

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; Dividends; Rents; Royalties; Alimony; Annuities.

Income **does not** mean unrealized gain on or appreciation of assets.