

**4B-602. Accounting.**

[For use with Rules 1B-304, 1B-306, and 1B-501 NMRA]

STATE OF NEW MEXICO  
COUNTY OF BERNALILLO  
SECOND JUDICIAL DISTRICT

IN THE MATTER OF THE ESTATE OF \_\_\_\_\_,  
\_\_\_\_\_, DECEASED.

No. \_\_\_\_\_

**ACCOUNTING**

I, \_\_\_\_\_, the personal representative of the estate of the decedent, have prepared an accounting of the administration of the estate of the decedent.

I am sending a copy of this document to the distributees whose interests are affected by this accounting. The accounting is as follows:

**Cash and Other Assets in the Estate**

<b>A.</b>	<b>Items from Inventory (not sold)</b>	<b>Value</b>
1.	_____	\$ _____
2.	_____	\$ _____
3.	_____	\$ _____
4.	_____	\$ _____
5.	_____	\$ _____
6.	_____	\$ _____

<b>B.</b>	<b>Items Received Since the Making of Inventory (not sold)</b>	<b>Value</b>
1.	_____	\$ _____
2.	_____	\$ _____
3.	_____	\$ _____
4.	_____	\$ _____
5.	_____	\$ _____

<b>C.</b>	<b>Items Sold</b>	<b>Sales Price</b>	<b>Sales Expense</b>	<b>Net Amount Received</b>
1.	_____	\$ _____	\$ _____	\$ _____
2.	_____	\$ _____	\$ _____	\$ _____
3.	_____	\$ _____	\$ _____	\$ _____
4.	_____	\$ _____	\$ _____	\$ _____
5.	_____	\$ _____	\$ _____	\$ _____
6.	_____	\$ _____	\$ _____	\$ _____

<b>D. Income Received</b>	<b>Amount</b>
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
5. _____	\$ _____

**Total of Cash and Other Assets:** \$ \_\_\_\_\_  
**Payments and Distributions**

<b>A. Payments to Creditors and for Expenses of Administration</b>	<b>Amount Paid</b>
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
5. _____	\$ _____
6. _____	\$ _____

<b>B. Distributions to Devisees or Heirs</b>	<b>Value of Distribution</b>
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
5. _____	\$ _____
6. _____	\$ _____

**Total of Payments and Distributions:** \$ \_\_\_\_\_  
*(Total of Cash and Other Assets  
should equal Total of Payments and Distributions.)*

\_\_\_\_\_  
Signature of personal representative

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Date

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Street address

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City, state, and ZIP code

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Telephone number (optional)

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Email address (optional)

[Approved, effective September 15, 2000; as amended by Supreme Court Order No. 07-8300-005, effective March 1, 2007; 4B-501 recompiled and amended as 4B-602 by Supreme Court Order No. 18-8300-014, effective for all cases pending or filed on or after December 31, 2018.]