

Model Trust Account

**IN THE COURT OF COMMON PLEAS OF BUTLER COUNTY, PA.
ORPHANS' COURT DIVISION**

NO. _____ of _____

FIRST AND FINAL ACCOUNT

[For the "Marital Trust" Established under the Will of
John H. Doe, Deceased]

[Stated by UPSTANDING TRUST COMPANY, Surviving Trustee]

and

[Mary W. Doe (Deceased Trustee, Died December 30, 2004)
presented on her behalf by UPSTANDING TRUST COMPANY,
as Executor of her Will]

[John H. Doe], Died: _____
Date of First Receipt of Funds: _____
Accounting for the period: _____

Purpose of Account: The Trustees offer this Account to acquaint interested parties with the transactions that have occurred during the Administration.

It is important that the Account be carefully examined. Requests for additional information, questions or objections can be discussed with:

[Name of Counsel]
[Address]
[Address]
[Telephone Number]
Supreme Court I.D. No. _____

SUMMARY OF ACCOUNT

	<u>Pages</u>	<u>Amount</u>
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PRINCIPAL

Receipts

Net Gain on Sales or Disposition

Less Disbursements:

 General Disbursements

 Fees and Commissions

Balance before Distributions

Distributions to Beneficiaries

Principal Balance on Hand

For Information:

Investments Made

Changes in Holdings

INCOME

Receipts

Less Disbursements

Balance before Distributions

Distributions to Beneficiaries

Income Balance on Hand

COMBINED BALANCE ON HAND

Verification

PRINCIPAL RECEIPTS

Prior Award:

Assets Awarded trustees by _____:

SUBSEQUENT RECEIPTS

TOTAL PRINCIPAL RECEIPTS

PRINCIPAL GAINS OR LOSSES ON SALES OR OTHER DISPOSITIONS

<u>DATE</u>	<u>DESCRIPTION</u>	<u>GAIN</u>	<u>LOSS</u>
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TOTALS

NET GAIN TRANSFERRED TO SUMMARY

DISBURSEMENTS OF PRINCIPAL

GENERAL DISBURSEMENTS

[DATE] [DESCRIPTION] [AMOUNT]

FEES AND COMMISSIONS

[DATE] [DESCRIPTION] [AMOUNT]

TOTAL DISBURSEMENTS OF PRINCIPAL

DISTRIBUTIONS OF PRINCIPAL TO BENEFICIARIES

TO:

[DATE] [DESCRIPTION] [AMOUNT]

TOTAL DISTRIBUTIONS OF PRINCIPAL TO BENEFICIARIES

PRINCIPAL BALANCE ON HAND

<u>VALUE AT</u> <u>[DATE]</u>	<u>FIDUCIARY</u> <u>ACQUISITION</u> <u>VALUE</u>
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TOTAL PRINCIPAL BALANCE ON HAND

PRINCIPAL INVESTMENTS MADE

[DATE] [DESCRIPTION] [AMOUNT]

TOTAL PRINCIPAL INVESTMENTS MADE

CHANGES IN PRINCIPAL HOLDINGS

ACCOUNT
VALUE

[DATE]

[DESCRIPTION]

[AMOUNT]

RECEIPTS OF INCOME

[DATE] [DESCRIPTION] [AMOUNT]

TOTAL RECEIPTS OF INCOME

DISBURSEMENTS OF INCOME

[DATE] [DESCRIPTION] [AMOUNT]

TOTAL DISBURSEMENTS OF INCOME

DISTRIBUTIONS OF INCOME TO BENEFICIARIES

TO:

[DATE] [DESCRIPTION] [AMOUNT]

TOTAL DISTRIBUTIONS OF INCOME TO BENEFICIARIES

INCOME BALANCE ON HAND

VALUE AT [DATE]	FIDUCIARY ACQUISITION VALUE
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TOTAL INCOME BALANCE ON HAND

By _____
Trustee

By _____
Executor

VERIFICATION

I, _____, Trustee of _____, hereby declares under oath that said Trustees have fully and faithfully discharged the duties of their office; that the foregoing First and Final Account is true and correct and fully discloses all significant transactions occurring during the accounting period; that all known claims against the Trust have been paid in full; that, to his knowledge, there are no claims now outstanding against the Trust; and that all taxes presently due from the Trust have been paid. This statement is made subject to the penalties of 18 Pa. C.S.A. Section 4904 relating to unsworn falsification to authorities.

_____, _____, Trustee of the _____

Dated: _____