PC-10.4 (11/02, formerly SW-68) Supplemental Inventory

Date filed: _____
Court use only

STATE OF RHODE ISLAND

County of _____
Estate of _____
Alias _____
Alias _____

PROBATE COURT OF THE

_____

No. _____ _____
Date

SUPPLEMENTAL INVENTORY

List additional personal and real estate for Guardianship:

Description of asset	Value of asset ($)

List additional personal property for decased:

Description of asset	Value of asset ($)

_____
Appraiser

_____ _____
Name of Fiduciary Title of Fiduciary

_____ _____
Name of Co-Fiduciary Title of Co-Fiduciary

_____ Sc. Date: _____

_____ _____
Notary public (please print name) Notary public signature