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| --- | --- | --- |
| STATE OF SOUTH CAROLINA | ) | IN THE PROBATE COURT |
|  | ) |  |
| COUNTY OF GREENVILLE | ) |  |
|  | ) | **ACCOUNTING** |
| IN THE MATTER OF: | ) |  |
|  | ) | CASE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| (Decedent) | ) |  |

|  |  |  |
| --- | --- | --- |
|  | FINAL | |
|  | INTERIM # |  |

|  |
| --- |
| The undersigned Personal Representative submits this accounting, which covers the period from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  through \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. |

The documentation on the following page(s) of this form sets forth a complete accounting for the period specified, which is summarized as follows:

|  |  |
| --- | --- |
| Beginning Balance from Inventory(ies) or  prior Interim Accounting, if applicable |  |
| Plus: Receipts  (Rent, Refunds, Dividends, Interest, etc.) |  |
| Subtotal |  |
| Less: Disbursements and Distributions |  |
| Ending Balance |  |
|  | | | |

The Personal Representative declares that this account has been examined and that its contents represent a correct statement of all receipts and disbursements and is true to the best knowledge and belief of the Personal Representative.

Personal Representative:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| SWORN to before me this | | |  | | day of | | | | | | Signature: | |  | |
|  | | , | 20 | |  | |  | | | | Print Name: |  | |
|  | | |  |  | | |  | | Address: | | | |  | |
|  | | | | | | |  | |  | | |  | |
| Notary Public for South Carolina | | | | | |  | |  | | Telephone (Work): | | |  | |
| My Commission Expires: | |  | | | | | |  | | (Home): | | |  | |
|  | |  | | | | | |  | | (Cell): | | |  | |
|  | |  | | | | | |  | | Email: | | |  | |
|  | |  | | | | | |  | | Attorney: | | |  | |
| Address: | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | |  |
| Telephone: | | | | | | | | | | | | |  |
| Email: | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **INVENTORY PROBATE ASSETS & RECEIPTS**  **(probate assets received into estate)** | | **DISBURSEMENTS & DISTRIBUTIONS**  **(probate assets disbursed/paid out from estate)** | |
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| **TOTAL** |  | **TOTAL** |  |