

FORM AG10

File No.

FINANCIAL STATEMENT¹

Guardianship of Adults Act

REPRESENTED PERSON ('RP')

First Name/s:

Surname:

Current address:

Living arrangements: Rent

Own

Care Facility

Other – please specify:

GUARDIAN DETAILS (FOR GUARDIANS WITH AUTHORITY AS TO FINANCIAL MATTERS)

Guardian 1

First Name/s:

Surname:

Postal Address:

E-mail:

Phone:

Mobile phone:

Guardian 2 (If more than one guardian)

First Name/s:

Surname:

Postal Address:

E-mail:

Phone:

Mobile phone:

¹ Only guardians with authority as to financial matters need to complete and sign this form.

Important: The use of electronic media for the exchange of documents and other important information in NTCAT proceedings is strongly encouraged. If you are able to provide an email address it will be used for the service of documents and notices. If you have provided a mobile phone number NTCAT may send you SMS text messages with notifications about your matter.

REPORTING PERIOD

The reporting period for this report is the period from your appointment or re-appointment as guardian to the date of this report.

The parts of this report dealing with income and expenditure will require details for individual financial years within the reporting period.

SHARED ASSETS OR LIABILITIES

If the RP shares an asset or liability with someone else, only the value of their share should be referred to and recorded in this report.

INCOME

What was the RP's (before tax) income during the reporting period?

Type of income	Financial Year:	Financial Year:	Financial Year:
Pension and other government benefits and subsidies			
Employment			
From investments (including superannuation)			
Other (please specify):			
Total:			

EXPENDITURE

What have you spent on the RP's behalf during the reporting period?

Type of expense	Financial Year:	Financial Year:	Financial Year:
Daily living expenses (eg. food, clothing, medical/health care, entertainment etc)	\$	\$	\$
Accommodation	\$	\$	\$
Utilities (eg. power, water, gas) and Council rates	\$	\$	\$
Insurance	\$	\$	\$
Loan repayments	\$	\$	\$
Taxation	\$	\$	\$
Guardian fees	\$	\$	\$
Other (please specify):	\$	\$	\$
Total:	\$	\$	\$

Were any of the expenses included in the amounts above, one-off (ie. non-recurring) expenses of \$500.00 or more?

Yes No

If yes please provide details of each expense:

Date	Amount	Reason for Expense
	\$	
	\$	
	\$	
	\$	

Did you spend the RP's funds directly on or for the RP?

Yes No

If no, please provide details of each expense:

Date	Amount	Reason for Expense
	\$	
	\$	

ASSETS

Please:

- list in the table below the bank savings, cheque or other investment accounts of the RP for which you have authority; and
- attach** to this report a copy of a statement for each account listed for the entire reporting period. Clearly mark with a letter each statement corresponding to the letter on the list.

	Financial Institution	Type of Account ²	Account No.	Joint Account Y/N	Current Balance
A.					\$
B.					\$
C.					\$
D.					\$

Other Financial Assets	Co-owned? Y/N	Value (RP's share)
Superannuation		\$
Shares		\$
Life Insurance		\$

² For example savings, cheque, credit or loan.

Accommodation Bond		\$
Other		\$
	Total:	\$

Real Estate	Co-owned? Y/N	Value (RP's Share)	Amount Owed (if mortgaged)	Net Value
Real estate 1 Address of property			\$	\$
Real estate 2- <i>if applicable</i> Address of property			\$	\$
Accommodation Bond ³			\$	\$
			Total:	\$

For the value(s) given above what was the basis⁴ for your valuation?

- Professional valuation by a licensed valuer Market survey
 Estimate Other, Please specify:

Personal Property	Co-owned? Y/N	Value (RP's Share)
Vehicles		\$
All other items (estimated)		\$
	Total:	\$

³ This includes accommodation bonds held by a an aged care facility.

Does the total shown for personal property include individual personal assets (excluding vehicles) for which the value of the RP's share is \$5,000.00 or more? If so, please specify in the below table.

Personal Property	Value of RP's Share
	\$
	\$
	\$
Total:	\$

DISPOSAL⁵ OF ASSETS

Did you dispose of any of the RP's assets worth \$2,000 or more during the reporting period?

Yes No

If yes please provide details:

Asset Disposed Of	Date Asset Disposed Of	Reason for Disposal	Value
			\$
			\$

CURRENT LIABILITIES

Please:

- list in the table below the RP's loan, credit, mortgage or other similar accounts for which you have authority; and
- attach to this report** a copy of a statement for each account listed for the entire reporting period. Please clearly mark each statement with a letter corresponding to the letter in the list.

⁵ Disposal includes sale, gift, transfer or destruction.

	Financial Institution	Type of Account ⁶	Account No.	Joint Account Y/N	Current Balance
E.					\$
F.					\$
G.					\$
H.					\$

Other Debts Owning	Amount owing
Taxation debt	\$
Personal debt(s)	\$
Other	\$
Total:	\$

FUTURE DEBTS, EXPENSES AND LIABILITIES OVER \$5,000.00

Are you aware:

- expenses of \$5,000 or more the RP is likely to incur; or
- debts of \$5,000 or more that will become owing by the RP within 1 year from the date of this report?

Yes No

If yes, please provide details of each debt or expense:

Debt or expense	Estimated amount
	\$
	\$
	\$
Total:	\$

⁶ For example savings, cheque, credit or loan.

DECLARATION BY GUARDIAN/S

GUARDIAN 1

I declare that the information provided and statement/s contained in this declaration is/are true and I know that it is an offence⁷ to make a declaration that is false in any material particular:

SIGNATURE⁸

(insert full name)

on

(insert date)

at

(insert place)

GUARDIAN 2

I declare that the information provided and statement/s contained in this declaration is/are true and I know that it is an offence⁹ to make a declaration that is false in any material particular:

SIGNATURE¹⁰

(insert full name)

on

(insert date)

at

(insert place)

⁷ Section 119 of the *Criminal Code Act (NT)* provides that a person making an unattested declaration that, in any material particular, is to his or her knowledge false, is guilty of a crime and is liable to imprisonment for 3 years.

⁸ This unattested declaration does not need to be witnessed.

⁹ See footnote 6.

¹⁰ See footnote 7.