

**THIS DOCUMENT IS CONFIDENTIAL AND
SHALL NOT BE MADE PART OF THE COURT FILE
OR PROVIDED TO THE PUBLIC PURSUANT TO NEB. CT. R. § 6-1464.**

***TO THE GUARDIAN AND/OR CONSERVATOR: Only file this form with
the court. Do not send this form to anyone else.***

IN THE MATTER OF

Ward/Minor Ward/Protected Person

Case Number: _____

**PERSONAL AND FINANCIAL
INFORMATION FOR
GUARDIANSHIPS AND
CONSERVATORSHIPS**

CONFIDENTIAL

<u>Full</u> name of the ward, minor ward, or protected person:	<u>Full</u> date of birth of the ward, minor ward, or protected person:	<u>Full</u> Social Security number of the ward, minor ward, or protected person:

**FINANCIAL INFORMATION OF THE WARD, MINOR WARD, OR
PROTECTED PERSON**

Does the ward, minor ward, or protected person have any accounts at any
financial institution?

Yes No.

If yes complete the following information:

Name(s) and address(es) of financial institution(s) Full account number(s)

_____	_____
_____	_____
_____	_____

Signature (s) Date _____

Name(s) Street Address/P.O. Box

Bar Number and Firm Name (attorneys only) Number City/State/ZIP Code

Phone Email Address

Appendix 8 (Neb. Ct. R. – Chapter 6, Article 14)

*Adopted August 28, 2013; amended January 22, 2015; Amended March 14, 2017; Amended
September 4, 2019; amended and renumbered to Appendix 8 on October 27, 2021,
effective January 1, 2022.*