

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar Number and Address</i>): TELEPHONE NO: _____ FAX NO. (<i>Optional</i>): _____ E-MAIL ADDRESS (<i>Optional</i>): _____ ATTORNEY FOR (<i>Name</i>): _____	<i>FOR COURT USE ONLY</i> CASE NUMBER: _____
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN JOAQUIN STREET ADDRESS: 315 W. ELM STREET MAILING ADDRESS: 315 W. ELM STREET CITY AND ZIP CODE: LODI, CA 95240 BRANCH OF NAME: LODI	
IN RE THE ESTATE OF (<i>Name</i>): _____, Decedent	
Waiver of Accounting (Probate Code § 10954)	

I, _____, declare as follows:

1. The estate’s executor or administrator has asked for my permission to file a petition for distribution without providing an accounting.
2. I understand that under California law, an executor or administrator must provide an accounting. The accounting would include a list of all assets the executor or administrator received (such as money, houses, and cars) on behalf of the decedent’s estate. The accounting would also list all money spent from the decedent’s estate.
3. If I sign this form, I understand that I am “waiving the accounting” and that the executor or administrator will not be required to send information. The executor or administrator will instead give me and the court a list of the property that will be given to the decedent’s heirs, and may not need to explain why this list is different from what the decedent owned at the time of death.
4. I understand that if I waive an accounting now, I may not be able to change my mind and ask for an accounting after the court orders the executor or administrator to give the decedent’s assets to the estate’s heirs.
5. I am a competent adult over the age of 18 years old. I have read this entire form and I understand it. I am signing this form (check one):
 - a. **On my own behalf** as a person entitled to receive assets from this estate.
 - b. **On behalf of an entity or organization** entitled to receive assets from this estate. I have attached proof to this form that I am authorized to execute this waiver on behalf of the entity or organization.
 - c. **On behalf of a minor** entitled to receive assets from this estate. I declare I am authorized to receive money or property belonging to the minor. If I am receiving this property as guardian of the estate of the minor, a copy of my guardianship letters is attached to this form.

WAIVER OF ACCOUNTING (PROBATE CODE § 10954)

IN RE THE ESTATE OF (Name):	CASE NUMBER:
-----------------------------	--------------

- d. **On behalf of a conserved person** entitled to receive assets from this estate. I declare I am the conservator of the person’s estate and am authorized to waive an account on behalf of the conservatee. A copy of my conservatorship letters is attached to this form.
- e. **As the trustee of a trust** entitled to receive assets from tis estate. By signing this form, I declare that I have accepted the duties of trustee of the trust.
- f. **As the court-appointed personal representative of the estate of a deceased heir or beneficiary** entitled to receive assets from this estate. A copy of the letters appointing me as personal representative of that estate is attached to this form.
- g. **As a guardian ad litem appointed by the court** to represent (1) a person entitled to distribution who is incapacitated, unborn, or unascertained, (2) a person whose identity or address is unknown, or (3) a designated class of persons who are not ascertained or are not in being, who is entitled to receive assets from this estate.
- h. **As the agent under a power of attorney** for a person entitled to receive assets from this estate. A copy of the power of attorney authorizing me to waive the accounting is attached to this form.

I hereby waive the requirement for the executor or administrator to file an accounting with the court.

I declare under the penalty of perjury under the laws of the State of California that the contents of this waiver and all attachments to it are true and correct.

_____ Date

_____ Signature