

**PROBATE COURT OF BUTLER COUNTY, OHIO  
JOHN M. HOLCOMB, JUDGE**

**GUARDIANSHIP OF \_\_\_\_\_, A MINOR**

**CASE NO. \_\_\_\_\_**

**AFFIDAVIT OF INCOME AND EXPENSES**

STATE OF OHIO, COUNTY OF BUTLER, SS:

Now comes \_\_\_\_\_ parent/guardian of \_\_\_\_\_  
(Name of Affiant) (Name of Minor)  
who being duly sworn and cautioned, states as follows:

1. I am requesting the release of \$ \_\_\_\_\_ from the funds on deposit at \_\_\_\_\_ held in the name of \_\_\_\_\_.
2. The purpose of the request for the release of funds is:  
\_\_\_\_\_  
\_\_\_\_\_
3. My marital status is \_\_\_\_\_ and the number of members in my household is \_\_\_\_\_.
4. I am employed with \_\_\_\_\_ and my annual salary is \$ \_\_\_\_\_.
5. I state that my spouse is employed with \_\_\_\_\_ and his/her annual salary is \$ \_\_\_\_\_.
6. My current monthly household expenses are as follows:

Mortgage/Rent	\$ _____
Utilities	\$ _____
Food	\$ _____
Clothing	\$ _____
Medical	\$ _____
Installment Loans	\$ _____
Credit Cards	\$ _____
Insurance	\$ _____
Child Support	\$ _____
Spousal Support	\$ _____
<b>TOTAL EXPENSES</b>	<b>\$ _____</b>

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7. Household Income:

	<u>Affiant</u>	<u>Spouse</u>	<u>Other Adults</u>
Net Wages	\$ _____	\$ _____	\$ _____
Stock Dividends	\$ _____	\$ _____	\$ _____
Interest	\$ _____	\$ _____	\$ _____
Social Security	\$ _____	\$ _____	\$ _____
Worker's Comp.	\$ _____	\$ _____	\$ _____
VA Benefits	\$ _____	\$ _____	\$ _____
Annuity/Pension	\$ _____	\$ _____	\$ _____
Child Support	\$ _____	\$ _____	\$ _____
Spousal Support	\$ _____	\$ _____	\$ _____
TOTAL	\$ _____	\$ _____	\$ _____

TOTAL - ALL INCOME FOR HOUSEHOLD \$ \_\_\_\_\_

8. I am unable to pay for the proposed expenditures because:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Affiant

On this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ personally appeared before me \_\_\_\_\_, who being properly sworn and cautioned, did affix his/her name hereon.

\_\_\_\_\_  
Notary Public