TASCAT Reference



X

1

# Administrators Annual Report Guardianship and Administration Act 1995

| I. What is the   | he accou     | nting peri     | od for t   | hese accounts      | ?           |        |
|--|--------------|----------------|------------|--------------------|-------------|--------|
|  |              |                |            |                    |             |        |
| Insert end date of last report or date of Order  Insert the last day of the reporting period |              |                |            |                    |             |        |
| 2. Details of  | the Rep      | esented F      | Person f   | or whom you        | are Adminis | trator |
| Title  | Surname      |                |            |                    |             |        |
| Given name/s   |              |                |            |                    |             |        |
| Date of birth  |              |                |            |                    |             |        |
| Current resident   | ial address  |                |            |                    | Postcode    |        |
| Has the Represented Person changed their address in the last 12 months?                      |              |                |            |                    |             |        |
| 3. Details of  | the Adn      | ninistrator    | •          |                    |             |        |
| Title  | Surname      | 2              |            |                    |             |        |
| Given name/s   |              |                |            |                    |             |        |
| Relationship to R  | epresented   | Person i.e. sp | ouse, fath | er, sister, friend |             |        |
| Current postal address of  |              |                |            |                    |             |        |
| administrator  |              |                |            |                    | Postcode    |        |
| Telephone  |              | ١              | Mobile     |                    |             |        |
| Email  |              |                |            |                    |             |        |
| Preferred metho  | d of contact |                |            |                    |             |        |

Account by Administrator



| 4. Health and Lifestyle Issues  |
|---|
| Disability and Incapacity   |
| a) Is the Represented Person's disability:   Unchanged  Improved  Deteriorated  |
| b) Has there been any significant change in the Represented Person's capacity to make reasonable judgements in respect to all or part of this or her estate?  |
| ☐ No ☐ Yes – If so please detail  |
| Comments  |
|   |
|   |
|   |
| Living and Family Situation  Has the Represented Person's living and family situation changed?  |
| For example have there been any major changes in the Represented Person's accommodation, relationships with other family members, care arrangements or respite needs, any significant health problems, hobbies and other daily activities, provision of services e.g. case management involvement, assisted employment etc. |
| ☐ No ☐ Yes — If yes, briefly describe any changes to the Represented Person's living situation  |
|   |



#### 5. Decision Making

#### Changes to the Represented Person's financial arrangements or estate

Did you make any changes to the Represented Person's financial arrangements or estate during the reporting period?

For example, sold any of the Represented Person's property (such as real estate, a motor vehicle or furniture), paid off any debts, moved funds into an investment account, or increased the amount of money they control themselves, etc.

No Yes – If yes, briefly describe any changes

| Did y | you consult the Represented Person before you made each of these changes?  |
|-------|--|
|       | No - if no, briefly describe why not   |
|       | Yes - if yes, briefly describe their wishes and how you took these into account in making each of these changes. |
|       |  |



#### Acting in the best interests of the Represented Person

During this reporting period, have you supported the Represented Person to manage all or part of their finances and estate?

For example, encouraged the acquisition of budgeting skills, explained and discussed financial decisions with them, trialled changes in the amount of money they control themselves or how they access funds (such as, a capped account and keycard for personal spending), etc.

| No - if no, briefly describe why not  Yes - if yes, briefly describe your actions and the results |
|---|
|   |
|   |
|   |
|   |



#### 6. Bank accounts and term deposits

What were the bank account balances on the opening date of this account period? (This is

| the date of the Ord                | er or the day after the last a    | ccounting pe    | riod)         |               |     |
|------------------------------------|-----------------------------------|-----------------|---------------|---------------|-----|
|                                    | Bank                              | BSB and acco    | unt Number    | Opening Balan | ice |
| Bank account I                     |                                   |                 |               |               |     |
| Bank account 2                     |                                   |                 |               |               |     |
| Bank account 3                     |                                   |                 |               |               |     |
| Term deposit I                     |                                   |                 |               |               |     |
| Term deposit 2                     |                                   |                 |               |               |     |
|                                    | Total of a                        | all starting ba | nk balances   | \$            | Α   |
|                                    | as received during this accountin | g period?       | I             |               |     |
| Bank account I                     |                                   |                 | _             |               |     |
| Bank account 2                     |                                   |                 |               |               |     |
| Bank account 3                     |                                   |                 |               |               |     |
| Term deposit I                     |                                   |                 | _             |               |     |
| Term deposit 2  Total of all bank  |                                   |                 |               |               |     |
| interest received                  | \$                                | В               |               |               |     |
| What bank charges/fee              | es/taxes were paid for this accou | nting period?   |               |               |     |
| Bank account I                     |                                   |                 |               |               |     |
| Bank account 2                     |                                   |                 |               |               |     |
| Bank account 3                     |                                   |                 |               |               |     |
| Term deposit I                     |                                   |                 |               |               |     |
| Term deposit 2                     |                                   |                 |               |               |     |
| Total of all bank                  | <b>c</b>                          |                 |               |               |     |
| charges/fees/taxes                 | \$                                | С               |               |               |     |
| What are the bank acc              | count balances on the closing dat | e of this accou | nting period? |               |     |
| Bank account I                     |                                   |                 |               |               |     |
| Bank account 2                     |                                   |                 |               |               |     |
| Bank account 3                     |                                   |                 |               |               |     |
| Term deposit I                     |                                   |                 |               |               |     |
| Term deposit 2                     |                                   |                 |               |               |     |
| Total of all closing bank balances | \$                                | D               |               |               |     |

Account by Administrator For more information on TASCAT call 1800 657 500 or visit www.tascat.tas.gov.au



#### 7. Income

For this accounting period, what income was received from pensions (including allowances, travel, rent assistance etc.), employment, superannuation and trusts? Copy of last pension letter showing the rate, details of assets/income and Centrepay deductions to be attached.

Total amount for each source during the reporting period required (one per line).

| Name of organisation or trust providing income               | Total amount received \$ |
|--|--------------------------|
|  |                          |
|  |                          |
|  |                          |
|  |                          |
|  |                          |
| Add up all the amount in question 7 and enter the TOTAL here | E                        |

### 8. During this accounting period, did the Represented Person receive any amounts from:

Yes – specify which types of income below and from whom received (one per line)

- Interest (besides bank interest)
- Someone repaying a loan made by the Represented Person
- Benefits from a deceased estate
- Lump sum payments
- Asset sales (personal items)
- ☐ No go to question 9

- Count awards, settlements, MAIB compensation
- NDIS (direct to Represented Person)
- Refunds

| Income Type                 | From                                | Total amount received | 4 <b>\$</b> |
|-----------------------------|-------------------------------------|-----------------------|-------------|
|                             |                                     |                       |             |
|                             |                                     |                       |             |
|                             |                                     |                       |             |
|                             |                                     |                       |             |
|                             |                                     |                       |             |
|                             |                                     |                       |             |
|                             |                                     |                       |             |
|                             |                                     |                       |             |
|                             |                                     |                       |             |
|                             |                                     |                       |             |
|                             |                                     |                       |             |
| Add up all the amounts in o | question 8 and enter the TOTAL here |                       | F           |

Account by Administrator
For more information on TASCAT call 1800 657 500 or visit www.tascat.tas.gov.au

6



| <ol><li>During this accounting period, did the Re</li></ol> | presented Person |
|---|------------------|
|---|------------------|

| <ul> <li>Cash in or sell any investments (including shares and bonds)</li> <li>Receive any dividends from shares or bonds</li> <li>Sell any real estate</li> <li>Receive any rent from a rental property (including the family</li> <li>No – go to question 10</li> <li>Yes – specify which types of income below from whom red</li> </ul> |        | ·)                         |       |
|--|--------|----------------------------|-------|
| Cashing in or selling investments (shares, bonds, etc.)  |        |                            |       |
| Type of investment and account reference number  | -      | Total amount received \$   |       |
|  |        |                            |       |
|  |        |                            |       |
| Dividends from shares or bonds   | -      | Total amount received \$   |       |
|  |        |                            |       |
|  |        |                            |       |
| Selling real estate  | T      |                            |       |
| Address of property  | Gros   | ss amount property sold fo | or \$ |
|  |        |                            |       |
| A copy of the solicitors settlement statement should be attached to your re  | port   |                            |       |
| Rent received from rental property (including family home)   |        |                            |       |
| Address of property  |        | Total amount received      | \$    |
|  |        |                            |       |
| Add up all the amounts in question 9 and enter the TOTAL   | . here |                            | G     |
|  |        |                            |       |
| 10. During this accounting period, did the Represe<br>other type of income not already specified above   |        | Person receive ar          | ıy    |
| ☐ No – go to question I I  |        |                            |       |
| ☐ Yes – specify which types of income below from whom rec  | eived  |                            |       |
| Type of income   |        | Total amount received      | \$    |
|  |        |                            |       |
|  |        |                            |       |
| Add up all the amounts in question 10 and enter the TOTAL here   |        |                            | Н     |
|  |        |                            |       |
| <ol> <li>Total income for this account period (add B+E total amount here</li> </ol>  | +F+(   | G+H) and enter the         | е     |

Account by Administrator
For more information on TASCAT call 1800 657 500 or visit www.tascat.tas.gov.au



| 12. During this accounting period, what was the total Person's expenditure on accommodation and person |                              |    |
|--|------------------------------|----|
| House/rent/accommodation fees  | Total amount paid \$         |    |
| Accommodation/rent/board and lodging   |                              |    |
| Refundable Accommodation Deposit / accommodation bond (nursing home)                                   |                              |    |
| Utilities (power, phone, gas, water)   |                              |    |
| Council rates – land tax   |                              |    |
| Home maintenance (repairs, gardening)  |                              |    |
| Insurance (house and contents)   |                              |    |
| Other (includes mortgage repayments) – enter description   |                              |    |
|  |                              |    |
| Personal expenditure   | Total amount paid \$         |    |
| Groceries/food and beverage/toiletries   |                              |    |
| Clothing/haircuts  |                              |    |
| Medical (including insurance and pharmacy)   |                              |    |
| Holidays   |                              |    |
| Tax  |                              |    |
| Examination of accounts fee (GAB)  |                              |    |
| Motor vehicle, trailer, boat   |                              |    |
| Spouse/child maintenance   |                              |    |
| Regular allowance (e.g. fortnightly)   |                              |    |
| Other (includes loan, credit card repayments) – enter description:                                     |                              |    |
|  |                              |    |
| Add up all the amounts in question 12 and enter the TOTAL here   |                              | J  |
| 13. During this accounting period, did the Represente loans, gifts or donations?                       | ed Person make any           | ,  |
| ☐ No – go to question 14   |                              |    |
| $\square$ Yes – specify all loans, cash gifts, and what they were for (e.g. C                          | Christmas, Easter, birthdays | s) |
| Type of payment, to whom and what for  | Total amount paid \$         |    |
|  |                              |    |
|  |                              |    |
|  |                              |    |
| Add up all the amounts in question 13 and enter the TOTAL here   |                              | К  |



#### 14. During this accounting period, did the Represented Person:

| <ul> <li>Buy any investments (e.g. shares)</li> <li>Buy any real estate</li> <li>Buy any other asset valued at \$500 or more (e.g. wheelchair)</li> <li>Prepay for a funeral</li> </ul> |                     |     |
|---|---------------------|-----|
| ☐ No – go to question 15  |                     |     |
| Yes – specify all other types of expenditure below –for real esta solicitors settlement statement should be attached to your repo   |                     | he  |
| Address of property or type of investment or asset  | Total amount paid   | \$  |
|   |                     |     |
|   |                     |     |
|   |                     |     |
| Add up all the amounts in question 14 and enter the TOTAL here  |                     | L   |
| 15. During this accounting period, did the Represented other expenditure not already specified above (incompletely selling any real estate)?  | -                   | iny |
| ☐ No – go to question 16  |                     |     |
| ☐ Yes – specify all other types of expenditure below  |                     |     |
| Types of expenditure  | Total amont paid \$ |     |
|   |                     |     |
|   |                     |     |
|   |                     |     |
| Add up all the amounts in question 15 and enter the TOTAL here  |                     | М   |
| 16. Total expenditure for this accounting period (add enter the total amount here   | C+J+K+L+M) and      |     |
|   |                     | N   |
| Reconciliation  |                     |     |
| Total balance item A  | \$                  |     |
| Total income item I   | \$                  |     |
| Sub total   | \$                  |     |
| Total expenses item N   | \$                  |     |
| Subtract N from subtotal to equal TOTAL   | \$                  | 0   |

The total at 'O' should equal the amount at item D on page 3.



|  | \$          |                             |
|--|-------------|-----------------------------|
| nvestments (shares, managed funds, superannuation, etc.)   |             |                             |
| Total of investment and account reference number   |             | Value \$                    |
|  |             |                             |
| Total value of all investments   |             |                             |
| Real estate (please tick if property regarded as principal place of resi                             | dence)      |                             |
| Address of property  | ✓           | Value \$                    |
|  |             |                             |
|  |             |                             |
|  |             |                             |
| Total value of real estate   |             |                             |
| Personal Property (e.g. furniture, wheelchairs, jewellery, other items                               | s valued at | \$500 or more)              |
| Type of item   |             | Value \$                    |
|  |             |                             |
|  |             |                             |
|  |             |                             |
|  |             |                             |
| Total value of all personal property   |             |                             |
| Any other assets (e.g. motor vehicles, pre-paid funeral, nursing hom to other parties, cash on hand) | e accommo   | dation bond or deposit, loc |
| Type of asset  |             | Value \$                    |

| Total value of all assets (add all amounts in question 17) and | D |
|--|---|
| enter the amount here  | Г |

Total value of all other assets



#### **Liabilities**

## 18. What liabilities/debts does the Represented Person have at the end of the accounting period?

| Mortgages   |                 |
|---|-----------------|
| Name of lender  | Amount owing \$ |
|   |                 |
|   |                 |
| Loans outstanding (e.g. personal loans, car loans, etc.)                              |                 |
| Name of lender  |                 |
|   |                 |
|   |                 |
| Credit cards  |                 |
| Type of card  |                 |
|   |                 |
|   |                 |
| Other liabilities or debts (include any other amounts owed by the Represented Person) |                 |
| Type of liability   |                 |
|   |                 |
|   |                 |
| Total of all liabilities (add all amounts in question 18) and enter the amount here   | Q               |
|   |                 |
| 19. Net assets (subtract Q from P) and enter the ame                                  | ount here       |
|   |                 |
|   | R               |
|   |                 |
| 20 Further comments or explanations (if any)  |                 |
|   |                 |
|   |                 |
|   |                 |
|   |                 |
|   |                 |
|   |                 |
|   |                 |
|   |                 |
|   |                 |
|   |                 |
|   |                 |



#### Compulsory declaration by Administrator

| Befor | e yo  | u lodge this form, please tick and sign to confirm that you agree with the statement: -  |  |  |  |  |
|-------|---|--|--|--|--|--|
|       | The information provided in this form is correct and lists all income received, expenditure paid and all assets and liabilities of the Represented Person during the accounting period. |  |  |  |  |  |
| Nam   | ne _  | Signed Date  |  |  |  |  |
| 21.   |   | ocuments you must attach to this form: nust be attached where these documents exist)   |  |  |  |  |
|       |   | For the main working bank accounts: copies of the statements or passbook for the entire accounting period indicated in section I         |  |  |  |  |
|       |   | For all other bank accounts (including loans) and term deposits: a copy of the statement/passbook for the opening and closing dates only |  |  |  |  |
|       |   | A copy of receipts for individual purchases or single expenses in excess of \$500 (excluding accommodation expenses)                     |  |  |  |  |
|       |   | A copy of the settlement statement for any properties purchased or sold  |  |  |  |  |
|       |   | A copy of the nursing home accommodation bond/deposit statement (if paid in the reporting period)  |  |  |  |  |
|       |   | Copy of last pension letter showing the rate, details of assets / income and Centrepay deductions  |  |  |  |  |
|       |   | Any other documents requested by the Tribunal  |  |  |  |  |
| 22.   |   | low to lodge this Report   |  |  |  |  |
| Infor |   | tion about lodging this report   |  |  |  |  |

#### How to lodge this report:-

You can lodge the completed report form and attachments by:-

Delivering it in person to:-38 Barrack Street Hobart

OR

Mailing it to:-TASCAT Guardianship Stream GPO Box 1311 **HOBART TAS 7001** 

OR

Emailing it to guardianship@tascat.tas.gov.au

| In the matter of |                              | Date of Birth |  |  |
|------------------|------------------------------|---------------|--|--|
|                  | (Name of Represented Person) | -             |  |  |

### STATUTORY DECLARATION

| I, Mr/Mrs/Ms           |                            |               |                |                    |                  |
|------------------------|----------------------------|---------------|----------------|--------------------|------------------|
| <del>-</del>           |                            | (Name of      | Administrator) |                    |                  |
| of                     |                            |               |                |                    |                  |
| (Address of A          | administrator)             |               |                |                    |                  |
| as Administrator of    | of the estate of           |               |                |                    |                  |
| (Name of Represented P | 'erson)                    |               |                |                    |                  |
| of                     |                            |               |                |                    |                  |
| (Address of R          | epresented Person)         |               |                |                    |                  |
| the period ending      | erely declare that the on/ | / fo          | r the Represer | nted Person are    | true and correct |
| DECLARED by            |                            |               |                |                    |                  |
| ,                      | (Signature of Ac           | lministrator) |                |                    |                  |
| at                     | this                       |               | day of         |                    |                  |
| (Plac                  | ce)                        | (Day)         |                | (Month)            | (Year)           |
| BEFORE me              |                            |               |                |                    |                  |
|                        | (Signature of witness)     |               |                | (Title of witness) |                  |

#### WHO CAN WITNESS THIS DECLARATION

Justice of the Peace, Commissioner for Declarations, legal practitioner, medical practitioner, nurse, dentist, pharmacist, chiropractor, veterinary surgeon, Police officer, Post Office agent; a teacher employed on a full-time basis; an officer of a court including a judge, magistrate, clerk of court, registrar, deputy registrar, sheriff, bailiff; bank, building society or credit union officer with 5 or more continuous years of service; minister of religion; civil marriage celebrant; officer of the Australian Defence Force; member of the Institute of Chartered Accountants or Australian Society of Practising Accountants or the National Institute of Accountants or Institute of Corporate Manager, Secretaries and Administrators or Institute of Engineers; members of Parliament or a local government authority; permanent employee of a Commonwealth or State authority with 5 or more continuous years of service.