

IN THE COURT OF CHANCERY OF THE STATE OF DELAWARE

Register in Chancery
Kent County
38 The Green, Ste. 208
Dover, DE 19901
302-735-1930

Register in Chancery
New Castle County
500 N. King Street, Ste. 11600
Wilmington, DE 19801
302-255-0544

Register in Chancery
Sussex County
34 The Circle
Georgetown, DE 19947
302-856-5775

Trust under Will of: _____ :
_____ :
_____ : T/U/W # _____
_____ :
_____ :

TRUSTEE’S ACCOUNTING

Accounting Number: [First, Second, Third, _____] or Final
Please circle or fill-in the appropriate number

Accounting Period: _____ to _____
Beginning Date Ending Date

Trustee’s Information

Trustee’s name: _____

Trustee’s complete address: _____

Trustee’s phone number: _____

If applicable:

Co- Trustee’s name: _____

Co- Trustee’s complete address: _____

Co- Trustee’s phone number: _____

Trust under Will of: _____

Additional Information Regarding Accountings

(Please see the Court of Chancery Rules for further information)

If additional space is required on schedules, please insert sheets of the same size. All items must be listed as separate entries. Spreadsheets can be filed as an attachment to any schedule.

The trustee(s) must sign either the C-16-A or C-16-B form (the last two pages of this packet), but the form does not need to be notarized.

Once your accounting has been audited by the Register in Chancery clerk, a bill will be mailed to the trustee(s); the fees are based on Chancery Rule 3(bb). In addition, the trustee(s) will be charged a \$10.00 fee for the clerk to electronically file the accounting.

Supporting documents (e.g. bank statements and receipts) are not kept by the Register in Chancery after the accounting has been reviewed by the Judicial Officer, so please select one of the following options:

As the trustee(s), I wish for all supporting documentation to be-

- Shredded by the Register in Chancery clerk
- Returned to the trustee (If you choose this box, you will be called or sent a letter and given thirty days to pick up the documents or they will be shredded. You may also choose to give the clerk a pre-paid envelope for the items to be returned to you.)

I have read the accounting instructions.

Trustee

Date

Co-Trustee

Date

Trust under Will of: _____

SUMMARY

SCHEDULE	TITLE	VALUE
A	PRINCIPAL ON HAND	\$
B	ADDITIONS TO PRINCIPAL	\$
C	INCOME RECEIVED	\$
	TOTAL:	\$
D	DEDUCTIONS FROM PRINCIPAL	\$
E	INCOME PAID OUT	\$
	TOTAL:	\$
F	PRINCIPAL REMAINING ON HAND	\$

*****PLEASE NOTE THAT A COPY OF ALL BANK STATEMENTS, RECEIPTS AND INVOICES PAID DURING THE ACCOUNTING PERIOD MUST BE FILED WITH THE ACCOUNTING.**

Trust under Will of: _____

SCHEDULE F

PRINCIPAL ON HAND AT THE END OF THE ACCOUNTING PERIOD. This schedule should include the remaining balance in all bank accounts after all deductions and additions are made. This schedule should also include any real or personal property of the trust that is still in their possession (which has not been sold). Please include the source and the amount.

SOURCE	VALUE
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL:	\$

Trust under Will of: _____

LIST OF BENEFICIARIES/INTERESTED PARTIES

The following is a list of any and all next-of-kin and any beneficiaries over the age of eighteen in regard to the trust under will. If the beneficiary is under the age of eighteen, then the name and address of his or her guardian should be provided.

	Name of Beneficiary	Address of Beneficiary	Relationship
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

Trust under Will of: _____

Instructions for notifying next-of-kin of accounting

Court of Chancery Rule 119 states that all beneficiaries must receive notice when the accounting is filed. The beneficiary can be notified of the accounting in one of the two following ways:

- 1) Any beneficiary can sign the attached waiver of notice and consent to the accounting or
- 2) For any beneficiary where a consent is not attached, the Register in Chancery accounting clerk will mail a notice to them. The beneficiary will have thirty (30) days to go to the Register's Office to view the accounting and file any objection to the accounting. If the beneficiary does nothing after receiving the notice, the accounting will be presented to the Judicial Officer to review after the thirty (30) day notice period ends.

Trust under Will of: _____

IN THE COURT OF CHANCERY OF THE STATE OF DELAWARE

Trust under Will of:

:
:
:
:
:

T/U/W # _____

WAIVER OF NOTICE AND CONSENT TO THE _____ ACCOUNTING

I, _____, whose relationship to the trust is that of _____, hereby waive my right to notice of the trustee's(s') _____ [insert number] accounting.

I declare under penalty of perjury under the laws of Delaware that the foregoing is true and correct.

Executed on the _____ day of _____ (month) _____ (year).

_____ (Printed Name)

_____ (Signature)

Address: _____

Phone Number: _____

Trust under Will of: _____

