DECLARATION OF INVENTORY
ON APPOINTMENT

I/We, _____, of the City/Town of _____,
      [name of substitute decision maker(s) for property]   [name of city/town]

in the Province of Manitoba declare and say:

1. I am/We are the substitute decision maker(s) for the property of _____,
                                                               [name of adult living with an intellectual disability]

   hereinafter referred to as "the adult living with an intellectual disability", being so appointed by the Commissioner for Adults Living with an Intellectual Disability on _____, 20___
                                                                           [date of appointment]

2. Attached and marked Exhibit "A" to this declaration is a true inventory of the property of the person under my/our power as substitute decision maker(s), setting out the assets, liabilities and income of the estate, so far as they are known to me/us.

3. This inventory on appointment is as of _____.
                                                                           [date]

In the presence of the witness named below:

Name of witness: _____

Signature of Witness: _____

Address of Witness: _____

_____

_____

I/We solemnly declare that information provided in this document is complete and accurate to the best of my knowledge.

_____

_____

_____
[signature(s) of substitute decision maker(s) for property]

EXHIBIT A – INVENTORY ON APPOINTMENT

Exhibit "A" to the Affidavit of_____ as of_____.
                                [name of substitute decision maker(s) for property]   [date]

Note: Report all assets that belong to the adult living with an intellectual disability as of the date of the report. Include values and provide supporting/verifying documentation for all assets reported.
Where required to report on a discretionary trust use a second set of forms.

DESCRIPTION OF ASSETS	VALUE
Bank/Credit Union Accounts [provide statements]	_____
Investments [provide statements for investments held such as stocks, bonds, mutual funds, RDSP, RRIF, RRSP]	_____
Real Property [provide the most current property tax statement]	_____
Personal Property [only provide a detailed list of those items which will hold value over time such as vehicles and antiques and explain how the value reported was arrived at (i.e. appraisal, market valuation)]	_____
Life Insurance [provide policy and current policy statement]	_____
Pre-paid Funeral Plan [provide certificate/contract detailing ownership and value]	_____
Monies owed to the individual [provide details about who owes the money and the amount owed]	_____
Other [provide supporting documentation for other assets such as cash, expected lump sum payments from insurance, pensions, annuities or estates]	_____
TOTAL	$ _____

DESCRIPTION OF DEBTS/LIABILITIES	AMOUNT OWING
Provide supporting/verifying documentation including names and addresses of creditors.	
Mortgage	_____
Bank Loans	_____
Credit Cards	_____
Other [specify]	_____
TOTAL	$ _____

NOTE: THE ABOVE VALUES WILL BECOME THE OPENING INVENTORY IN YOUR FIRST ANNUAL ACCOUNTING REPORT

INCOME

[Example: employment earnings, social assistance benefits, Old Age, CPP or other pensions, annuity payments, GST rebates etc.]

Source	Amount	Frequency
_____	_____	_____
_____	_____	_____
_____	_____	_____

ACCEPTED

_____   _____
Commissioner for Adults Living with an   Date
Intellectual Disability