Original - Court 2nd copy - Plaintiff
Approved, SCAO 1st copy - Defendant 3rd copy - Receiver

STATE OF MICHIGAN
JUDICIAL CIRCUIT
JUDICIAL DISTRICT
COUNTY PROBATE

FINAL REPORT AND ACCOUNTING (RECEIVERSHIP ESTATE)

_		_			_
\sim		~	Ε	м	^
	Δ	•	_	N	. 1
•	_	u	_	14	v

COUNTY PROBATE Court address Court telephone no. Plaintiff(s) name(s), address(es), and telephone no(s). Defendant(s) name(s), address(es), and telephone no(s). Plaintiff's attorney, bar no., address, and telephone no. Defendant's attorney, bar no., address, and telephone no. Probate In the matter of _____ 1. I have been appointed receiver of the receivership estate in this case. I submit this final report and accounting as required by MCR 2.622(D)(7). An accounting of the income and expenses of the receivership estate is included. (NOTE: If there are surplus assets in the receivership estate after distributions are made and expenses are paid, the final report and accounting should contain a proposed distribution schedule of those remaining assets.) 2. SUMMARY Balance on hand from first accounting (or value of inventory from first accounting)......\$ Add income (total from Schedule A).....\$ Total assets accounted for.....\$ Subtract disbursements (total from Schedule B)......\$ Total balance of assets remaining (itemize and describe in Schedule C).....\$ The accounting is contained on separate attached sheets. SCHEDULE A: Income SCHEDULE B: Expenses and other disbursements, including distributions to a party or parties and creditors Source of income **Amount** Disbursement **Amount**

Total expenses and disbursements

Total Income

SCHEDULE C: Itemized assets remaining. If additional sheets are required, write "See attached sheets."			
Asset		Value	
BALANCE OF ASSETS REMAINING			
Total number of attached pages of supporting documentation: _			
Total Hambor of altaonou pages of supporting assumentation.			
Date	Signature of receiver/authorized agent of receiver		
	Name (type or print)		
	Name (type or print)		
	Address		
	City, state, zip	Telephone no.	
CERTIFICATE	OF MAILING		
I certify that on this date I served a copy of this final report and	accounting, including all attachments, on the	parties or their	
attorneys by first-class mail addressed to their last-known add	resses as defined in MCR 2.107(C)(3).		
Date	Signature		