JIS Code: ACC

CHIPPEWA INDIANS TRIBAL COURT	Number Annua	CIARY, SHORT FORM I ☐ Final ☐ Interim ENDED	CASE NO. and JU	
Court address 2605 N. West Bay Shore Drive, Peshawbestown	Email n, MI 49682 tribalcour	rt@gtb-nsn.gov		Court telephone no (231) 534-7050
In the matter of First, middle, and last name				
In a guardianship or conservatorship,	the ward's or protecte	ed individual's current ad	dress and telephon	e number are:
1. I,		, am the		
of the estate and submit the following	ng as my account, wh	ich covers the period fro	om Month, dav, vear	
to Month, day, year	(may not exceed 12	2 months).		
Note: Do not put financial account numbers on	this form. If an account nu	ımber is necessary to distingu	ish between accounts, p	ut it on form MC 97.
COLUMN 1. INCOME, GAIN, AND O	THER RECEIPTS	COLUMN 2. EXPENSES	, LOSSES, AND OTHE	R DISBURSEMENTS
	\$			\$
Investment g	gain		Investment loss	
Total Colum	ın 1		Total Column 2	
(Enter on line 2.b on page 2.)		(Enter on line 2.d on page 2.)		

Account of Fiduciary, Short Form (1/21)	Case No	
Page 2 of 2		
2. a. Balance on hand from last account, or value of inventor	ory, if first account	\$
b. Enter Total Column 1, Income, Gain, and Other Recei	\$	
c. Subtotal (Add line 2.a to line 2.b and enter the amount here)		
d. Enter Total Column 2, Expenses, Losses, and Other D		
e. Balance of assets on hand (Subtract line 2.d from line 2.c and		\$
This line must equal the last line in item 3. (Itemize asset	s below.)	
3. The balance of assets on hand are as follows:		
ITEMIZED ASSETS REMAINING	AT END OF ACCOUNTING PERIOD	
		\$
Total balance on hand.	\$	
<ul> <li>5. This account lists all income and other receipts and exper</li> <li>6. This account is not being filed with the court.</li> <li>7. My fiduciary fees incurred during this accounting period for this accounting period) are \$</li></ul>	od (including fees that have already been a . Attached is a written description of the s ncluding fees that have already been appi ttached is a written description of the serv	approved and/or paid ervices performed. roved and/or paid for ices performed.
of my information, knowledge, and belief.	Date	
	Date	
Attorney signature	Fiduciary signature	
Attorney name (type or print) Bar no.	Fiduciary name (type or print)	
Address	Address	
City, state, zip Telephone no.	City, state, zip	Telephone no.
<ul> <li>(For accounts that must be filed with the court.)</li> <li>1. You must bring to the court's attention any objection you conservatorships, the court does not normally review the</li> <li>2. You have the right to review proofs of income and disbur</li> </ul>	account without an objection.	•

- 3. You may object to all or part of an accounting by filing a written objection with the court before the court allows the account. You must pay a \$20.00 filing fee to the court when you file the objection. (See MCR 5.310[C].)
- 4. If an objection is filed and is not otherwise resolved, the court will conduct a hearing on the objection.
- 5. You must serve the objection on the fiduciary or his/her attorney.

yourself.