

**ACCOUNT FOR MINOR**  
**COMMONWEALTH OF VIRGINIA**  
 VA. CODE §§ 64.2-1206, 64.2-1308

Court File No. ....

Circuit Court of .....

Estate of ....., a minor

Minor's date of birth: ..... Is either parent alive?  Yes  No

Type of Fiduciary:  Guardian  Temporary Guardian

Name of Fiduciary ..... Day telephone .....

Mailing address .....

Name of Co-fiduciary ..... Day telephone .....

Mailing address .....

This is account number  one  two  three or  ..... Is this a final account?  yes  no

From ..... (date of qualification or end of last account) to ..... (end of this account)

**ACCOUNT SUMMARY**

1. BEGINNING ASSETS (from Parts 1 and 2 of the inventory or from the prior account): \$ .....

2. RECEIPTS\* \$ .....

..... \$ .....

.....

.....

.....

.....

.....

Total Receipts \$ .....

3. GAINS ON ASSET SALES:

..... \$ .....

.....

Total Gains \$ .....

4. ADJUSTMENTS:

..... \$ .....

.....

Total Adjustments \$ .....

GRAND TOTAL OF 1, 2, 3 and 4 (must equal GRAND TOTAL of 5-9) \$ .....

\* Any amounts received as Designated Representative but not included  
 in 2 above (see Va. Code Section 64.2-1312). \$ .....

