PROBATE COURT OF WARREN COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF _____

Case No. _____

GUARDIAN'S ACCOUNT
[R.C. 2109.30]

_____ Account

From _____ To _____

_____

(Balance from previous account)   Voucher $ $
                                     No.

RECAPITULATION

Total Receipts ———————————————————— $ ————————————————

Total Disbursements————————————————— $ ————————————————

Balance Remaining ——————————————————— $ ————————————————

ITEMIZED STATEMENT OF ALL FUNDS, ASSETS AND INVESTMENTS

ITEM ——

$

————————————————————————
Attorney

Attorney Registration No.————————

————————————————————————
Guardian

————————————————————————
Typed or Printed Name

————————————————————————
Address of Guardian

————————————————————————

ENTRY SETTING HEARING

The Court sets ———————————— at ———— o'clock ————.M., as the date and time for hearing the above account.

————————————————————————
Date

————————————————————————
Probate Judge

PROBATE COURT OF WARREN COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF _____

Case No. _____

BANK CERTIFICATE

N.B. Must be executed when funds are on deposit.
I HEREBY CERTIFY that the within named fiduciary, on the date named below, had on deposit in

The _____ of _____, Ohio,

the sum of $_____ on _____ to the credit of
<div align="center">Nature of deposit</div>

the estate of _____

_____

<div align="right">Bank</div>

Dated _____ _____ By _____ Cashier

_____
Fiduciary

BANK CERTIFICATE

N.B. Must be executed when funds are on deposit.
I HEREBY CERTIFY that the within named fiduciary, on the date named below, had on deposit in

The _____ of _____, Ohio,

the sum of $_____ on _____ to the credit of
<div align="center">Nature of deposit</div>

the estate of _____

_____

<div align="right">Bank</div>

Dated _____ _____ By _____ Cashier

_____
Fiduciary

Attach to Guardian account form 15.8

IN THE WARREN COUNTY, OHIO COMMON PLEAS COURT
PROBATE DIVISION

Guardianship of _____,

Case No. _____

WAIVER OF NOTICE OF HEARING ON ACCOUNT
(R.C. 2109.33)

The undersigned, who are interested in the estate, waive notice of the hearing on the account.

_____   _____

_____   _____

_____   _____

_____   _____

_____   _____

_____   _____

_____   _____

_____   _____

_____   _____

_____   _____

STATE OF OHIO; COUNTY OF WARREN
IN THE COMMON PLEAS COURT
PROBATE DIVISION

GUARDIANSHIP OF: _____

CASE NO. _____

GUARDIAN COMPENSATION FORM

A. Accounts Under $100,000 (whichever is greater):

     Base Fee (minimum of $250)   _____

          or

     1% of Market Value at end of accounting period   _____

                    Total Compensation: _____

B. Accounts Over $100,000:

     Same basis as provided for in W.C. Pr. R. 27,
     Trustee Compensation   _____

                    Total Compensation: _____

[Extraordinary fees must be itemized and documented and submitted to the Court by way of application.]

WCPC Form 17.9 Eff. 04/07/14