

IN THE COURT OF COMMON PLEAS

DIVISION

COUNTY, OHIO

Plaintiff/Petitioner 1

vs./and

Defendant/Petitioner 2

Case No. _____

Judge _____

Magistrate _____

Instructions: Check local court rules to determine when this form must be filed. List ALL OF YOUR PROPERTY AND DEBTS, THE PROPERTY AND DEBTS OF YOUR SPOUSE, AND ANY JOINT PROPERTY OR DEBTS. You must provide the most recent value for each asset and balance owed for each debt. Do not leave any category blank. For each item, if none, put "NONE." If you do not know exact figures for any item, give your best estimate, and put "EST." If more space is needed, add additional pages.

AFFIDAVIT OF PROPERTY AND DEBT

Affidavit of _____ (Print Name)

I. REAL ESTATE INTERESTS

Table with 5 columns: Address, Present Fair Market Value, Titled To, Mortgage Balance, Equity. Rows 1 and 2 for listing property.

TOTAL SECTION I: REAL ESTATE INTERESTS: \$ _____

II. OTHER ASSETS

Table with 4 columns: Category, Description, Titled To, Value. Section A: Vehicles and Other Certificate of Title Property.

| <u>Category</u> | <u>Description</u> | <u>Titled To</u> | <u>Value</u> |
|-----------------|--------------------|------------------|--------------|
| 3. | _____ | _____ | \$ _____ |
| 4. | _____ | _____ | \$ _____ |
| 5. | _____ | _____ | \$ _____ |
| 6. | _____ | _____ | \$ _____ |

B. Financial Accounts

(Include checking, savings, CDs, POD accounts, money market accounts, etc.)

| | | | |
|----|-------|-------|----------|
| 1. | _____ | _____ | \$ _____ |
| 2. | _____ | _____ | \$ _____ |
| 3. | _____ | _____ | \$ _____ |
| 4. | _____ | _____ | \$ _____ |

C. Pensions & Retirement Plans

(Include profit-sharing, IRAs, 401(k) plans, etc. Describe each type of plan)

| | | | |
|----|-------|-------|----------|
| 1. | _____ | _____ | \$ _____ |
| 2. | _____ | _____ | \$ _____ |
| 3. | _____ | _____ | \$ _____ |
| 4. | _____ | _____ | \$ _____ |

D. Publicly Held Stocks, Bonds, Securities & Mutual Funds

(Name of company and number of shares)

| | | | |
|----|-------|-------|----------|
| 1. | _____ | _____ | \$ _____ |
| 2. | _____ | _____ | \$ _____ |
| 3. | _____ | _____ | \$ _____ |
| 4. | _____ | _____ | \$ _____ |

| <u>Category</u> | <u>Description</u> | <u>Titled To</u> | <u>Value</u> |
|---|--|------------------|-------------------------------------|
| E. Closely Held Stocks & Other Business Interests and Name of Company | | | |
| | (Type of ownership and number of shares) | | |
| 1. _____ | _____ | _____ | \$ _____ |
| 2. _____ | _____ | _____ | \$ _____ |
| F. Life Insurance (Company Name and Term or Whole Life) | | | |
| | (Insured Life) | | Cash Value and Loan Balance, if any |
| 1. _____ | _____ | _____ | \$ _____ |
| 2. _____ | _____ | _____ | \$ _____ |
| 3. _____ | _____ | _____ | \$ _____ |
| 4. _____ | _____ | _____ | \$ _____ |
| G. Furniture & Household Goods, Furnishings, and Appliances | | | |
| 1. _____ | _____ | _____ | \$ _____ |
| 2. _____ | _____ | _____ | \$ _____ |
| 3. _____ | _____ | _____ | \$ _____ |
| 4. _____ | _____ | _____ | \$ _____ |
| H. Safe Deposit Box | | | |
| | (Give location and contents) | | |
| 1. _____ | _____ | _____ | \$ _____ |
| 2. _____ | _____ | _____ | \$ _____ |
| 3. _____ | _____ | _____ | \$ _____ |
| 4. _____ | _____ | _____ | \$ _____ |
| I. All Other Assets Not Listed Above (including jewelry, art, tools, firearms, and other collectibles) | | | |
| | (If necessary, attach additional pages) | | |
| 1. _____ | _____ | _____ | \$ _____ |
| 2. _____ | _____ | _____ | \$ _____ |
| TOTAL SECTION II: OTHER ASSETS: | | | \$ _____ |

III. SEPARATE PROPERTY CLAIMS

Separate property includes, but is not limited to, property owned before marriage and gifts or inheritances to only one spouse.

| Description | Why do you claim this as separate property? | Present Fair Market Value |
|---|---|---------------------------|
| 1. _____ | _____ | \$ _____ |
| 2. _____ | _____ | \$ _____ |
| 3. _____ | _____ | \$ _____ |
| 4. _____ | _____ | \$ _____ |
| TOTAL SECTION III: SEPARATE PROPERTY CLAIMS: | | \$ _____ |

IV. DEBT

List ALL OF YOUR DEBTS, your spouse’s debts, and any joint debts. Do not leave any category blank. For each item, if none, put “NONE.” If you don’t know exact figures for any item, give your best estimate, and put “EST.” **If more space is needed to explain, please attach an additional page with the explanation and identify which question you are answering.**

| Type | Name of Creditor | Name on Account | Total Debt Due | Monthly Payment |
|---|------------------|-----------------|----------------|-----------------|
| A. Secured Debt (Mortgages, Car, etc.) | | | | |
| 1. _____ | _____ | _____ | \$ _____ | \$ _____ |
| 2. _____ | _____ | _____ | \$ _____ | \$ _____ |
| 3. _____ | _____ | _____ | \$ _____ | \$ _____ |
| 4. _____ | _____ | _____ | \$ _____ | \$ _____ |
| 5. _____ | _____ | _____ | \$ _____ | \$ _____ |
| B. Unsecured Debt (Credit cards, medical bills, other debts) | | | | |
| 1. _____ | _____ | _____ | \$ _____ | \$ _____ |
| 2. _____ | _____ | _____ | \$ _____ | \$ _____ |
| 3. _____ | _____ | _____ | \$ _____ | \$ _____ |

| Type | Name of Creditor | Name on Account | Total Debt Due | Monthly Payment |
|--------------------------------|------------------|-----------------|-----------------|-----------------|
| 4. _____ | _____ | _____ | \$ _____ | \$ _____ |
| 5. _____ | _____ | _____ | \$ _____ | \$ _____ |
| TOTAL SECTION IV: DEBT: | | | \$ _____ | |

V. BANKRUPTCY

| Filed by | Date of Filing | Date of Discharge or Relief from Stay | Type of Case (Ch. 7, 11, 12, 13) | Current Monthly Payments |
|-------------------------------------|----------------|---------------------------------------|----------------------------------|--------------------------|
| 1. _____ | _____ | _____ | \$ _____ | \$ _____ |
| 2. _____ | _____ | _____ | \$ _____ | \$ _____ |
| TOTAL SECTION V: BANKRUPTCY: | | | \$ _____ | |

OATH OR AFFIRMATION
(Do not sign until Notary Public is present)

I, (print name) _____, swear or affirm that I have read this Affidavit and, to the best of my knowledge and belief, the facts and information stated in this Affidavit are true, accurate, and complete. I understand that if I do not tell the truth, I may be subject to penalties for perjury.

Your Signature

STATE OF _____)
) SS
 COUNTY OF _____)

Sworn to or affirmed before me by _____ this _____ day of _____, _____.

Signature of Notary Public

Printed Name of Notary Public

Commission Expiration Date: _____

(Affix seal here)