

APPENDIX C
 PROBATE COURT OF SUMMIT COUNTY, OHIO
 ELINORE MARSH STORMER, JUDGE

GUARDIANSHIP OF: _____

CASE NO. _____

APPLICATION - COMPUTATION OF GUARDIAN FEES

ACCOUNTING PERIOD OF _____ 20____ TO _____ 20____

I.	INCOME FOR ACCOUNTING PERIOD *	\$ _____	
	5% of first \$100,000	_____	
	3% of balance	_____	
	Total	\$ _____	
II.	AUTHORIZED EXPENDITURES	\$ _____	
	5% of first \$100,000	_____	
	3% of balance	_____	
	Total	\$ _____	
III.	TOTAL ORDINARY FEES	\$ _____	
IV.	EXTRAORDINARY FEES (Itemize and attach time records)	\$ _____	
V.	TOTAL FEES REQUIRED	\$ _____	
VI.	MINIMUM ANNUAL FEE	\$ _____	300.00
VII.	GREATER OF "V" OR "VI"	\$ _____	
VIII.	TOTAL FEES REQUESTED	\$ _____	

I have read and understand the above computation of fees, and submit they are necessary and reasonable for the administration of the guardianship for which I am guardian. I, therefore, request the Court's approval of payment of those fees from the assets of the said guardianship.

 Attorney for Guardian Signature

 Guardian Signature

 Attorney for Guardian Type or Print Name

 Guardian Type or Print Name

 MAGISTRATE

 DISPOSITION

* Income means: Wages; Pensions; Social Security; IRA Distributions; Interest; Rents; Royalties; Alimony; Annuities. Income **does not** mean unrealized gain on or appreciation of assets.