

**Signature Page/Fee Schedule**

The undersigned guardian certifies that said guardian has obtained a receipt or canceled check for all expenditures and disbursements made on behalf of the ward, which said guardian will preserve along with other substantiating papers for a three (3) year period after discharge and will upon request make available for inspection as the court may order. F.S. 744.3678 (3).

Attached hereto is the required fee for the auditing of this annual financial return (unless waived by court order.)

Audit Fee Must Be Attached to this Report.	Make Check Payable to: Clerk of the Court	
If the remaining Estate Value is:		
\$ 25,000 or Less .....	Fee \$	10
More than \$ 25,000 to and including \$100,000.....	Fee \$	50
More than \$ 100,000 to and including \$500,000.....	Fee \$	100 <span style="float: right;">Per F.S. 744.3678</span>
More than \$ 500,000 .....	Fee \$	150

**Under penalties of perjury,** I declare that I have read and examined the foregoing return and that, to the best of my knowledge and belief, it constitutes a full and correct account of all the ward's property of which this guardian has control, and is a complete report of all cash and property transactions and of all receipts and any disbursements by me from 01/01/2000 through 12/31/2000 and includes a statement of the ward's assets at the close of said period. I also certify that any and all annual investigatory forms and fees have been filed and paid, unless exempt by Florida Statute or Court Order.

Jeff R Guardian		
<b>Guardian Signature</b>	<b>Date</b>	<b>(Guardian Name)</b>
_____	_____	_____
333333333		444444 W 3rd BEND
(Guardian SSN/EIN)		(Guardian Street Address)
_____	_____	_____
(305) 444-5555		Miami Beach, GA 555557777
(Guardian Phone Number)		(Guardian City/State/Zip)
Alison M Co-Guardian		
<b>Co-Guardian Signature</b>	<b>Date</b>	<b>(Co-Guardian Name)</b>
_____	_____	_____
555555555		555555 SW 4th SPRING
(Co-Guardian SSN/EIN)		(Co-Guardian Street Address)
_____	_____	_____
(444) 555-8888		Burmingham, AL 447789999
(Co-Guardian Phone Number)		(Co-Guardian City/State/Zip)

**All guardians of property must sign and provide the most current address, telephone no, and ssn. Only reports with Original Signatures will be audited by the Clerk of the Court.**