

# GUARDIAN'S INVENTORY

COURT OF COMMON PLEAS OF \_\_\_\_\_ COUNTY, PENNSYLVANIA

ORPHANS' COURT DIVISION

Estate of \_\_\_\_\_

an Incapacitated Person  
 a Minor

No. \_\_\_\_\_

**1. Real Estate: (Location, by whom occupied and rental terms, if applicable)**

**Estimated Value:**

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*Sub-Total for Real Estate:*

**2. Personal Property:**

**Estimated Value:**

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**3. Jointly Held Property:**

*(Set forth real and personal property owned by the Incapacitated Person JOINTLY with any other person(s). State whether held as tenants by the entireties; if not, whether the right of survivorship exists.)*

*Jointly Held Property*

**Estimated Value:**

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Estate of \_\_\_\_\_ }  an Incapacitated Person  
 }  a Minor

**4. Anticipated Assets:**

**Estimated Value:**

*(Set forth property of any kind expected to be acquired hereafter, together with anticipated date of acquisition.)*

<i>Property</i>	<i>Anticipated Date of Acquisition</i>	<i>Estimated Value</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____

***Sub-Total for Personal Estate:***

*(Attach additional sheets if necessary)*

**TOTAL OF ITEMS 1, 2, 3, and 4:** .....

Commonwealth of Pennsylvania :

: ss.

County of \_\_\_\_\_ :

\_\_\_\_\_, says that the foregoing is a full,  
*Guardian*  
true and complete Inventory of the Estate of \_\_\_\_\_,  
the aforesaid Incapacitated Person or Minor; and that all of the information set forth herein is  
true and correct to the best of the Guardian's knowledge and belief.

I verify that the statements made in this )  
Inventory are true and correct. I under- )  
stand that false statements herein are )  
made subject to the penalties of )  
18 Pa.C.S. § 4904 relating to unsworn )  
falsification to authorities. )

\_\_\_\_\_  
Guardian

Attorney for Guardian: \_\_\_\_\_

Supreme Court I.D. No.: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_