

STATE OF SOUTH CAROLINA)
)
COUNTY OF GREENVILLE)
)
IN THE MATTER OF)
)
_____)
Decedent / Incapacitated Person)

IN THE PROBATE COURT

**STATEMENT OF VALUE AND INCOME FOR
PURPOSES OF WAIVING BOND BY PROFESSIONAL**

CASE NUMBER: _____

The undersigned, after being duly sworn, states that:

1. Pursuant to SCPC, §62-3-603, as a fiduciary, I am required to provide a proper fiduciary bond unless bond waivers can be obtained or unless the bond is waived by the Court.
2. My best estimate of the value of the personal property in this matter is \$_____.
3. The income expected during the next year from the personal property in this matter is \$_____.
4. The total of this value and income is \$_____.
5. I am currently fiduciary for other estate/conservator cases with a value totaling \$_____.
6. I hereby request that the fiduciary bond requirement be waived for me in the above case since:

- I hereby certify that I have a sufficient amount of liability insurance in place on this date and shall maintain sufficient insurance coverage until the above estate is closed.
- As an attorney, I am an officer of the Court and hereby certify that I have a sufficient liability insurance in place on this date and shall maintain sufficient insurance coverage until the above estate is closed.

SWORN to before me this _____ day of _____, 20____

Notary Public for South Carolina
My commission expires: _____

Signature: _____
Name: _____
Address: _____

Telephone (Work): _____
(Home): _____
(Cell): _____
Email: _____

ORDER

IT IS HEREBY ORDERED that a fiduciary bond in the above case is:

- Waived
 Shall be posted in the amount of \$_____
 Other: _____

Executed this _____ day of _____, 20____.

- Debora A. Faulkner, Probate Court Judge
 Caroline M. Horlbeck, Associate Probate Court Judge
 Tracy Sharp-Robertson, Deputy Probate Court Judge