

(Version 4)

For office use only		
Case number and type:		
Adult number:		
Date:		
Registry:		
Sent to:		

Account by administrator – Guardianship and Administration Act 2000

1. What is the tribunal client number?
Note: do not use this form if a partial exemption has been approved for accounts.
2. What is the accounting period for these accounts?
(note comments on the instructions page)
Opening Date Day Month Year Closing Date Day Month Year
3. Details of the adult for whom you are making financial decisions
Name Title Given name/s Surname/Family name
Date of birth Day Month Year
Current residential address of adult (PO Boxes are not accepted)
Suburb State/Territory Postcode
Has the adult changed their address in the last 12 months?
Yes No



4. Who are the administrators for the adult?		
1. Name This will also be the person we will cont	act about this form, i	if we need to.
Title Given name/s	•	Surname/Family name
Relationship to adult e.g. mother, father, sister	, brother	
Has there been a change of address in the las	st 12 months?	
Yes No		
Current residential address of administrator (PO Boxes are not a	ccepted)
Suburb	State/Territory	Postcode
Postal address of administrator (if different from	m residential)	
Suburb	State/Territory	Postcode
Telephone		
Work phone Mobile		Home phone
Email		
Is there more than one administrator?		
No – go to question 5		
Yes — (go to next page)		



2. Name This will also be the person we w	ill contact about this form,	if we need to.
Title Given name/s		Surname/Family name
Relationship to adult e.g. mother, father,	sister, brother	
Has there been a change of address in t	the last 12 months?	
Yes No		
Current residential address of administ	rator (PO Boxes are not a	accepted)
Suburb	State/Territory	Postcode
Postal address of administrator (if different	ent from residential)	
Suburb	State/Territory	Postcode
Telephone		
Work phone Mobile		Home phone
Email		Home phone
Eman		
s there more than two administrators?		
No – go to question 5		
Yes — (please attach a separate sheet if th	ere are more than two admir	nistrators)



BANK ACCOUNTS AND TERM DEPOSITS

5. What are the adult's bank account details for this accounting period – including term deposits?

Note: balances should all be the same date

11010: Balarioco Griodia di	n be the came date			
What were the bank a	account balances or	n the <u>opening date</u> of	this accounting per	iod?
	BSB and acc	count number	Opening balance	
Bank account 1			\$	
Bank account 2			\$	
Bank account 3			\$	
Bank account 4			\$	
Bank account 5			\$	
Bank account 6			\$	
	TOTAL OF ALL STAR	TING BANK BALANCES	\$	A
What bank interest w	as received during t	this accounting period	1?	
Bank account 1		\$		
Bank account 2		\$		
Bank account 3		\$		
Bank account 4		\$		
Bank account 5		\$		
Bank account 6		\$		
TOTAL OF ALL BANK IN	TEREST RECEIVED	\$	В	
What bank charges/fe	ees/taxes were paid	for this accounting p	eriod?	
Bank account 1		\$		
Bank account 2		s		

Bank account 1	\$
Bank account 2	\$
Bank account 3	\$
Bank account 4	\$
Bank account 5	\$
Bank account 6	\$
TOTAL OF ALL BANK CHARGES/ FEES/TAXES	\$

What are the bank account balances on the closing date of this accounting period?

Bank account 1	\$
Bank account 2	\$
Bank account 3	\$
Bank account 4	\$
Bank account 5	\$
Bank account 6	\$
TOTAL OF ALL CLOSING BANK BALANCES	\$ D



INCOME

6. For this accounting period, what income was received from pensions (including allowances, travel, rent assistance etc), employment, superannuation and trusts?

ADD UP ALL THE AMOUNTS IN QUESTION 6 AND ENTER THE TOTAL HERE

Name of organisation or trust providing income	Total amount received \$
	\$
	\$
	\$
	\$

7. During this accounting period, did the adult receive any income from: • interest (besides bank interest) · monetary contributions from · benefits from a deceased estate family someone repaying a loan the lump sum payments adult made No — go to question 8 Yes — specify which types of income below Type of interest Total amount received \$ Income received from someone repaying a loan the adult made Total amount received \$ Name of person repaying loan Benefits received from deceased estates Name of estate Total amount received \$ \$ Lump sums or family contributions received Type of lump sum/contribution and name payer Total amount received \$ \$

ADD UP ALL THE AMOUNTS IN QUESTION 7 AND ENTER THE TOTAL HERE



8. During this accounting period, d	id the adult:		
(including shares and bonds) shares of	any dividends from or bonds real estate	 receive any rent from a rer property (including the fam home) 	
No — go to question 9			
Yes — specify which types of income below			
Cashing in or selling investments (shares,	bonds, etc.)		
Type of investment and account reference nun	nber	Total amount received	I \$
Dividends from shares or bonds		Total amount received	i \$
		\$	
Selling real estate			
Address of property		Total amount received	l \$
Rent received from rental property (including	na family home)	Ψ	
Address of property	ig ranniy nome;	Total amount received	I &
Address of property		\$. Ψ
		·	
ADD UP ALL THE AMOUNTS IN QUESTION 8 A	AND ENTER THE TOTA	L HERE \$	G
9. During this accounting period, d not already specified above?	id the adult rece	eive any other type of inc	ome
No — go to question 10			
Yes — specify which types of income below			
Type of income		Total amount received	1 \$
		\$	
		\$	
ADD UP ALL THE AMOUNTS IN QUESTION 9 A	AND ENTER THE TOTA	L HERE \$	Н
10. Total income for this accountin total amount here?	g period (add B·	+E+F+G+H) and enter the	
\$			ı



EXPENDITURE

11. During this accounting period, what was the total of the adult's expenditure on accommodation and personal needs?

House/rent/accommodation fees	Total amount paid \$
Accommodation/rent/board and lodging	\$
Refundable Accommodation Deposit / accommodation bond (nursing home)	\$
Utilities (power, phone, etc.)	\$
Council rates	\$
Home maintenance	\$
Insurance	\$
Other (includes mortgage repayments) – enter description	
	\$
	\$
Personal expenditure	Total amount paid \$
Food/clothing/toiletries/haircuts	\$
Medical (including insurance and pharmacy)	\$
Holidays	\$
Accountants/taxation	\$
Examination of accounts fee	\$
Other (includes loan, credit card repayments) – enter description	
	\$
	\$

ADD UP ALL THE AMOUNTS IN QUESTION 11 AND ENTER THE TOTAL HERE	\$	J		
12. During this accounting period, did the adult make any loans, gifts or donations?				
No — go to question 13 Yes — specify all loans, cash gifts and donations and what they were for (eg. l	oan paid to for car)			
Type of payment, to whom and what for	Total amount paid \$			
	\$			
	\$			

ADD UP ALL THE AMOUNTS IN QUESTION 12 AND ENTER THE TOTAL HERE



13. During this accounting period, did the adult:	
buy any investments (e.g. shares) buy any other asset valued at \$1000 or more (e.g. wheelchair) buy any real estate	prepay for a funeral
No — go to question 14	
Yes — specify all other types of expenditure below	
Address of property or type of investment or asset	Total amount paid \$
	\$
	\$
	\$
ADD UP ALL THE AMOUNTS IN QUESTION 13 AND ENTER THE TOTAL HERI	
No — go to question 15 Yes — specify all other types of expenditure below Types of expenditure	Total amount paid \$
Cost of selling any real estate	\$
	\$
	\$
ADD UP ALL THE AMOUNTS IN QUESTION 14 AND ENTER THE TOTAL HERI	S M
15. Total expenditure for this accounting period (add C the total amount here	
\$	N
16. Total surplus or deficit for this accounting period (s the amount here and then indicate whether this am	• • • • • • • • • • • • • • • • • • • •
Surplus Deficit \$	0



RECONCILIATION

17. If the amount at O is a surplus, add amount at O to amount at A If the amount at O is a deficit, subtract amount at O from amount at A Note: the amounts at P and D should equal

There is no need to pursue minor discrepancies

\$

Ρ

ASSETS

18. What assets does the adult have at the end of this accounting period?

BANK BALANCES – ENTER HERE THE AMOUNT FROM D ON PAGE 4

9

Total value of bank accounts at D on page 4

		n bank accounts at B on page
Investments (shares, managed funds, superannuation, etc.)		
Total of investment and account reference number	Val	ue \$
	\$	
	\$	
TOTAL VALUE OF ALL INVESTMENTS	\$	
Real estate (please tick if property regarded as principal place of reside	nce)	
Address of property	✓	Value \$
		\$
		\$
TOTAL VALUE OF REAL ESTATE		\$
Personal property (wheelchairs, jewellery, other items valued at \$1000	or more	<i>e)</i>
Type of item	Val	ue \$
	\$	
	\$	
TOTAL VALUE OF ALL PERSONAL PROPERTY	\$	
Any other assets (e.g. motor vehicles, pre-paid funeral, nursing home deposit, loans to other parties)	accomm	odation bond or
Type of asset	Val	ue \$
	\$	
	\$	
	\$	
TOTAL VALUE OF ALL OTHER ASSETS	\$	
TOTAL VALUE OF ALL ASSETS (ADD ALL AMOUNTS IN QUESTION 18)	\$	Q



LIABILITIES

19. What liabilities/debts does the adult have at the end of this accounting period?

Mortgages

Name of lender	Amount owing \$
	\$
	\$
	\$
	\$
TOTAL OWING ON ALL MORTGAGES	\$

Loans outstanding (personal loans, car loans, etc.)

Name of lender	Amount owing \$
	\$
	\$
	\$
	\$
TOTAL OWING ON ALL LOANS	\$

Credit cards

Type of card	Amount owing \$
	\$
	\$
	\$
	\$
TOTAL OWING ON ALL CREDIT CARDS	\$

Other liabilities or debts (include amounts owed to the administrator/s)

Type of liability	Amount owing \$
	\$
	\$
	\$
	\$
TOTAL OF ALL OTHER LIABILITIES	\$

TOTAL OF ALL LIABILITIES (ADD ALL AMOUNTS IN QUESTION 19) AND ENTER THE AMOUNT HERE	\$ R
ENTER THE AMOUNT HERE	

20. Net assets (subtract R from Q) and enter the amount here

S



21. Additional comments or further explanations	
22. A quick summary – in the past 12 months	
Please add comments to section 21 if Yes ticked for any box.	
Has there been a major change in income (e.g. pension, rent, investment income, etc.)? Yes No	
Has there been a major change in expenditure (e.g. gifts, personal maintenance, etc.)?	
Has there been a major change in assets (e.g. real estate or other substantial property bought or sold)?	
Yes No	
Has there been a major change in liabilities/debts?	
Has expenditure substantially exceeded income?	
Are there funds owing on a nursing home accommodation bond/refundable accommodation deposit?	
Yes No	



23. Documents you must attach to this form: (must be attached where these documents exist)
NOTE: Printed copies only. We cannot accept documents saved to CDs or USBs. Accounts can be emailed through only in Word, Excel or PDF formats.
Copies of statements or passbooks for all bank accounts and loans for the entire accounts period indicated in question 2. (Internet banking printouts are acceptable if they contain name of account holder/s and show a running balance.)
For bank term deposits a copy of the latest term deposit notice. Internet banking printouts are acceptable if name of account holder is shown.
For any shares, investments or superannuation, a copy of all dividend notices or statements received during the year
Documentation confirming accommodation payments are up to date e.g. nursing home statement or Department of Housing rental statement
A copy of receipts for individual purchases or single expenditure in excess of \$500 (excluding accommodation expenses)
A copy of the settlement statement for any properties purchased or sold
A copy of all relevant insurance policies/certificates
A copy of all relevant motor vehicle registration notices
A copy of the latest tax assessment and if you are administering a partnership or business, a copy of the tax return
A copy of the latest nursing home accommodation bond/deposit statement
Additional documents required when assets are valued at more than \$50,000 (as per figure at Q in this form) (excluding a principal place of residence/nursing home accommodation bond/deposit)
A copy of the tribunal decision
A copy of your approved management plan (only required in the first year of providing accounts)
A copy of the latest Centrelink or Department of Veterans Affairs income and assets statement



24. How to lodge this form
Are total assets valued at more than \$50,000 (as per figure at Q in this form) (excluding a principal place of residence/nursing home accommodation bond/accommodation deposit, furniture and motor vehicles)?
Yes — forward directly to a panel examiner (contact details listed below) Note : <u>documents will be returned to you if lodged with the tribunal's registry.</u>
No — please forward this form to QCAT's registry.

PANEL EXAMINERS' CONTACT DETAILS

Public Trustee of Queensland

Administration Accounts Assistance GPO Box 1449 Brisbane Qld 4001

Telephone: 07 3564 2148

Vincent Chartered Accountants

QCAT - Accounts Examination PO Box 13004 George Street Brisbane Qld 4003

Telephone: 07 3228 4000

My Examination

QCAT - Accounts Examination

PO Box 2226 Graceville Qld 4075 Telephone: 0401 956 882

Email: PrivateAdminAccounts@pt.qld.gov.au

Please note: The approved panel of examiners is entitled to charge a fee for this service.

Fees vary and you should contact the examiners directly for further details regarding their fees.

QCAT REGISTRY CONTACT DETAILS		
Deliver to:	Mail to:	Email to:
Queensland Civil and Administrative Tribunal	Queensland Civil and Administrative Tribunal	enquiries@qcat.qld.gov.au
Floor 11, 259 Queen Street Brisbane Qld 4000 or at any local Magistrates Court	GPO Box 1639 Brisbane Qld 4001	



WARNING

Section 216 of the *Queensland Civil and Administrative Tribunal Act* 2009 makes it an offence for a person to knowingly give the registry documents containing false or misleading information.

Maximum penalty for such an offence – 100 penalty units.

SIGN AND DATE HERE	
The information in this form is true to the best of my knowledge.	
Administrator/s sign here	Date
Print name/s	



Instructions. If your appointment is on a 'joint and several' basis the below advice, signed by one administrator will suffice. If your appointment is on a 'joint' basis all administrators should lodge a separate signed advice. If you cannot affirm any clause in the below advice in regard to bankruptcy or criminal record, rule a line through the clause and make a comment in section 21 of this form.

Ο.	Appropriateness and competence advice		
I			
	Given name/s Surname/Family name		
of			
	Address		
as	the administrator for		
L			
Ins	ert Adult's full name		
and	do solemnly and sincerely declare as follows:		
1.	I am not under the age of 18 years.		
2.	I am not, nor have I ever been, a paid carer for the Adult		
3.	I am not a health provider for the Adult.		
4.	I do not have a criminal history in Queensland or elsewhere.		
5.	5. I have not been refused or removed from an appointment as a guardian, administrator, attorney or other person making a decision for someone else, in Queensland or elsewhere.		
6.	I am not bankrupt or taking advantage of the laws of bankruptcy under the <i>Bankruptcy Act</i> 1966 or a similar law of a foreign jurisdiction.		
7.	Thave never been bankrupt or taken advantage of the laws of bankruptcy under the Bankruptcy Act 1966 or a similar law of a foreign jurisdiction.		
8.	I am not proposing to make, and have never made, an arrangement with my creditors under the <i>Bankruptcy Act</i> 1966 or a similar law of a foreign jurisdiction.		
9.	I am not and never was a director, secretary or partner, or involved in the management of a corporation, partnership or other entity that is proposing to be, is or has been under external administration.		
10.	There is no likely conflict between my duties as administrator for this Adult and either: (a) my own interests or the interests of anyone in a close personal or business relationship with me, or (b) any other duties I may have as a guardian or administrator for any other person.		
Adı	ministrator's signature		
∟ Pla	Place of birth Date		
	APNING		

Maximum penalty for such an offence – 100 penalty units.

knowingly give the registry documents containing false or misleading information.

Section 216 of the Queensland Civil and Administrative Tribunal Act 2009 makes it an offence for a person to



INSTRUCTIONS FOR COMPLETING

Account by administrator form – *Guardianship and*

Administration Act 2000

About this form

The Account by administrator (ABA) is the standard form for private administrators to use when providing an account of their administration.

Note: This form is not required if the tribunal has approved a partial exemption.

What do I have to do?

- Unless the tribunal otherwise directs, an account of your administration is due each year on the date that is two months prior to the anniversary date of your appointment. It is up to you to lodge your accounts by the due date. You will not be sent a reminder at this time.
- The opening date of the account is either the date you became the administrator, or, if you have provided accounts previously, the closing date from your last set of accounts.
- You are required to choose a closing date for your accounts. You should choose a date for which you have the relevant documentation required such as bank statements. For example, if your accounts are due in May, a suitable closing date may be either 31 March or 30 April.
- If you need extra space to give any of the details requested (for example, if there is more than one investment property), please attach separate sheets, number your answers with reference to the question number and break the information down under the same headings given in the section. Then write the totals for each section in the relevant total box on this form.
- If you are completing this form by hand, please use a black pen. Please write or type in BLOCK letters.
- Where there are 'yes' or 'no' questions, please tick the appropriate box.

If your appointment is on a 'joint and several' basis a single declaration signed by one administrator will suffice. If your appointment is on a 'joint' basis all administrators are to sign a separate declaration.