	CAUSE	NO		
IN THE GUARDIANSHIP OF		<u>\$</u>	IN THE COUNTY COURT	
NAME OF WARD		§ §	AT LAW NO. 2 OF	
AN INCAP	ACITATED PERSON	§ §	WISE COUNTY, TEXAS	
	INVENTORY, APPI	RAISEMENT	Γ AND LIST OF CLAIMS	
The	following is a full, true, as	nd complete	Inventory and Appraisement of all personal	
property an	d of all real property situate	d in the State	of Texas, together with a List of Claims due	
and owing	to this Estate as of		, the date of qualification of the Guardian,	
which have	come to the possession or k	anowledge of	the undersigned.	
	INVENTO	RY AND AF	PPRAISEMENT	
I. <u>CO</u>	MMUNITY PROPERTY		<u>VALUE</u>	
A.	REAL PROPERTY: Parcel #1 ADDRESS: LEGAL DESC: WARD'S OWNERSHIE	P INTEREST	\$ :	
В.	HOUSEHOLD FURNISHINGS \$			
C.	MOTOR VEHICLES: Vehicle #1 Description:		\$	
D.	CASH IN BANKS: Account #1 Institution: Account type: Account/CD No.		 	
E.	INSURANCE: Policy #1 Insurer: Policy No.		\$	

F.	SECURITIES:	
	Security #1	\$
	Description:	
G.	MISCELLANEOUS	
	Item #1:	<b>\$</b>
TOT	TAL COMMUNITY PROPERTY	\$
	ARATE PROPERTY	VALUE
*[		
A.	REAL PROPERTY:	Φ.
	Parcel #1	\$
	ADDRESS:	
	LEGAL DESC: WARD'S OWNERSHIP INTEREST:	
	WARD SOWNERSHIP INTEREST.	
B.	HOUSEHOLD FURNISHINGS	\$
C.	MOTOR VEHICLES:	
	Vehicle #1	\$
	Description:	
D.	CASH IN BANKS:	
	Account #1	
	Institution:	
	Account type:	
	Account/CD No.	<u> </u>
E.	INSURANCE:	
	Policy #1	
	Insurer:	\$
	Policy No.	
F.	SECURITIES:	
	Security #1	\$
	Description:	
G.	MISCELLANEOUS	
	Item #1:	<b></b> \$
топ	CAL CEDADATE DOODEDTY	¢
$\mathbf{I}\mathbf{O}\mathbf{I}$	TAL SEPARATE PROPERTY	\$

III.	Item #1: Description of Property: Estate's Interest: Nature of Property:	· 	\$
	TOTAL VALUE OF JOINTL	LY-OWNED PROPERTY	\$
	LIST OF CI	LAIMS OWED TO ESTATE	
	Choose one:		
	No claims are due and owing	to the Estate.	
	☐ The following claims are due	and owing to the Estate:	
	SOURCE		<u>VALUE</u>
	Address: Type of Debt:	ESTATE	
	<u>TOTAI</u>	L VALUE OF ESTATE	
	The total value of the Estate of _	, An	Incapacitated Person,
is \$	·		
	The Guardian asks the Court that	t foregoing Inventory, Appraisem	nent and List of Claims
be app	proved and entered of record.		
		Respectfully submitted,	
		Printed Name:	
		Guardian of the Person Estate o Person	r Person & Estate of, an Incapacitated

BY:		
	, Attorney	for Guardian
Address:		
Telephone:		
Telecopier:		
State Bar No.:		
STATE OF TEXAS	§	
COUNTY OF WISE	§	
I,that the Inventory, Appra and claims of the Estate t		, having been duly sworn, hereby state on oath of Claims is a true and complete statement of property o my knowledge.
		Name of Guardian:
SWORN TO and this day of office, in the capacity the	I SUBSCRIBEI	D BEFORE ME by
		Notary Public, State of Texas