\_\_ o'clock a.m./p.m. in Courtroom \_\_\_\_ of the Superior Court of the District of Columbia, 515  
5<sup>th</sup> Street, NW, Washington, DC, before Judge \_\_\_\_\_.

**ORDERED** that counsel shall forthwith file a Notice of Appearance pursuant to Superior Court,  
Probate Division Rules 321(d) and 305(a)(2).

\_\_\_\_\_  
JUDGE

cc:

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD

In re:

\_\_\_\_\_  
An Adult

**NOTICE OF HEARING ON SUBSEQUENT PETITION**

(Pursuant to D.C. Code, sec. 21-2031 and Superior Court, Probate Division Rules 311 and 322)

You are advised that a hearing has been scheduled in the Probate Division of the Superior Court of the District of Columbia, 515 5<sup>th</sup> Street, NW, Washington, DC 20001 on \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_ o'clock a.m./p.m. in courtroom \_\_\_\_ to consider whether to grant the relief requested in the following petition:

\_\_\_\_\_

A person entitled to file a response who wishes to do so must file the response within ten (10) days of the date of this notice (or 13 days if this notice has been mailed). A copy of the response must be sent to the person(s) whose name(s) appears below under "copies to." At the hearing the Court will hear from all parties and persons entitled to participate and may take testimony on the issues presented.

Parties are entitled to the following rights: (1) to respond in writing to the petition, (2) to appear through counsel, (3) to participate at the hearing, (4) to conduct discovery with the Court's permission, and (5) to receive copies of pleadings filed by other parties.

Any person who is not a party and wishes to participate must file a Petition for Permission To Participate and proposed order for the Court's consideration in accordance with Superior Court, Probate Division Rule 303(b).

Date: \_\_\_\_\_

**NOTE:** Pursuant to Superior Court, Probate Division Rule 311(c)(3), this notice must be mailed no fewer than 17 days or personally delivered no fewer than 14 days before the date set for the hearing.

Copies to: Parties to the above-captioned case and persons granted permission to participate pursuant to Superior Court, Probate Division Rule 303 and persons who requested notice pursuant to Superior Court, Probate Division Rule 304.

Proof of service in accordance with Superior Court, Probate Division Rule 311(c)(6) must be filed.

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD

In re:

\_\_\_\_\_  
Ward

**ORDER**

Upon consideration of the petition post appointment for \_\_\_\_\_  
\_\_\_\_\_ filed herein on the \_\_\_\_\_ day  
of \_\_\_\_\_, 20\_\_\_\_\_, it is by the Court this \_\_\_\_ day of  
\_\_\_\_\_, 20\_\_\_\_\_,

**ORDERED** that

\_\_\_\_\_  
JUDGE

cc:

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD

In re:

\_\_\_\_\_  
An Adult

**PETITION POST APPOINTMENT TO TERMINATE CONSERVATORSHIP\***

Pursuant to D.C. Code, sec. 21-2075 and Superior Court, Probate Division Rule 334(c), termination of this conservatorship is hereby requested.

1. The nature of my interest (ward, conservator, other interested person):  
\_\_\_\_\_
  
2. Termination of this conservatorship before the death of the ward is requested for the following reason. (Select from options below.)

The ward is no longer living in the District of Columbia. If a conservatorship has been established in the state in which the ward lives, attach certified copies of the Letters or Court order from the other state. Provide details.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The ward has regained capacity. Attach medical evidence, and provide details.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The ward no longer has assets. Provide details including where his income is going.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. I understand that a hearing will be held and that my presence is required at that hearing. A hearing notice and an order appointing counsel are attached.

\*Note: This petition is to be used only when the ward is still alive, but a conservatorship is no longer necessary.

WHEREFORE the undersigned asks that the Court set a hearing date on this petition to terminate conservatorship.

\_\_\_\_\_  
Signature of Attorney

\_\_\_\_\_  
Signature of petitioner

\_\_\_\_\_  
Typed Name

\_\_\_\_\_  
Typed Name

\_\_\_\_\_  
Address (Actual address/not Post Office Box)  
Box)

\_\_\_\_\_  
Address (Actual address/not Post Office  
Box)

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Unified Bar number

\_\_\_\_\_  
E-mail address (optional)

**VERIFICATION**

I, \_\_\_\_\_, being first duly sworn, on oath, depose and say that I have read the foregoing pleading by me subscribed and that the facts therein stated are true to the best of my knowledge, information, and belief.

\_\_\_\_\_  
Signature of petitioner

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public/Clerk

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD

In re:

\_\_\_\_\_  
An Adult

**PRELIMINARY ORDER OF TERMINATION**

Upon consideration of the Petition Post Appointment To Terminate Conservatorship filed by \_\_\_\_\_ on \_\_\_\_\_, 20\_\_\_\_ in accordance with D.C. Code, sec. 21-2075, notice having been given, a hearing having been held, and good cause having been shown, it is hereby this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,

ORDERED that the preliminary order of termination is granted, and it is further

ORDERED that a final account and final report shall be filed within sixty (60) days of the date hereof unless extended by the Court for good cause shown, and it is further

ORDERED that in the interim the conservator is authorized by the Court to make the following expenditures:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
JUDGE

cc:

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD

In re:

\_\_\_\_\_  
Deceased

**PETITION POST APPOINTMENT TO TERMINATE CONSERVATORSHIP OF DECEASED**  
**WARD**

**(Note that the hearing regarding this petition will be held at the hearing on approval of the Final Account.)**

Pursuant to D.C. Code, sec. 21-2075 and Superior Court, Probate Division Rule 334(b), termination of this conservatorship is hereby requested.

1. \_\_\_\_\_ was/were appointed conservator or co-conservators\* by order of the Court entered on \_\_\_\_\_.

2. A Suggestion (Notice) of Death has been filed previously or is attached hereto, advising that the ward died on \_\_\_\_\_.

3. A final account and a final conservator's report are being filed herewith.

4. The following expenses of administration have been paid by the conservator. List the type of expense, payee, and amount. State "none" if none were paid.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Conservator has filed a petition for authorization to make expenditures or hereby requests permission to make expenditures pursuant to Superior Court, Probate Division Rule 334(b)(2) for the following reasons. (Note that such a petition must be filed within 30 days of the date of death of the ward.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Conservator asks the Court to (extend) (shorten) the 60-day deadline for filing the verified statement evidencing transfer of estate assets required by Superior Court, Probate Division Rule 334(b)(4) for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*For ease, all references to conservator hereinafter are in the singular, even if there are two or more conservators.

7. Conservator (intends) (does not intend) to file a petition to deposit funds into the estates deposit account pursuant to Superior Court, Probate Division Rule 334(b)(5) or hereby requests permission to deposit funds into the estates deposit account for the following reasons:

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8. Conservator (asks) (does not ask) that an estate proceeding be opened and a Special Administrator be appointed because the assets of the deceased ward are in need of protection pending the appointment of a Personal Representative. Describe in detail why a Personal Representative cannot be appointed instead, the circumstances requiring the appointment of a Special Administrator, and the assets requiring protection. A petition for probate requesting the appointment of a Special Administrator and a proposed order opening an estate proceeding and appointing a Special Administrator are attached hereto.

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WHEREFORE the undersigned asks that the Court terminate the conservatorship at the hearing on approval of the final account.

---

Signature of attorney

---

Signature

---

Typed name of attorney

---

Typed Name

---

Address (Actual address/not Post Office Box)

---

Address (Actual address/not Post Office Box)

---

---

---

---

---

Telephone number

---

Telephone number

---

Email address

---

Email address

---

Unified Bar number

---

Bar number (if flier is an attorney)

**VERIFICATION**

I \_\_\_\_\_, being first duly sworn, on oath, depose and say that I have read the foregoing pleading by me subscribed and that the facts therein stated are true

to the best of my knowledge, information, and belief.

\_\_\_\_\_  
Signature of petitioner

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public/Clerk

**CERTIFICATE OF SERVICE**

I certify that on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, a copy of this filing was either eServed in accordance with the provisions of Administrative Order 13-15 or served by first class mail, postage prepaid, on the following persons (list names and complete mailing addresses):

\_\_\_\_\_  
Signature

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD

In re:

\_\_\_\_\_  
Deceased

**ORDER APPOINTING SPECIAL ADMINISTRATOR**

Upon consideration of the Petition Post Appointment To Terminate Conservatorship of Deceased Ward and the petition for probate attached thereto, requesting the appointment of a Special Administrator to preserve assets, filed by \_\_\_\_\_ on \_\_\_\_\_, in accordance with D.C. Code, sec. 21-2075, notice having been given, a hearing having been held, and good cause having been shown in that a Personal Representative cannot yet be appointed, it is hereby this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_,

ORDERED that an estate be opened for this deceased ward, an ADM case number be assigned, and a copy of this order be entered in the new estate proceeding, and it is further

ORDERED that \_\_\_\_\_ is appointed as Special Administrator in the new estate case, provided that within fourteen (14) days of the date of this order, the Special Administrator files an Acceptance and Consent to Appointment as Special Administrator, a bond in the amount of \$\_\_\_\_\_, and if the Special Administrator is a non-resident of the District of Columbia, a power of attorney in the estate proceeding, and it is further

ORDERED that the Special Administrator shall file an additional bond in an amount to be fixed by the Court before accepting assets in excess of the stated amount in the estate proceeding, and it is further

ORDERED that the Special Administrator shall file in the estate proceeding within 6 months of this order and every 6 months thereafter a verified report, with copies to interested persons, addressing

- a. The total amount of estate assets received during the reporting period and the source,
- b. The total balance currently in his or her possession or control and the location of the assets,

- c. The amount of the bond (if the bond is not sufficient to cover the total balance of assets, a petition for additional undertaking shall be filed with this report),
- d. If previously authorized by Court order, the total amount expended during this reporting period and the purpose of the expenditure,
- e. The reasons, if any, why a personal representative has not yet been appointed, and it is further

ORDERED that a status hearing is set for \_\_\_\_\_, 20\_\_\_\_  
at \_\_\_\_\_ a.m./p.m. in the estate proceeding to determine what steps have been taken to  
petition for appointment of a Personal Representative.

---

JUDGE

Copies to:  
(Insert list of names and addresses of all interested persons. Attach additional sheet if necessary.)

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
PROBATE DIVISION

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD

In re:

\_\_\_\_\_  
An Adult

**NOTICE OF DEATH**

The Clerk of this Court will please be advised that \_\_\_\_\_  
\_\_\_\_\_ died on \_\_\_\_\_,  
20\_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Typed name

\_\_\_\_\_  
Address (actual address/not Post Office Box)  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Email address

\_\_\_\_\_  
Bar number (if filer is an attorney)

## CERTIFICATE OF SERVICE

I certify that on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, a copy of this filing was either eServed in accordance with the provisions of Administrative Order 13-15 or served by first class mail, postage prepaid, on the following persons (list names and complete mailing addresses):

---

Signature

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_ INT \_\_\_\_\_  
\_\_\_\_\_ IDD \_\_\_\_\_  
\_\_\_\_\_ ADM \_\_\_\_\_  
\_\_\_\_\_ GDN \_\_\_\_\_  
\_\_\_\_\_ TRP \_\_\_\_\_  
\_\_\_\_\_ CON \_\_\_\_\_  
\_\_\_\_\_ FEP \_\_\_\_\_  
\_\_\_\_\_ SEB \_\_\_\_\_

In re:

\_\_\_\_\_  
Minor/Ward/Deceased/Other

**SUGGESTION OF DEATH OF FIDUCIARY**

The Clerk of this Court will please be advised that the Court-appointed fiduciary,  
\_\_\_\_\_, who was

- the guardian of the minor,
- the guardian of this adult ward,
- the conservator of this adult ward,
- the Personal Representative of this estate,
- the Trustee of this trust,
- the conservator of the property of this adult ward (CON proceeding only),
- the conservator of the person of this adult ward (CON proceeding only),

died on \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Typed Name

\_\_\_\_\_  
Title: guardian/conservator/attorney

\_\_\_\_\_  
Address (Actual address/not Post Office Box)

\_\_\_\_\_

\_\_\_\_\_  
Telephone number



**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_ INT \_\_\_\_\_  
\_\_\_\_\_ IDD \_\_\_\_\_

In re:

\_\_\_\_\_

An Adult

**PETITION FOR COMPENSATION OF VISITOR OR EXAMINER**

I, \_\_\_\_\_, was appointed (Visitor / Examiner) in the above-captioned proceeding on \_\_\_\_\_ and request compensation in the total amount of \_\_\_\_\_. I expended \_\_\_\_\_ hours at an hourly rate of \$\_\_\_\_\_ as follows:

STATEMENT OF SERVICES RENDERED

<u>Date</u>	<u>ACTIVITY</u>	<u>TIME EXPENDED</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(Use additional pages if necessary.)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Typed Name

\_\_\_\_\_  
Address (Actual address/not Post Office Box)

\_\_\_\_\_  
Telephone number

**VERIFICATION**

I, \_\_\_\_\_, being first duly sworn on oath, depose and say that I have read the foregoing pleading by me subscribed and that the facts therein stated are true to the best of my knowledge, information and belief.

\_\_\_\_\_  
Signature of Petitioner

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public/Clerk

**CERTIFICATE OF SERVICE**

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, a copy of the foregoing was served by first class mail, postage prepaid, to the following interested persons (list names and addresses of all interested persons):


\_\_\_\_\_  
Signature

**NOTICE OF PETITION FOR COMPENSATION**

You are hereby notified that you may file written exceptions or objections to the petition for compensation with the Register of Wills and serve a copy thereof on the petitioner, all parties, and on anyone who has filed an effective request for notice within 20 calendar days of the mailing to you of this Notice of Petition for Compensation. Reasons for your exceptions or objections should be stated.

Consents: Persons required to be served notice of a petition may file consents to the petition for compensation. If all persons required to be served with notice file consents, the notice and the 20 day period referred to in the notice required above shall be waived and the petition for compensation shall be immediately reviewed for approval. Consents to the petition shall be in the following form and, once filed, constitute a waiver of the right to object thereto:

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
PROBATE DIVISION

\_\_\_\_ INT \_\_\_\_  
\_\_\_\_ IDD \_\_\_\_

In re:

\_\_\_\_\_

An Adult

**CONSENT TO COMPENSATION AND FEES**

I, \_\_\_\_\_, have received a copy of the Petition for  
Compensation of Visitor or Examiner in the amount of \$\_\_\_\_\_, for  
\_\_\_\_\_ and \$ \_\_\_\_\_ for \_\_\_\_\_.

I waive the right to file objections to the above stated amounts and I consent to the approval by the  
Court of payment of such amounts.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
PROBATE DIVISION

\_\_\_\_\_ INT/IDD \_\_\_\_\_

In re:

\_\_\_\_\_  
An Adult

**NOTICE OF PETITION FOR COMPENSATION**

You are hereby notified that you may file written exceptions or objections to the petition for compensation with the Register of Wills and serve a copy thereof on the petitioner, all parties, and on anyone who has filed an effective request for notice within 20 calendar days of the mailing to you of this Notice of Petition for Compensation. Reasons for your exceptions or objections should be stated.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Filer

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
PROBATE DIVISION

\_\_\_\_\_ INT/IDD \_\_\_\_\_

In re:

\_\_\_\_\_  
An Adult

**CONSENT TO COMPENSATION AND FEES**

I, \_\_\_\_\_, have received a copy of the Petition for Compensation in the amount of \$ \_\_\_\_\_, for \_\_\_\_\_ and \$ \_\_\_\_\_ for \_\_\_\_\_.

I waive the right to file objections to the above stated amounts and I consent to the approval by the Court of payment of such amounts.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

Note: Persons required to be served notice of a petition may file consents to the petition for compensation. If all persons required to be served with notice file consents, the notice and the 20-day period referred to in the notice required shall be waived and the petition for compensation shall be immediately reviewed for approval. Consents to the petition shall be in this format and, once filed, constitute a waiver of the right to object to the compensation requested.

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

In re:

\_\_\_\_\_

Deceased/Minor/Ward/Other

\_\_\_\_\_ ADM \_\_\_\_\_  
\_\_\_\_\_ INT \_\_\_\_\_  
\_\_\_\_\_ IDD \_\_\_\_\_  
\_\_\_\_\_ GDN \_\_\_\_\_  
\_\_\_\_\_ TRP \_\_\_\_\_  
\_\_\_\_\_ CON \_\_\_\_\_

**MOTION FOR LEAVE TO LATE FILE PETITION FOR COMPENSATION**

1. Attached hereto is an original petition for compensation for services rendered as (state role, i.e., guardian, conservator, Personal Representative, guardian of minor, trustee, counsel, guardian *ad litem*, visitor, examiner):

\_\_\_\_\_

2. This petition should have been filed on or before : \_\_\_\_\_

3. The reason that it is being filed late is as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WHEREFORE movant asks that this motion be granted.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Typed Name

\_\_\_\_\_  
Address (Actual address/not Post Office Box)

\_\_\_\_\_  
Telephone number

The \$20.00 filing fee is enclosed made payable to "Register of Wills."

### **CERTIFICATE OF SERVICE**

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, a copy of the foregoing was served by first class mail, postage prepaid, to the following persons (list names and addresses of all parties):

---

Signature

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

In re:

\_\_\_\_\_ Deceased/Minor/Ward/Other

\_\_\_\_\_ ADM \_\_\_\_\_  
\_\_\_\_\_ INT \_\_\_\_\_  
\_\_\_\_\_ IDD \_\_\_\_\_  
\_\_\_\_\_ GDN \_\_\_\_\_  
\_\_\_\_\_ TRP \_\_\_\_\_  
\_\_\_\_\_ CON \_\_\_\_\_

**ORDER**

Upon consideration of the Motion for Leave to Late File Petition for Compensation filed herein by \_\_\_\_\_, and any response thereto, it is hereby, by the Court, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,

ORDERED

1. That the motion be  Granted  Denied

2. That \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ **JUDGE**

cc:

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD

In re:

\_\_\_\_\_  
An Adult

**CONSERVATORSHIP PLAN**

I, \_\_\_\_\_, appointed conservator in the above-captioned proceeding on \_\_\_\_\_, hereby submit the following conservatorship plan and attached inventory.

THE FOLLOWING SERVICES ARE NECESSARY TO MANAGE THE FINANCIAL RESOURCES DESIGNATED BY THE ORDER OF THE COURT: (Collecting assets, depositing, and investing assets, continuing or participating in the operations of businesses or other enterprises, etc.)

THE MEANS BY WHICH THESE SERVICES WILL BE PROVIDED ARE:  
(Employment of persons such as investment advisors to advise or assist with conservator's duties.)

THE MANNER IN WHICH THE INCAPACITATED INDIVIDUAL, GUARDIAN, CONSERVATOR, OR ANY OTHER INDIVIDUAL WHO HAS BEEN APPOINTED TO SERVE IN THAT CAPACITY WILL EXERCISE AND SHARE THEIR DECISION-MAKING AUTHORITY IS: (Report agreements regarding how decision-making authority will be shared.)

THE POLICIES AND PROCEDURES GOVERNING THE EXPENDITURE OF FUNDS ARE: (Report agreements reached regarding expenditures of funds.)

OTHER ITEMS THAT WILL ASSIST IN THE MANAGEMENT OF THE DESIGNATED FINANCIAL RESOURCES AND IN FULFILLING THE NEEDS OF THE INCAPACITATED INDIVIDUAL, THE TERMS OF THE COURT'S ORDER, AND THE DUTIES OF THE CONSERVATOR ARE: (Report the need, if any, for the Court to assign to conservator any duties or powers which the disabled person lacks the capacity to perform.)

Attach a complete inventory of financial resources designated by the order of the Court.

**VERIFICATION**

I, \_\_\_\_\_, being first duly sworn, on oath, depose and say that that I have read the foregoing pleading by me subscribed and that the facts therein stated are true to the best of my knowledge, information, and belief.

\_\_\_\_\_  
Signature of conservator

\_\_\_\_\_  
Typed name of conservator

\_\_\_\_\_  
Address (actual address/not Post Office Box)

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Email address

\_\_\_\_\_  
Unified Bar number (if conservator is an attorney)

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

---

Notary Public/Clerk

**CERTIFICATE OF SERVICE**

I certify that on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, a copy of this filing was either eServed in accordance with the provisions of Administrative Order 13-15 or served by first class mail, postage prepaid, on the following persons (list names and complete mailing addresses):

---

Signature

# Superior Court of the District of Columbia

## Probate Division

In re: \_\_\_\_\_

\_\_\_\_\_ GDN \_\_\_\_\_

\_\_\_\_\_ TRP \_\_\_\_\_

\_\_\_\_\_ CON \_\_\_\_\_

\_\_\_\_\_ INT \_\_\_\_\_

\_\_\_\_\_ IDD \_\_\_\_\_

### INVENTORY REPORT

The report of \_\_\_\_\_,  
Guardian, Conservator, Committee, Trustee, Receiver (strike all except one) who qualified  
as such on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, respectfully shows that  
the estate consists of the following:

#### REAL ESTATE

Location and Description	Assessed Value	Encumbrances (Mortgages)	Market Value
<b>COLUMN TOTALS</b>	\$	\$	\$

#### BANK DEPOSITS AND OTHER MONEY

Account No. (last 4 digits only)	Amount	Deposited In (Name of Depository)	In the Name of (Registration on Account)
	\$		
<b>TOTAL</b>	\$		





**AUTOMOBILES, JEWELRY, HOUSEHOLD EFFECTS AND ALL OTHER PERSONAL  
ASSETS**

---

Attached additional page(s) if necessary

---

The penalty of my undertaking is \$ \_\_\_\_\_  
It was filed on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
The surety is \_\_\_\_\_  
When the undertaking was filed, the value of the estate was \$ \_\_\_\_\_

---

**VERIFICATION**

I \_\_\_\_\_, being first duly sworn, on oath, depose and say that I have read the foregoing inventory report by me subscribed and that the facts therein stated are true to the best of my knowledge, information and belief.

Signature \_\_\_\_\_

Typed Name \_\_\_\_\_

Address (Actual address/not Post Office) \_\_\_\_\_  
\_\_\_\_\_

Telephone Number \_\_\_\_\_

E-mail address (Optional) \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
**Notary Public/Deputy**

# Superior Court of the District of Columbia

## PROBATE DIVISION

Estate of \_\_\_\_\_ Case Year \_\_\_\_\_ Case Type \_\_\_\_\_ Case No. \_\_\_\_\_

Accounting of \_\_\_\_\_  
*(First, Second, etc.) (Name of Fiduciary) (Fiduciary Capacity)*

For period beginning \_\_\_\_\_ 20\_\_\_\_\_, and ending \_\_\_\_\_  
 20\_\_\_\_\_

SUMMARY OF TRANSACTIONS	Debit(s) (Receipts)	Credit(s) (Disbursements)
<b>Receipts:</b>		
Total from Schedule "A" Beginning Balance.....	\$	
Total from Schedule "B" Dividend Balance.....		
Total from Schedule "C" Interest Income.....		
Total from Schedule "D" Annuity Income.....		
Total from Schedule "E" Rental Income.....		
Total from Schedule "F" Other Collections.....		
Total from Schedule "G" Gain.....		
<b>Disbursements:</b>		
Total from Schedule "G" Losses.....		\$
Total from Schedule "H" Administrative Expenses.....		
Total from Schedule "I" Rental Property Expenses.....		
Total from Schedule "J" Other Disbursements.....		
Total from Schedule "K" Maintenance and Care Expenses – Distributions		
Total from Schedule "L" Ending Balance.....		
<b>Totals</b> (Columns must agree) .....	\$	\$

**SCHEDULE "A"**  
**BEGINNING BALANCE**

List below the assets held at the beginning of the accounting. In the First Accounting, these would be the assets held or in existence on the date of Appointment or Qualification. Each asset must be listed separately and described fully. In Guardianship, Conservatorship and Trust cases, include all personal property.

Example:

600 shares XYZ Co., common stock

Carrying value

\$8,000.00

	<b>Carrying Value</b>
	\$
If continuation sheet(s) are used, enter total here.....	\$
<b>Total</b> (carry forward to summary) .....	\$

**SCHEDULE "B"**  
**DIVIDEND INCOME**

List below the source of each dividend received, the amount, and the date of payment.

Example:

100 shares common stock of XYZ Co.

March 30, 19____	\$30.00	
June 30, 19____	30.00	
Sept. 30, 19____	35.00	
Dec. 31, 19____	35.00	130.00

	<b>Receipts</b>
	\$
If continuation sheet(s) are used, enter total here.....	\$
<b>Total</b> (carry forward to summary) .....	\$

**SCHEDULE "C"**  
**INTEREST INCOME**

List below the source of each interest payment received, the amount, and the date of payment.

Example:

ABC Bank:

March 30, 19____	\$30.00	
June 30, 19____	30.00	
Sept. 30, 19____	30.00	
Dec. 31, 19____	40.00	130.00

	<b>Receipts</b>
	\$
If continuation sheet(s) are used, enter total here.....	\$
<b>Total</b> (carry forward to summary) .....	\$

**SCHEDULE "D"**  
**ANNUITY INCOME**

List below each annuity, pension, etc., identifying each as to source, period or months covered and the rate.

Example:

Social Security benefits for the  
calendar months of June 19\_\_\_\_ through May 19\_\_\_\_  
12 months as follows:  
5 at \$130.00 (136.70 Less 6.70 Insurance Premium) \$650.00  
7 at 140.00 (146.70 Less 6.70 Insurance Premium) 980.00 \$1630.00

	<b>Receipts</b>
	\$
If continuation sheet(s) are used, enter total here.....	\$
<b>Total</b> (carry forward to summary) .....	\$

**SCHEDULE "E"**  
**RENTAL INCOME**

List below each parcel of real estate or rental unit, the period covered, the gross rent collection and the amount. If the property is not rented or was only partially rented, please indicate and explain the reason(s) therefore:

Example:

ABC Bank:  
1111 – 99<sup>th</sup> Street, for the months of  
June 19\_\_\_\_ through May 19\_\_\_\_, at \$300.00 \$3,600.00

	<b>Receipts</b>
	\$
If continuation sheet(s) are used, enter total here.....	\$
<b>Total</b> (carry forward to summary) .....	\$

**SCHEDULE "F"**  
**OTHER COLLECTIONS**

List in detail below, the source(s) and amount(s) of all other collections not appropriate for inclusion in Schedules "B", "C", "D", "E", or "G". This would include insurance, reimbursements, refunds, additional assets, proceeds from sale of real estate, etc.

	<b>Receipts</b>
	\$
If continuation sheet(s) are used, enter total here.....	\$
<b>Total</b> (carry forward to summary) .....	\$

**SCHEDULE "G"**  
**GAINS AND LOSSES**

List in detail below, all security or other transaction(s). If the transaction resulted in a gain or loss, the amount of such gain or loss should be extended to the appropriate column.

Example:

	19_____		
9/30		100 shares XYZ Co., common sold for	\$3,000.00
		100 shares XYZ Co., common carried at	\$2,500.00
		Net Gain	\$500.00

	Gains	Losses
	\$	\$
If continuation sheet(s) are used, enter total here.....	\$	\$
<b>Total</b> (carry forward to summary) .....	\$	\$

**SCHEDULE "H"**  
**ADMINISTRATIVE EXPENSES**

List in detail below each expenditure of an administrative nature. This would include attorney's fees, audit fees, bond premiums, bank charges, court costs, etc.

	<b>Disbursements</b>
	\$
If continuation sheet(s) are used, enter total here.....	\$
<b>Total</b> (carry forward to summary) .....	\$

**SCHEDULE "I"**  
**RENTAL PROPERTY EXPENSES**

List in detail below, all expenditures related to rental property(ies). If the expenses relate to more than one property, the expenses should be grouped as to each property.

	<b>Disbursements</b>
	\$
If continuation sheet(s) are used, enter total here.....	\$
<b>Total</b> (carry forward to summary) .....	\$

**SCHEDULE "J"**  
**OTHER DISBURSEMENTS**

List in detail below all other disbursements or credits which cannot properly be included in Schedules "G", "H", "I", or "K".

	Disbursements
	\$
If continuation sheet(s) are used, enter total here.....	\$
<b>Total</b> (carry forward to summary) .....	\$

**SCHEDULE "K"**  
**MAINTENANCE AND CARE EXPENSES**

List in detail below, all expenditures for the maintenance and care of Ward in Guardianship and Conservatorship cases. In Trust cases, list all distributions to beneficiaries.

	Disbursements
	\$
If continuation sheet(s) are used, enter total here.....	\$
<b>Total</b> (carry forward to summary) .....	\$

## SCHEDULE "L"

List below the assets held at the end of the accounting period. Each asset must be listed separately and described fully. In Guardianship, Conservatorship and Trust cases, include all personal property. In Trusteeship cases, include all personal and real property. The Fair Market Value should be as of the closing date of the accounting.

	Carrying Value	Fair Market Value
Example		
500 shs., XYZ Co., common stock	\$5,000.00	\$10,000.00
Cert No. 177253 100 shs. Dated 11-1-66		
187644 200 shs. Dated 9-5-69		
197223 200 shs. Dated 12-2-70	_____	_____

	Carrying Value	Fair Market Value
	\$	\$
If continuation sheet(s) are used, enter total here .....	\$	\$
<b>Total</b> (carry forward to summary) .....	\$	\$

Lot 4008, Square 42, improved  
 by premises 722 Easy Lane,  
 Washington, DC Rented  
 for \$250.00 per month

**REAL ESTATE**  
 (IF NOT INCLUDED IN SCHEDULE "L")

\$10,000                      None                      Unknown

COMPLETE LOCATION AND DESCRIPTION	Assessed Value	Encumbrance (Mortgage Lien, Etc.)	Market Value if Known
	\$	\$	\$
<b>COLUMN TOTALS</b> .....	\$	\$	\$

The foregoing securities are kept or deposited at \_\_\_\_\_

in the name of \_\_\_\_\_

The penalty of my undertaking is \$ \_\_\_\_\_

The original undertaking was filed on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

The surety is \_\_\_\_\_

**District of Columbia. to wit:**

I \_\_\_\_\_, being first duly  
*(Type or Print Plainly)*

sworn, on oath, depose and say that I have read the foregoing account by me  
 subscribed and that the facts therein stated are true to the best of my knowledge,  
 information, and belief.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Address (Actual address/ not Post Office Box)

\_\_\_\_\_  
 Typed Name

\_\_\_\_\_

\_\_\_\_\_  
 Telephone Number

\_\_\_\_\_  
 E-mail address (optional)

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, A.D. 20\_\_\_\_

\_\_\_\_\_  
 Notary Public/Deputy

**Superior Court of the District of Columbia  
 PROBATE DIVISION**

On this \_\_\_\_\_ day of \_\_\_\_\_, A.D. 20\_\_\_\_  
 the foregoing account, being presented for approval, the account is, after examination  
 by the Court, approved and passed.

\_\_\_\_\_  
 Judge

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD

In re:

\_\_\_\_\_  
An Adult

**CONSERVATOR'S REPORT**

Name of conservator:

\_\_\_\_\_

Address of conservator:

\_\_\_\_\_  
\_\_\_\_\_

Describe significant changes, if any, in the capacity of the subject of this proceeding to meet the essential requirements for the subject's physical health or safety: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

The services being provided to the subject of this proceeding are: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

The significant actions taken by the conservator during this reporting period are: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

The significant problems relating to the conservatorship which have arisen during the reporting period are: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The reasonable and necessary expenses incurred by the conservator are: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

The reason, if any, why the appointment should not be terminated or why no less restrictive alternative will permit the subject of this proceeding to meet the essential requirements for the subject's physical health or safety are: \_\_\_\_\_

\_\_\_\_\_

Attached is an accounting of the financial resources under the control of the conservator for the period indicated.

**VERIFICATION**

I, \_\_\_\_\_, being first duly sworn, on oath, depose and say that that I have read the foregoing pleading by me subscribed and that the facts therein stated are true to the best of my knowledge, information, and belief.

\_\_\_\_\_  
Signature of conservator

\_\_\_\_\_  
Typed name of conservator

\_\_\_\_\_  
Address (actual address/not Post Office Box)

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Email address

\_\_\_\_\_  
Unified Bar number (if conservator is an attorney)

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public/Clerk

## CERTIFICATE OF SERVICE

I certify that on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, a copy of this filing was either eServed in accordance with the provisions of Administrative Order 13-15 or served by first class mail, postage prepaid, on the following persons (list names and complete mailing addresses):

---

Signature

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
PROBATE DIVISION

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD

In re

\_\_\_\_\_

ward

**NOTICE OF FILING ACCOUNT AND CONSERVATOR'S REPORT**

To: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Notice is hereby given that the \_\_\_\_\_ Account of the conservator and the Conservator's Report have been filed or will be filed on or before \_\_\_\_\_ 20\_\_\_\_.

You have the right to file exceptions or objections to the account and/or report within 10 days of the receipt of notice from the Register of Wills setting a hearing regarding the account.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of filer

\_\_\_\_\_  
Typed name of filer

\_\_\_\_\_  
Address (Actual address/not Post Office Box)

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Email address

\_\_\_\_\_  
Unified Bar number (if filer is an attorney)

**Financial Account Information (Form 27)**

Estate of \_\_\_\_\_  
 decedent/minor/adult ward/custodian

\_\_\_\_\_ ADM \_\_\_\_\_  
 \_\_\_\_\_ INT/IDD \_\_\_\_\_  
 \_\_\_\_\_ SEB \_\_\_\_\_  
 \_\_\_\_\_ GDN \_\_\_\_\_  
 \_\_\_\_\_ CON \_\_\_\_\_

Name on Account	Name and Address of Bank/Financial Institution	Account Number

This report will be maintained under seal pursuant to SCR-PD 5.1, recorded in a secure Court database, and available only to authorized Court personnel, unless otherwise included in the public record.

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
PROBATE DIVISION

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD

In re:

\_\_\_\_\_  
An Adult

**CERTIFICATE OF NO UNSETTLED LIABILITIES**

I, \_\_\_\_\_, conservator of this estate, do hereby certify that there remain no unsettled liabilities of this estate.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Typed Name

\_\_\_\_\_  
Address (Actual address/not Post Office Box)

\_\_\_\_\_

\_\_\_\_\_  
Telephone number