

Probate Court of Cuyahoga County

# Guardianship Training Handbook



Informational Booklet for Guardians of  
Adult Incompetents.

**PROBATE COURT OF  
CUYAHOGA COUNTY, OHIO**

**Anthony J. Russo, Presiding Judge  
Laura J. Gallagher, Judge**

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# GUARDIANSHIP QUIZ

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Please complete the following quiz regarding duties of guardianship and bring it to the Court's scheduled hearing. The Court must receive a completed, correct quiz prior to your appointment as guardian.

1. A Guardian of Person is responsible for decisions regarding which of the following?

- Housing
- Personal care
- Medical decisions and medications
- All of the above

2. How often must a Guardian's Report be filed with the Probate Court?

- 1 year
- 2 years
- 4 years
- Never

3. In order to qualify for Medicaid, a Ward's assets must be spent down to which of the following amounts?

- \$0
- \$1,500.00
- \$5,000.00
- \$25,000.00

4. How often is a Guardian of Person required to visit a Ward?

- Weekly
- Monthly
- Quarterly
- Never

5. A Guardian's Report, which is filed periodically by the Guardian, must be accompanied by what?

- A new Application for Guardianship
- A Statement of Expert Evaluation completed by a physician or licensed psychiatrist
- A letter from the nursing home or other residence of the Ward
- No additional documents are required

6. If the ward's only source of income is Social Security, may the Guardian of Person become the Representative Payee to receive Social Security payments?

True

False

7. What are some of the duties of a Guardian?

Deposit the Ward's Will with the Court

Keep the Court advised of any address changes for the Guardian and the Ward

Protect the Ward's interests in legal matters

All of the above

8. Who is the Superior Guardian of the Ward charged with overseeing the actions of the Guardian?

Next-of-kin of the Ward

Probate Court

The President of the United States

There is no Superior Guardian

# **INTRODUCTION TO GUARDIANSHIP**

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This booklet is meant to provide some basic information to you as you begin a guardianship with the Cuyahoga County Probate Court. This information is given to the public in order to offer a general understanding of the duties and procedures of the Probate Court in reference to guardianships. This information should not be considered as a legal reference. If you have any legal questions when dealing with guardianships, an attorney should be consulted.

The personnel of this Court are not allowed to give you legal advice or assist you in completing documents for filing with the Court. The Court provides blank standard forms. These forms can be found at the Court and on the Court's website. Examples of these forms are found throughout this Handbook.

Please read over the booklet carefully and keep it for future reference.

# TYPES OF GUARDIANSHIP

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A guardianship is an involuntary relationship in which one party, called a guardian, acts for an individual called the ward. The ward is incapable of managing his or her personal needs and/or financial affairs. A guardian is any adult person, association, or corporation appointed by the Probate Court to assume responsibility for the care and management of the person, the estate, or both, of an incompetent person or minor child. A guardian must be at least 18 years of age and a law abiding citizen.

**Incompetent** • An incompetent is any person who is so mentally impaired as a result of a mental or physical illness or disability, or mental retardation, or as a result of chronic substance abuse, that the person is incapable of taking proper care of the person's self or property or fails to provide for the person's family or other persons for whom the person is charged by law to provide, or any person confined to a correctional institution within this state

Generally, there are two types of guardianships for an adult incompetent: a guardian of the person or guardian of the estate. Under some circumstances Ohio law also allows for the appointment of a limited guardian, emergency guardian, or conservator.

**Guardian of the person** • A guardian of the person makes decisions involving the personal needs of the ward. In addition to others, these decisions may include medical decisions or decisions as to where the ward will live.

**Guardian of the Estate** • A guardian of the estate makes decisions for the management of the ward's income and property. In addition to others, these decisions may include the payment or dispute of bills and the investment of any assets.

In some cases, a ward needs both a guardian of the person and a guardian of the estate. The Court does not require the same person to serve both of these roles. One person can serve as guardian of the person, and another person can serve as guardian of the estate. It is often easier if one person serves as both guardian of the ward's person and estate due to the overlapping duties.

**Limited Guardian** • The Court may appoint a limited guardian to perform specific duties for a definite or indefinite period of time. A limited guardian may only perform those specific duties set forth in the order of guardianship.

The ward retains control over all other aspects of the management of the ward's person and estate.

**Conservatorship** • In some cases an adult who is physically infirm but mentally competent may select a person (conservator) to handle his/her affairs. The adult selects the conservator because the adult is competent to make his or her own decisions. The adult may terminate the conservatorship with a written notice that is filed with the Court and sent to the conservator.

The powers and duties of the conservator are the same as a guardian unless limited.

**Emergency Guardianship** • The Court may appoint a guardian in an emergency without notice to the ward or family to protect against injury to the person or estate of a ward. The procedure for emergency guardianship in Cuyahoga County is set forth in Local Rule 66.03(A).







## Procedure for Appointment of Emergency Guardian

It is sometimes necessary to appoint a guardian on an emergency basis. This might occur where an adult incompetent has not yet been placed under a guardianship, but an emergency exists and it is reasonably certain that immediate action is required to prevent significant injury to the person or estate of the incompetent.

Applications for emergency guardianship are initiated by filing an *Application for Appointment of Guardian of Alleged Incompetent (Form 17.0)*, and must be accompanied by a completed *Statement of Expert Evaluation (Form 17.1)* and a completed *Supplement for Emergency Guardian of Person (Form 17.1A)*. Applications should also contain any attachments or exhibits that may assist the Probate Court in determining whether to grant an emergency guardianship.

Once the Application has been filed and the appropriate filing fee paid, the Application and any accompanying materials will be reviewed by the Judge or Guardianship Magistrate. The Judge or Guardianship Magistrate may, but is not required to, meet with the applicant or attorney filing the Application.

Emergency guardianship will be granted only if there is reasonable certainty that immediate action is required to prevent significant injury to the person or estate of the individual. The Probate Court recognizes that emergency guardianship should not be granted where another remedy may be appropriate.

Application for Appointment of Guardian of Alleged Incompetent  
(Form 17.0)

Supplement for Emergency Guardian of Person (Form 17.1A)

If the Judge or Guardianship Magistrate declines to grant an emergency guardianship, the Probate Court may, in its discretion, schedule the matter on an expedited basis.

If the Judge or Magistrate approves the request for emergency guardianship, the following will occur:

1. A Judgment Entry will issue granting emergency guardianship for a period of seventy-two (72) hours.
2. A hearing will be scheduled within seventy-two (72) hours in order to determine whether to extend the emergency order for up to thirty (30) days.
3. A hearing will be scheduled on the regular guardianship docket for hearing on the Application for Appointment of Guardian.
4. As soon as possible after the issuance of the emergency guardianship order, a Probate Court Investigator will visit with the respondent in order to serve notice of the emergency guardianship proceedings and scheduled Probate Court hearings.

After notice to the person over whom guardianship is being applied, and after a hearing, the Probate Court may extend the seventy-two (72) hour emergency guardianship for a period not to exceed thirty (30) days, in which case a Judgment Entry will issue.

# GUARDIANSHIP DUTIES

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The Court is the ward's "Superior Guardian." The Court delegates certain powers and duties to the appointed guardian. The guardian is responsible to the Court and must obey all orders of the Court. The Court may remove a guardian who fails to perform satisfactorily the duties of guardian or fails to obey any order of the Court.

## Guardian of the Person

A Guardian of the Person is appointed by the Court to make decisions of a personal nature and provide for personal needs of the ward. The following duties and responsibilities apply to all guardians of the person.

### *General Duties*

- The guardian of the person is responsible for the ward's personal needs. The guardian will make medical decisions for the ward. The guardian will make arrangements for the ward's food, clothing, and shelter consistent with the ward's available financial resources. The guardian will also assist the ward in arranging appropriate educational and recreational opportunities.
- The guardian should promote and maintain the ward's health and well-being by ensuring that all necessary medical care and treatment is appropriately provided. The guardian should determine whether the ward, before the appointment of a guardian, has made any advance directives, such as a living will, a durable power of attorney, etc. On finding such documents, the guardian shall consider the ward's wishes in the decision-making process. Absent any documented intent, the guardian has the right and duty to make decisions that are in the ward's best interest.
- Because the ward is unable to protect his or her interests the guardian is responsible to make decisions for the ward and to act in the ward's best interest. This includes protecting the ward's

interests in legal matters and litigation, either for or against the ward.

- The guardian must deposit the ward's Will with the Court.
- The guardian must keep the Court informed of any change of address for the guardian or ward.
- The guardian must inform the Court of any major problems with the guardianship, such as abuse of the ward or theft of the ward's property.

### *Meet with the Ward*

- The guardian of the person should meet with the ward as soon after the appointment as is practicable. Dependent upon the ward's mental capabilities, the guardian should communicate to the ward the role of the guardian; explain the rights of the ward; assess the ward's physical and social situation, including the ward's educational, vocational, and recreational needs; and assess the ward's preferences and the support system available to the ward.
- After meeting with the ward, the guardian should notify relevant agencies and individuals of the appointment of a guardian. These may include doctors, nursing facilities, caregivers, and family members. The guardian should make a list of the key contact information of all service providers, as well as a list of all over-the-counter and prescribed medications the ward is taking, the dosage, the reason it is taken, and the name of the prescribing doctor. The guardian must make sure the ward's medication is timely administered and in the appropriate dosages.
- The guardian should, at a minimum, visit the ward at least once quarterly. At each visit, the guardian should determine the ward's physical appearance and condition and determine the appropriateness of the ward's current living situation and the continuation of existing services and the need for additional services.

## Guardian's Report

The guardian must file a *Guardian's Report (Form 17.7)*. The first Guardian's Report is due to be filed two (2) years from the date of the guardian's appointment. Additional Guardian's Reports must be filed every two (2) years after the date of the filing of the last Guardian's Report. The Guardian's Report provides the Court with information on the ward's current condition and verifies that the ward is still incompetent. A *Statement of Expert Evaluation form (Form 17.1)*, completed by the ward's physician or licensed psychologist must be filed with the Guardian's Report.

Guardian's Report (Form 17.7)

## Long Term Care Facilities (LTCF)

There may come a time when you have to consider moving your ward to a more appropriate Long Term Care Facility (LTCF) or even a less restrictive facility. Reasons could be that your ward's medical or psychiatric needs have changed, or that the current facility is not giving your ward appropriate care.

Have a copy of your Letters of Appointment on file at the LTCF. Make sure that the LTCF has all of your contact information. Update your contact information with the LTCF when it changes.

Make an appointment to meet key staff at the LTCF. Staff may include the Director of Nursing, the nurse most familiar with your ward, the social worker, administrator, ward's physician, etc. If the ward is in another setting, see key people in that setting, such as the operator of the group home.

The LTCF may allow the resident to have a favorite chair, lamp, bedspread, stuffed animal, dresser, etc., in his or her room. Check with the LTCF before you bring things to the facility.

If you are taking clothing to your ward, make sure every article of clothing is labeled with their name in indelible ink. Also, do not take large quantities of clothing to the LTCF, as items do get misplaced.

Any food items you wish to take your ward must be approved by the nursing staff or dietician.

You will be asked to sign a number of papers at the LTCF. Remember that you should take the time to read them carefully. Also, you are not responsible for any debts of the ward or costs of LTCF care. Be sure to sign any forms as guardian to avoid confusion.

When problems occur regarding your wards care in a LTCF, it is appropriate to discuss your concern with the facility staff member that is most familiar with the issue involved (i.e. medical issues should be referred to nursing staff; financial issues should be referred to bookkeeping; and general issues should be referred to a social worker).

Most LTCFs have contracted with beauticians or barbers. You can request to have your ward's hair cut or washed, with the bill being paid out of your ward's Resident Account/Personal Needs Account (PNA), if funds are available.

When the PNA has a value close to \$1,500.00, the funds in that account will need to be brought under \$1,500.00. If they are not spent down, Medicaid eligibility will be lost. You should work with the suitable LTCF staff member to find appropriate ways to help spend your ward's funds.

### ***Health Precautions***

Here are some simple health precautions to use when you are visiting your ward or anyone else in a facility:

1. Always check with the charge nurse before entering a resident's room to learn if there are any isolation precautions;
2. Always use isolation precautions when advised by nursing staff, including isolation garments, if needed;
3. Wash your hands after leaving the room or having contact with your ward or any resident/patient; and
4. If your ward has a +PPD (positive TB), learn the policy at your ward's LTCF.

### ***Plan of Care Conferences***

LTCFs are required by law to have a Plan of Care Conference for each resident at least once every three (3) months. As guardian, you have a right to be notified, attend, and have input into the Plan of Care for your ward. The Care Conferences include all departments at the LTCF, such as social work, nursing, and dietary. This Conference is an opportunity for you as guardian to hear what each department is planning to best meet the needs of your ward. If you have not been notified, contact the LTCF social worker.

### ***Access to the Resident Chart***

As legal guardian, you have the right to see the chart for your ward. The LTCF may require that one of their staff members be with you when you review your ward's chart. This can be helpful, as the staff member may be able to answer questions you might have. The chart is a valuable source of information to you to understand medications, weight gain or loss, nurses' notes, etc. Please note that the LTCF has the legal right to request that the guardian notify it twenty-four (24) hours in advance before viewing the chart.

### ***Code Status***

DNR (Do Not Resuscitate) means a medical order given by a physician and written in the medical records that cardiopulmonary resuscitation or CPR is not to be administered. CPR means treatment to try to restart your ward's breathing or heartbeat. CPR may be done by breathing into the mouth, pushing on the chest, putting a tube through the mouth or nose into the throat, administering medication, giving electric shock to the chest, or by other means. Full-Code means CPR will be administered. DNRCC means Do Not Resuscitate Comfort Care.

You will need to review the current code status of your ward. Either the previous guardian or the ward (when they were still competent) had to consider signing a code status upon admission to the LTCF. At this time, DNR orders are either DNRCC or DNRCC-Arrest. If you need clarification of a DNR order, you can contact your ward's physician or a LTCF staff member. When someone does not have a DNR order, they are considered Full-Code. As the new guardian, you must re-evaluate and make your own decision on which DNR order is most appropriate for your ward. The LTCF physician will need to initiate the DNR order, but it is usually the social worker with whom you will work. You must get the DNR form from the social worker, which will be signed by you and the physician, and which will be kept in the ward's chart. If your ward is able to communicate with you, you should discuss their code status order with them.

### ***Medications***

Your ward's chart at the LTCF will have a list of all the medications that have been prescribed for them. The chart lists the names of the medications, their strength and dosage. Some general medication terms are:

- "QD" – every day
- "BID" – twice a day
- "TID" – three times a day
- "QID" – four times a day
- "HS" – bed time
- "PO" – by mouth
- "PRN" – as needed

If you have any questions regarding medications, you should ask the charge nurse. If staff is unavailable to help you, you can contact your ward's physician. You can get the physician's name and contact information from the chart or a staff member. It is a good idea to know if any of your ward's medications have adverse or long-term side effects.

### ***Hospice/Palliative Care***

The hospice/palliative care concept of compassionate care offers comfort-oriented services to the terminally ill. With the focus on pain management, symptom control and emotional support, hospice care has become one of the fastest growing health care services in this country. When a patient's condition is determined to be terminal, with months rather than years of life expectancy, or your ward has a severe decline in health/cognition, a request for hospice care can be made. The patient's physician continues to assume responsibility for medical care, but the hospice team members will work with the physician, serving as liaisons for patients and families/guardians. If you feel your ward would benefit from services, contact your ward's physician regarding eligibility.

### ***Medicaid***

The guardian is responsible for securing and maintaining the ward's Medicaid eligibility. Every year, Medicaid performs a "re-determination" of eligibility to make sure the individual still qualifies. As a LTCF Medicaid resident, your ward is not allowed over \$1,500.00 in their Personal Needs Account. As the guardian, you may receive a notice to do a face-to-face interview at the Medicaid office. With the guardian's permission, the LTCF Social Worker, Medicaid liaison, or another staff member, can take the place of the guardian at face-to-face interviews. If you need assistance with your ward's Medicaid, please consult an attorney.

### ***Personal Needs Account***

When a LTCF resident is on Medicaid, they receive a set amount monthly from their income check for their personal needs. If they receive Supplemental Security Income (SSI), they are given \$30.00 monthly. Those on Social Security (SS) receive \$40.00 monthly. Certain Veterans (VA) get \$90.00 monthly. These funds are deposited into your ward's Personal Needs Account (PNA). These funds are for their personal needs, such as haircuts, clothing, outings, candy, cigarettes, etc. You cannot pay your court bill from funds in the PNA. If your ward is not getting their monthly benefit, talk to the LTCF social worker or bookkeeper.

The LTCF, as representative payee, has the responsibility of monitoring your ward's PNA. As guardian of person, you should work with the LTCF in making approved purchases for your ward. Talk with the LTCF's bookkeeper regarding their reimbursement policy prior to purchasing anything for your ward.

As the guardian, you may request the LTCF give you a quarterly accounting of your ward's PNA. This will list all funds deposited and withdrawn from the account. Knowing what funds your ward has available allows you to better oversee your ward's needs. You have the right to question the LTCF's spending of your ward's funds.





**Inventory**

- One of the first duties of the guardian of the estate is to make a diligent search for all assets owned by the ward. The ward's records should be reviewed to locate the ward's assets. The guardian should locate and identify all bank accounts, investment accounts, un-cashed checks, cash, stocks, bonds, notes, life insurance policies, real estate, vehicles, life insurance policies, business interests, IRA or retirement accounts, household goods, safety deposit boxes, jewelry, furniture, antiques, any other personal property, and money owed to the ward.
- The guardian should list all of the ward's assets and assign a value to the ward's assets as of the date of the guardian's appointment. This is done by filling out an *Inventory (Form 15.5)* and filing the Inventory with the Court within ninety (90) days from the date of appointment.

**How to Value Estate Assets for Inventory.**

- Assets such as cash, un-cashed checks, bank accounts and investment accounts should be listed at their value on the date of the guardian's appointment. Certain assets may require the assistance of an appraiser to determine the present market value of the assets.
- Stock should be valued as of the date of the guardian's appointment at its closing value on whatever stocks exchange the stock is traded.
- Savings bonds should be listed at their face value. The date of issuance should also be listed.
- Life insurance policies should be listed at both their face value and any cash value. Most policies, which have a cash value, contain a chart as part of the policy by which to determine cash value.
- Vehicles should be listed using the Kelley Blue Book value for the vehicle for the month the guardian is appointed.
- The guardian may estimate the value of furniture, but antiques must be appraised by a qualified appraiser on the Court's list. Real estate may be listed at the value on the county property tax records. The guardian can obtain this information from the County Fiscal Officer if a copy of the tax bill cannot be located. (<https://fiscalofficer.cuyahogacounty.us/>) Real estate is not required to be appraised or bonded unless the ward's real estate is to be sold. The legal description and parcel number of all real estate should be included in the inventory.

Guardian's Inventory (Form 15.5)

**Application for authority to release ward's funds**

- Before the guardian can obtain any of the ward's monies, the Court must release the ward's funds to the guardian. The ward's monies are frozen by the order of the Court that appoints the guardian. When the guardian is appointed, the Court issues a Letter of Guardianship to show that the guardian has been appointed. Notice that the Letter of Guardianship states that the guardian cannot access the ward's monies until the Court releases the ward's funds. The ward's funds are released by an order from the Court. The guardian applies for this order by completing an **Application to Release Funds to Guardian (Form 15.6)**.

Application to Release Funds to Guardian (Form 15.6)

- Once the ward's funds are released to the guardian, the guardian must place these funds in a guardianship account at an approved bank or investment institution.

**Application for authority to expend funds**

- A guardian has the responsibility to pay the ward's bills and collect the ward's income. The guardian **MUST** obtain the approval of the Court before spending any of the ward's money. After the Inventory is filed, the guardian of the estate may apply for authority to spend the ward's money on things necessary for the ward's well-being. The guardian obtains the approval of the Court by filing an **Application for Authority to Expend Funds (Form 15.7)**.

Application for Authority to Expend Funds (Form 15.7)

- This **Application for Authority to Expend Funds** form can be used to obtain permission to make a one-time expenditure or to set up monthly or periodic expenditures.
- When a guardian has authority to use some of the ward's funds the guardian should get receipts and/or cancelled checks indicating the amount of funds expended and the purpose of the expenditure. The expenditure needs to match a previously approved request. The guardian may not access the funds of the ward by means of an automatic teller machine (ATM) card.



### ***Sale of the ward's property***

- Generally, if the ward's property is being wasted or not used by the ward, and it is in the best interest of the ward, the property may be sold in order to help support the ward. Proceeds from the sale must be deposited in the guardianship account. The guardian of the estate may sell the ward's personal property without Court permission for the best obtainable price. The guardian may not sell the ward's real estate without the Court's permission. The guardian must file a land sale action to sell the ward's real estate. A land sale action is a complicated legal proceeding, requiring the help of an experienced attorney to file a land sale action. The guardian is not allowed to purchase the ward's personal property or real estate.

### ***Investments***

- The guardian is required to invest any surplus guardianship funds. The guardian may only invest the ward's assets in those institutions and investments allowed by law. The fiduciary investment statutes, R.C. 2109.37 and R.C. 2019.371, are included as an exhibit to this Handbook. These investment statutes should be reviewed and followed carefully. This Court does not require prior approval of investments made by the guardian of the estate. This Court will review the investments to determine if they are in compliance with the investment statutes.
- The guardian should review all remaining investments to make sure that they are invested properly.



# SPECIAL GUARDIAN ISSUES

## Application for Extension of Time to File

The guardian must file a number of documents with the Court at different times. It is a serious matter if a guardian's account or a guardian's inventory is not filed when due. The Court will issue a citation to the guardian for overdue filings. The citation is an order of the Court. The Sheriff serves the citation on the guardian. The citation requires the guardian either to file the document by a specific date or to appear before the Court on that date.

The guardian must appear before the Court if the document is not filed. If the guardian fails to appear before the Court, the Court may issue a warrant for the guardian's arrest. The Court may also remove or fine the guardian. If the guardian needs additional time to file documents with the Court, the guardian can request an extension of time. The request must be filed before the due date of the document. The Court will not grant an extension of time once a citation has been issued.

## Guardian of Person: Social Security Income

If the ward has less than \$25,000.00 in assets, and the ward's only source of income is Social Security, the guardian of person can make a request to be appointed as Representative Payee.

The request must be made in a neighborhood Social Security Office, and will often eliminate the need to appoint a guardian of estate.

## Guardian of Person: Application to Pay or Deliver Funds

A duly-appointed guardian of person may file in the Probate Court an application to pay or deliver funds of the ward if the total amount of assets does not exceed \$25,000.00. This is done by completing an *Application to Pay or Deliver Estate of an Incompetent Adult without Appointment of a Guardian of Estate*. The guardian must indicate on the Application how the funds are to be spent. Typical expenditures include pre-paid funeral plots, nursing home expenses, medical bills, etc. The Court may schedule a hearing to review expenditures.

Application to Pay or Deliver Estate of an Incompetent Adult without Appointment of a Guardian of Estate

PROBATE COURT OF CLATSOP COUNTY  
Anthony J. Berry, Presiding Judge  
Linda J. Callaghan, Judge

IN THE MATTER OF THE ESTATE OF \_\_\_\_\_  
Last of Name: \_\_\_\_\_

WHEN A FUND TO PAY OR DELIVER ESTATE OF AN INCOMPETENT ADULT WITHOUT APPOINTMENT OF A GUARDIAN OF ESTATE

You, whose full name and address are \_\_\_\_\_, as Guardian of the Person of \_\_\_\_\_, do hereby certify that \_\_\_\_\_, of \_\_\_\_\_, Oregon, is incompetent person by the Probate Court of Clatsop County. The Guardian of the Person further represents that the above named person is the owner of, or entitled to receive payment of, real estate, or other property, described as follows: \_\_\_\_\_

In Clatsop County, Oregon, the above named property is situated in the north-east part of the \_\_\_\_\_, \_\_\_\_\_, Oregon, and is owned by \_\_\_\_\_.

In Clatsop County, Oregon, the above named property is situated in the north-east part of the \_\_\_\_\_, \_\_\_\_\_, Oregon, and is owned by \_\_\_\_\_.

Amount of funds to be paid or delivered: \$ \_\_\_\_\_

How the funds are to be used: \_\_\_\_\_

\_\_\_\_\_, Guardian of the Person, do hereby certify that the above named person is the owner of, or entitled to receive payment of, real estate, or other property, described as follows: \_\_\_\_\_

\_\_\_\_\_, Guardian of the Person, do hereby certify that the above named person is the owner of, or entitled to receive payment of, real estate, or other property, described as follows: \_\_\_\_\_

\_\_\_\_\_, Guardian of the Person, do hereby certify that the above named person is the owner of, or entitled to receive payment of, real estate, or other property, described as follows: \_\_\_\_\_

\_\_\_\_\_, Guardian of the Person, do hereby certify that the above named person is the owner of, or entitled to receive payment of, real estate, or other property, described as follows: \_\_\_\_\_

## Guardian of Estate: Guardian Fees and Attorney Fees

### Guardian Fees and Attorney Fees

As the guardian of the estate you perform a number of duties for the ward's benefit. Some of these duties involve considerable time and effort on the part of the guardian. The guardian of the estate may be paid compensation for the guardian's time and efforts. The guardian has the option to accept this fee in full, in part, or to decline the fee.

The guardian must report any compensation as income on the guardian's personal income tax return. Compensation is determined by *Local Rule 73.1*. A guardian's compensation must be included on the guardian's account; attach a copy of the *Computation of Guardian Fees* form to the account.

Attorney fees are allowed for the necessary and reasonable attorney services which are provided to the guardianship. Attorney fees are allowed only after an application for attorney fees has been filed by the attorney with this Court. The application must include an itemized list of services rendered and time spent.

Computation of Guardian Fees

PROBATE COURT OF CUYAHOGA COUNTY, Ohio Anthony A. Smith, Presiding Judge Loren A. Chappell, Judge		
IN THE MATTER OF THE GUARDIANSHIP OF _____ CASE NUMBER _____		
<b>COMPUTATION OF GUARDIAN FEES</b> (Local Rule 73.1)		
<b>GUARDIANSHIP OF ESTATE</b>		
See attachment <input type="checkbox"/> or <input type="checkbox"/>		
I. Compensation, not including a reasonable fee, earned by the guardian		
Billable professional services (Guardian's time)	Hourly Rate	\$\$\$
Plus Reasonable Fees		\$\$\$
II. Expenses, not including per guardian's time or publications, earned by this estate		
Professional expenses (attorney's fees, etc.) (Less than 100.00)	Hourly Rate	\$\$\$
III. Expenses of the decedent which the guardian has paid or had paid for		
Professional expenses (attorney's fees, etc.) (Less than 100.00)	Hourly Rate	\$\$\$
TOTAL FEES allowable by computation I, II and III above		\$\$\$
TOTAL FEES actually paid to guardian		\$\$\$
Amount Applied (Paid) after Local Rule 73.1		\$\$\$

## Guardian of Estate: Sanctions

The guardian of the estate has an obligation to follow the orders of the Probate Court and timely perform the responsibilities of guardian. The Court has the authority to reduce or deny guardian fees and attorney fees if a guardian does not file all documents on time.

The Court will issue a citation to the guardian for an overdue filing. The citation is an order of the Court. The citation requires the guardian either to file the document by a specific date or to appear before the Court on that date.

If the guardian needs additional time to file documents with the Court, the guardian can request an extension of time. The request must be filed before the due date of the documents. The Court will not grant an extension of time once a citation has been issued.

The Sheriff serves the citation on the guardian. The guardian must appear before the Court if the document is not filed. If the guardian fails to appear before the Court, the Court may issue a warrant for the guardian's arrest. The Court may also remove or fine the guardian.

# APPENDIX

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## **Cuyahoga County Local Rule 73.1. Guardian's Compensation**

**\*The following Local Rule applies to guardians of estate.**

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**(1) During each accounting period required by statute:**

**(a) 3% of the total income; and 3% of the total expenditures.**

**(b) 10% of gross rental income from real estate.**

**(2) An annual fee of \$2.50 per \$1,000.00 of the fair market value of the principal.**

**(3) Minimum compensation of \$500.00 per year.**

**(4) Compensation computed on income will not be allowed on balances carried forward from one accounting period to another; nor will an investment of funds of the final distribution of unexpended balances to award at the close of a guardianship be considered as an expenditure.**

**(B) For the purpose of computing a guardian's compensation as herein provided, the fair market value of the principal shall be determined by the guardian as of the appointment date and as of each anniversary thereafter. The compensation so determined may be charged during the ensuing year. The annual principal valuation shall be adjusted from time to time to reflect additions to and withdrawals from the principal of the estate, and the compensation for the remaining portion of the annual period shall be similarly adjusted to reflect such revised valuation.**

**(C) Additional compensation, reimbursement for expenses incurred, and fees of a guardian of the person only may be fixed by the court on application. The court may require that applications for fees or compensation be set for hearing and that written notice of the time and place of the hearing and the amount applied for be given to interested parties, as required by the court. A copy of the notice, with certified mail return receipt attached, together with an affidavit of the service of such notice, shall be filed prior to the hearing.**

**(D) The compensation of co-guardians in the aggregate shall not exceed the compensation which would have been payable if only one guardian had been acting.**

**(E) A separate schedule of the computation of the guardian's compensation shall be set forth in the guardian's account as a condition of its approval.**

**(F) Except for good cause shown, neither compensation for a guardian nor fees to the attorney representing the guardian, will be allowed when the guardian is delinquent in filing an account as required by RC 2109.30.**

**HISTORY: (Amended, Effective 4-3-06; 3-1-11(Effective for applications filed on or after March 1, 2011))**



## Helpful Resources for Guardians

### For Finding Family

[www.411.com](http://www.411.com) • Good general site for searching telephone numbers, reverse lookups & addresses.

[www.infoplease.com](http://www.infoplease.com) • A more general information search site.

[www.msn.com](http://www.msn.com) • This website provides white pages & yellow pages.

[www.dogpile.com](http://www.dogpile.com) • Does a mega search of 10-15 search engines at one time.

[www.odh.state.oh.us](http://www.odh.state.oh.us) • Ohio Department of Health (vital records, birth/death/marriage certificate & divorce records).

[www.rootsweb.com](http://www.rootsweb.com) • This is a genealogy site. Also has a link to the Social Security Administration's Death Indexes.

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[www.psa10a.org](http://www.psa10a.org) • The website for the Western Reserve Area Agency on Aging which is responsible for planning, coordinating and administering state and federal funded programs and services for older adults. ON this site is a link to the Network of Care, a comprehensive, internet-based resource for seniors and people with disabilities, as well as their caregivers and service providers.

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You may find Court Forms on the Probate Court's website, <http://probate.cuyahogacounty.us/>, under the "Court Forms" tab. Forms are also represented here on the following pages:

## Guardian of Estate: Guardian Fees and Attorney Fees

### Guardian Fees and Attorney Fees

As the guardian of the estate you perform a number of duties for the ward's benefit. Some of these duties involve considerable time and effort on the part of the guardian. The guardian of the estate may be paid compensation for the guardian's time and efforts. The guardian has the option to accept this fee in full, in part, or to decline the fee.

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Computation of Guardian Fees

PROBATE COURT OF CUYAHOGA COUNTY, OHIO Loren J. Coughlin, Judge								
IN THE MATTER OF THE GUARDIANSHIP OF _____ CASE NUMBER _____								
<b>COMPUTATION OF GUARDIAN FEES</b> (Local Rule 73.1)								
<b>GUARDIANSHIP ESTATE</b>								
The guardian is <input type="checkbox"/> an individual <input type="checkbox"/> a corporation								
A. Fees earned and disbursed as a percentage of assets covered by this account								
<table border="1" style="width: 100%;"> <tr> <td style="width: 80%;">Fees of the guardian (total fees received from ward)</td> <td style="width: 10%;">Total Amount</td> <td style="width: 10%;">GCR</td> </tr> <tr> <td>Substantive fees</td> <td></td> <td></td> </tr> </table>	Fees of the guardian (total fees received from ward)	Total Amount	GCR	Substantive fees				
Fees of the guardian (total fees received from ward)	Total Amount	GCR						
Substantive fees								
B. Disbursements, and hereby any attorney's fees or disbursements, covered by this account								
<table border="1" style="width: 100%;"> <tr> <td style="width: 80%;">Disbursements (total disbursements from the ward's account)</td> <td style="width: 10%;">Total Disbursements</td> <td style="width: 10%;">GCR</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>	Disbursements (total disbursements from the ward's account)	Total Disbursements	GCR					
Disbursements (total disbursements from the ward's account)	Total Disbursements	GCR						
C. Disbursements of the guardian's personal disbursements, credit or balance on hand from her account								
<table border="1" style="width: 100%;"> <tr> <td style="width: 80%;">Disbursements of the guardian's personal disbursements, credit or balance on hand from her account</td> <td style="width: 10%;">Total Disbursements</td> <td style="width: 10%;">GCR</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>	Disbursements of the guardian's personal disbursements, credit or balance on hand from her account	Total Disbursements	GCR					
Disbursements of the guardian's personal disbursements, credit or balance on hand from her account	Total Disbursements	GCR						
TOTAL FEES (sum of items A, B, and C) above _____		Total Fee GCR						
Attach Application Form 730-000-0000-0000								

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The guardian of the estate has an obligation to follow the orders of the Probate Court and timely perform the responsibilities of guardian. The Court has the authority to reduce or deny guardian fees and attorney fees if a guardian does not file all documents on time.

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**HISTORY: (Amended, Effective 4-3-06; 3-1-11(Effective for applications filed on or after March 1, 2011))**

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**PROBATE COURT OF CUYAHOGA COUNTY, OHIO**  
**ANTHONY J. RUSSO, PRESIDING JUDGE**  
**LAURA J. GALLAGHER, JUDGE**

GUARDIANSHIP OF \_\_\_\_\_

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

**APPLICATION FOR APPOINTMENT OF GUARDIAN  
OF ALLEGED INCOMPETENT**  
[R.C. 2111.03]

Applicant represents to the Court that \_\_\_\_\_ resides or has a legal settlement at \_\_\_\_\_ in \_\_\_\_\_ County, Ohio and that the prospective ward is incompetent by reason of (R.C. 2111.01(d)) \_\_\_\_\_

The proposed ward's date of birth is \_\_\_\_\_

A Statement of Expert Evaluation is attached. (Form 17.1)

A list of Next of Kin of Proposed Ward is also attached. (Form 15.0)

The whole estate of the prospective ward is estimated as follows:

Personal Property.....\$ \_\_\_\_\_  
Real Estate.....\$ \_\_\_\_\_  
Annual Rents.....\$ \_\_\_\_\_  
Other annual income.....\$ \_\_\_\_\_

Applicant represents that the applicant is not an administrator, executor or other fiduciary of the estate wherein the alleged incompetent is interested.

Applicant offers the attached bond in the amount of \$ \_\_\_\_\_

Applicant further represents that a guardian of the alleged incompetent is necessary in order that  
 the ward  ward's property may be taken proper care of and asks that a guardian be appointed.

TYPE OF GUARDIANSHIP APPLIED FOR IS [check the applicable boxes]

non-limited       limited       person and estate       estate only       person only

If limited guardianship is applied for, the limited powers requested are \_\_\_\_\_

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

The time period requested is  indefinite  definite to \_\_\_\_\_

Applicant's relationship to alleged incompetent is \_\_\_\_\_

The Applicant has (not) been charged with or convicted of a crime involving theft, physical violence, or sexual, alcohol or substance abuse except as follows (if applicable, state date and place of each charge or each conviction.)

The Applicant represents that a guardian has been nominated in a writing pursuant to R.C. 1337.09(D) or R.C. 2111.121. The nominated person is \_\_\_\_\_

The nominated person's contact information is listed on Form 15.0 (Next of Kin).

A copy of the document which nominates the guardian is attached.

The Applicant represents that the proposed ward had military service.

Military I.D.: \_\_\_\_\_

Branch of service: \_\_\_\_\_

Dates of service: \_\_\_\_\_

Applicant represents that the address provided is the applicant's permanent address and acknowledges the requirement that the court be notified of any change of address. Removal may result from a failure to comply with this requirement.

\_\_\_\_\_  
Attorney for Applicant

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Age

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Permanent Address

\_\_\_\_\_  
Telephone Number (include area code)

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Attorney Registration No.

\_\_\_\_\_  
Telephone Number (include area code)



**PROBATE COURT OF CUYAHOGA COUNTY, OHIO**

ANTHONY J. RUSSO Presiding Judge

LAURA J. GALLAGHER, Judge

IN THE MATTER OF THE GUARDIANSHIP OF \_\_\_\_\_

CASE NUMBER \_\_\_\_\_

**NEXT OF KIN OF PROPOSED WARD**

(R.C. 2111.04)

(NOTE: Specify age and birthdate of each minor under 16 on the line containing the minor's name. List the name and address of the minor's parent, guardian, or custodian on the name and address line following the minor's address.)

Service Waived	Name	Relationship	Birthdate of Minor
<input type="checkbox"/>	1. Name _____ Address _____ Zip _____	_____	_____
<input type="checkbox"/>	2. Name _____ Address _____ Zip _____	_____	_____
<input type="checkbox"/>	3. Name _____ Address _____ Zip _____	_____	_____
<input type="checkbox"/>	4. Name _____ Address _____ Zip _____	_____	_____
<input type="checkbox"/>	5. Name _____ Address _____ Zip _____	_____	_____
<input type="checkbox"/>	6. Name _____ Address _____ Zip _____	_____	_____
<input type="checkbox"/>	7. Name _____ Address _____ Zip _____	_____	_____
<input type="checkbox"/>	8. Name _____ Address _____ Zip _____	_____	_____
<input type="checkbox"/>	9. Name _____ Address _____ Zip _____	_____	_____
<input type="checkbox"/>	10. Name _____ Address _____ Zip _____	_____	_____

\_\_\_\_\_ Date

\_\_\_\_\_ Applicant

## WAIVER OF NOTICE AND CONSENT

We, the undersigned, do each of us hereby waive the issuing and service of notice, and voluntarily enter our appearance herein.

We do hereby consent to the appointment of \_\_\_\_\_  
or some suitable person as guardian of \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**PROBATE COURT OF CUYAHOGA COUNTY, OHIO**

ANTHONY J. RUSSO Presiding Judge

LAURA J. GALLAGHER, Judge

**IN THE MATTER OF THE GUARDIANSHIP OF** \_\_\_\_\_

**CASE NUMBER** \_\_\_\_\_

**STATEMENT OF EXPERT EVALUATION**

[Sup. R. 66 & R.C. 2111.49]

Definition of Incompetent (R.C. 2111.01(D)): "Incompetent" means any person who is so mentally impaired as a result of a physical or mental illness or disability, or mental retardation, or as a result of chronic substance abuse, that the person is incapable of taking proper care of the person's self or property or fails to provide for the person's family or other persons for whom the person is charged by law to provide, or any person confined to a correctional institution within this State."

The Statement of Evaluation does not declare the individual competent or incompetent, but is evidence to be considered by the Court. The fee for completing the evaluation **WILL NOT** be paid by the Probate Court. Each evaluator should secure payment from the Applicant/Guardian.

1. This Statement of Expert Evaluation is to be filed with or attached to:

- A. Guardianship Application. Completed by  Licensed Physician or  Licensed Clinical Psychologist prior to the filing and attached to the application.
- B. Guardian's Report: Completed by  Licensed Physician  Licensed Clinical Psychologist  Licensed Independent Social Worker  Licensed Professional Clinical Counselor or  Mental Retardation Team  
The evaluation or examination shall be completed within three months prior to the date of the Report. R.C. 2111.49
- C. Application for Emergency Guardian:  of the person: a Licensed Physician shall complete the Supplement for Emergency Guardian, Form 17.1 A with specificity indicating the emergency, and why immediate action is required to prevent significant injury to the person. The Supplement shall be signed, dated, and attached as part of this completed Statement.

- 2. Statement completed by:  
Name & Title/Profession: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
Business Telephone Number: \_\_\_\_\_
- 3. Date(s) of evaluation: \_\_\_\_\_  
Place(s) of evaluation: \_\_\_\_\_  
Amount of time spent of evaluation: \_\_\_\_\_  
Length of time the individual has been your patient: \_\_\_\_\_

4. Is the individual presently under medication?  Yes  No If yes, what is the medication, dosage, and purpose? \_\_\_\_\_

Are there any signs of physical and/or mental impairments caused by the medications themselves? \_\_\_\_\_

5. Is the individual mentally impaired?  Yes  No If yes, indicate the diagnosis below:

Mental Retardation/Developmental Disabilities:

Profound

Severe

Moderate

Mild

Mental Illness: Type and Severity \_\_\_\_\_

Substance Abuse: Description \_\_\_\_\_

Dementia: Description \_\_\_\_\_

Other: Description \_\_\_\_\_

Please provide additional comments and test scores if available.  
(Continue comments on page 4): \_\_\_\_\_

6. During the examination did you notice an impairment of the individual's:

- |                                    |                              |                             |                                  |
|------------------------------------|------------------------------|-----------------------------|----------------------------------|
| a) Orientation                     | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Unknown |
| b) Speech                          | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Unknown |
| c) Motor Behavior                  | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Unknown |
| d) Thought Process                 | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Unknown |
| e) Affect                          | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Unknown |
| f) Memory                          | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Unknown |
| g) Concentration and Comprehension | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Unknown |
| h) Judgment                        | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Unknown |

7. Please describe any impairments identified in question six. (Continue comments on page 4)

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

- 8. Is the individual physically impaired?  Yes  No If yes: Description \_\_\_\_\_
- 9. Are there any special characteristics of the individual which should be considered in evaluating the individual for guardianship?:  Yes  No If yes: Explain \_\_\_\_\_
- 10. Are there any indications of abuse, neglect or exploitation of the individual?  
 Yes  No If yes: Explain \_\_\_\_\_
- 11. Do you believe the individual is capable of caring for the individual's activities of daily living or making decisions concerning medical treatments, living arrangements and diet?  
 Yes  No If no: Explain \_\_\_\_\_
- 12. Do you believe this individual is capable of managing the individual's finances and property?  
 Yes  No If no: Explain \_\_\_\_\_
- 13. Prognosis:
  - A. Is the condition stabilized?  Yes  No
  - B. Is the condition reversible?  Yes  No
- 14. In my opinion a guardianship should be:
  - Established/Continued
  - Denied/Terminated

I certify that I have evaluated the individual on \_\_\_\_\_, 20\_\_\_\_\_.

Date: \_\_\_\_\_ Signature of Evaluator \_\_\_\_\_

**GUARDIAN'S REPORT ADDENDUM**  
(Not to be used with initial Application)

It is my opinion, based upon a reasonable degree of medical or psychological certainty, that the mental capacity of this ward will not improve.

Date \_\_\_\_\_ Signature - Licensed Physician/Clinical Psychologist \_\_\_\_\_



**PROBATE COURT OF CUYAHOGA COUNTY, OHIO**

ANTHONY J. RUSSO Presiding Judge

LAURA J. GALLAGHER, Judge

IN THE MATTER OF THE GUARDIANSHIP OF \_\_\_\_\_

CASE NUMBER \_\_\_\_\_

**SUPPLEMENT FOR EMERGENCY GUARDIAN OR PERSON**

[ R.C. 2111.49]

This Supplement must be completed when there is a request for Emergency Guardianship. The following questions must be answered with specificity and item 1.C, Page 1 of the Statement of Expert Evaluation, Form 17.1 must be checked.

A. Does the individual have a durable health care power of attorney? \_\_\_\_\_ If yes, why is not being honored?

\_\_\_\_\_

B. Exact nature of Emergency: \_\_\_\_\_

\_\_\_\_\_

C. Length of time emergency has existed, and why? \_\_\_\_\_

\_\_\_\_\_

D. Specific action required to prevent significant injury to the person: \_\_\_\_\_

\_\_\_\_\_

E. Ability of the alleged incompetent to receive notice and give consent: \_\_\_\_\_

\_\_\_\_\_

F. Medical prognosis in detail if immediate action, within 24 hours, is not taken: \_\_\_\_\_

\_\_\_\_\_

G. Additional statements regarding condition, family, support services, etc.: \_\_\_\_\_

\_\_\_\_\_

note: Any above answers may be supplemented by attachments.

\_\_\_\_\_  
Date and Time of Evaluation

\_\_\_\_\_  
Licensed Physician

\_\_\_\_\_  
Date of Report

**PROBATE COURT OF CUYAHOGA COUNTY, OHIO**

ANTHONY J. RUSSO Presiding Judge

LAURA J. GALLAGHER, Judge

IN THE MATTER OF \_\_\_\_\_

CASE NUMBER \_\_\_\_\_

**FIDUCIARY'S ACCEPTANCE  
GUARDIAN  
[R.C. 2111.14]**

I, the undersigned, hereby accept the duties which are required of me by law, and such additional duties as are ordered by the Court having jurisdiction.

**AS GUARDIAN OF THE ESTATE, I WILL:**

1. Make and file an inventory of the real and personal estate of the ward within 3 months after my appointment.
2. Deposit funds which come into my hands in a lawful depository located within this state.
3. Invest surplus funds in a lawful manner.
4. Make and file an account biennially, or as directed by the Court.
5. File a final account within 30 days after the guardianship is terminated.
6. Inventory any safe deposit box of the ward.
7. Preserve any and all Wills of the Ward as directed by the Court
8. Expend funds only upon written approval of the Court.
9. Make and file a guardian's report biennially, or as directed by the Court.

**AS GUARDIAN OF THE PERSON, I WILL:**

1. Protect and control the person of my ward when necessary and make all decisions for the ward based upon the best interest of the ward.
2. Provide suitable maintenance for my ward when necessary.
3. Provide such maintenance and education for my ward as the amount of his estate justifies if the ward is a minor and has no father or mother, or has a father or mother who fails to maintain or educate him/her.
4. Make and file a guardian's report biennially, or as directed by the Court.
5. Obey all orders and judgments of the Court pertaining to the guardianship

**If I change my address or the ward's address, I shall immediately notify Probate Court in writing.** I acknowledge that I am subject to removal as such fiduciary if I fail to perform such duties. I also acknowledge that I am subject to possible penalties for improper conversion of the property which I hold as fiduciary.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Fiduciary



**PROBATE COURT OF CUYAHOGA COUNTY, OHIO**

Anthony J. Russo, Presiding Judge

Laura J. Gallagher, Judge

IN THE MATTER OF \_\_\_\_\_

CASE NUMBER \_\_\_\_\_

**GUARDIAN'S BOND**

Amount of bond \$ \_\_\_\_\_

The undersigned principal, and sureties if any, are obligated to the State of Ohio in the above amount, for payment of which we bind ourselves and our successors, heirs, executors, and administrators, jointly and severally.

The principal has accepted in writing the duties of fiduciary in ward's estate, including those imposed by law and such additional duties as may be required by the Court.

This obligation is void if the principal performs such duties as required.

This obligation remains in force if the principal fails to perform such duties, or performs them tardily, negligently, or improperly, or if the principal misuses or misappropriates estate assets or improperly converts them to his own use or the use of another.

(Check if personal sureties are involved.)  The sureties certify that each of them owns real estate in this county, with a reasonable net value as stated below.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Principal

\_\_\_\_\_  
Surety  
by  
Attorney in Fact

\_\_\_\_\_  
Surety  
by  
Attorney in Fact

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

Net Value of real estate owned in this county

Net Value of real estate owned in this county

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Attorney \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Registration Number \_\_\_\_\_

**PROBATE COURT OF CUYAHOGA COUNTY, OHIO**

Anthony J. Russo, Presiding Judge

Laura J. Gallagher, Judge

**IN THE MATTER OF THE GUARDIANSHIP OF** \_\_\_\_\_

**CASE NUMBER** \_\_\_\_\_

**Guardian's inventory**

(R.C. 2114.14 (A))

of the real and personal estate of the ward \_ with its  
value and the value of the yearly rent of the real estate

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

List any safety deposit box and date and location of any Will..... \$ .....

**RECAPITULATION**

Total Value of Personal Estate .....	\$ _____
Total Value of Real Estate .....	\$ _____
Yearly rent of Real Estate .....	\$ _____
Other annual income .....	\$ _____
Total .....	\$ _____

\_\_\_\_\_  
Guardian

**RECAPITULATION**

Total Receipts \_\_\_\_\_ \$ \_\_\_\_\_  
Total Disbursements \_\_\_\_\_ \$ \_\_\_\_\_  
Balance Remaining \_\_\_\_\_ \$ \_\_\_\_\_

**ITEMIZED STATEMENT OF ALL FUNDS, ASSETS AND INVESTMENTS**

ITEM

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_  
Attorney

\_\_\_\_\_  
Guardian

\_\_\_\_\_  
Attorney Registration No.

\_\_\_\_\_  
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 CUYAHOGA COUNTY, OHIO**

Anthony J. Russo, Presiding Judge

Laura J. Gallagher, Judge

IN THE MATTER OF THE GUARDIANSHIP OF \_\_\_\_\_

CASE NUMBER \_\_\_\_\_

**APPLICATION TO RELEASE FUNDS  
TO GUARDIAN**

Now comes the guardian of the above-named ward and makes application for authority to secure the release of the following funds of the ward.

The applicant further states that it is for the best interest of the ward that this authority be granted.

\_\_\_\_\_  
Guardian

**ORDER AUTHORIZING RELEASE OF FUNDS**

This \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_, this cause came on to be heard upon the application of the guardian of the above-named ward and the evidence, and the Court being fully advised in the premises, hereby authorizes the release of the above funds to the guardian.

\_\_\_\_\_  
Probate Judge

**PROBATE COURT OF CUYAHOGA COUNTY, OHIO**

Anthony J. Russo, Presiding Judge

Laura J. Gallagher, Judge

**IN THE MATTER OF THE GUARDIANSHIP OF** \_\_\_\_\_

**CASE NUMBER** \_\_\_\_\_

**APPLICATION FOR AUTHORITY TO EXPEND FUNDS**

Now comes the undersigned, guardian of the estate of the above-named  minor  incompetent ward, and makes application for authority to expend funds for the best interest of the ward as follows: [State amount requested, nature of expenditure, and the frequency and duration of authority requested. Attach additional explanation, documentation, or estimates as needed.]

\_\_\_\_\_  
Guardian

**ORDER AUTHORIZING EXPENDITURE OF FUNDS**

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, this cause came on to be heard upon the application of the guardian of the estate of the above-named ward and the evidence, and the Court being fully advised in the premises, hereby authorizes the guardian to expend funds as set forth in the Application.

\_\_\_\_\_  
Probate Judge

**PROBATE COURT OF CUYAHOGA COUNTY, OHIO**

Anthony J. Russo, Presiding Judge

Laura J. Gallagher, Judge

**IN THE MATTER OF THE GUARDIANSHIP OF** \_\_\_\_\_

**CASE NUMBER** \_\_\_\_\_

**GUARDIAN'S REPORT**

[R.C. 2111.49]

NOTE: If allotted space is inadequate to respond, write "See Exhibit" in the space and add appropriate exhibit letter sequence, then attach exhibit containing information requested for that space.

1. This is the (check one):  1st,  2nd,  3rd,  4th,  5th,  6th, or \_\_\_\_\_, Guardian's Report  
2. Ward's present address: \_\_\_\_\_

City \_\_\_\_\_

Zip \_\_\_\_\_ Telephone ( \_\_\_\_\_ ) \_\_\_\_\_

3. Ward's living arrangements at the above address are best described as:
- a. His or her own apartment or home (includes assisted living facilities).
  - b. Private home or apartment of:
    - (1) the ward's guardian.
    - (2) a relative of the ward, whose name is \_\_\_\_\_  
and relationship is \_\_\_\_\_
    - (3) a non-relative whose name is \_\_\_\_\_
  - c. A foster, group or boarding home.
  - d. A nursing home.
  - e. A medical facility or state institution.
  - f. Other (describe) \_\_\_\_\_

- g. If c, d, e, or f is checked, complete the following:  
(1) The name of the home, facility or institution \_\_\_\_\_

- (2) The name of an individual at the home, facility or institution who has knowledge and is authorized to give information to the Court about the ward.  
Name \_\_\_\_\_

Telephone Number ( \_\_\_\_\_ ) \_\_\_\_\_

4. The ward will be at the address given in item 2:
- a. Indefinitely.
  - b. Temporarily. The new address and telephone number is:
    - (1) Unknown. I will provide this information when known.
    - (2) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Telephone ( \_\_\_\_\_ ) \_\_\_\_\_

5. Guardian's contact with the ward:
- a. Approximate number of times the guardian had contact with the ward during the period covered by this report: \_\_\_\_\_
  - b. The nature of those contacts (phone, personal, or other): \_\_\_\_\_  
\_\_\_\_\_
  - c. Date the ward was last seen by the guardian: \_\_\_\_\_  
Briefly describe any changes. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. The care given the ward is  Adequate  Not adequate  
If "not adequate" is checked, explain. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. The guardianship should be  Continued  Not Continued  
If "Not Continued" is checked, explain. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. During the period covered by this report, the ward  has  has not been  
seen by a physician. If the ward has been seen, the last date was \_\_\_\_\_  
and for the purpose of \_\_\_\_\_

Attached is a statement by a licensed physician, a licensed clinical psychologist, a licensed social worker, or a mental retardation team, that has evaluated or examined the ward within three months prior to the date of this report regarding the need for continuing the guardianship. [R.C. 2111.49(A)(1)(i)] (Form 17.1)

If an attorney has been consulted on this report

_____ Attorney's Signature  _____ (Type or Print Attorney's Name)  _____ (Street)  _____ (City, State, Zip Code)  _____ (Telephone Number - include area code)	_____ Date  _____ Guardian's Signature  _____ (Type or Print Guardian's Name)  _____ (Street)  _____ (City, State, Zip Code)  _____ (Telephone Number - include area code)
---	--

PROBATE COURT OF CUYAHOGA COUNTY, OHIO

Anthony J. Russo, Presiding Judge

Laura J. Gallagher, Judge

IN THE MATTER OF THE GUARDIANSHIP OF \_\_\_\_\_

CASE NUMBER \_\_\_\_\_

COMPUTATION OF GUARDIAN FEES

(Local Rule 73.1)

GUARDIANSHIP ESTATES

This Account Covers:  One Year OR  Two Years

I. Income received, not including a conversion of assets, covered in this account.

10% of the gross rental income from real estate	Total Income:	<u>FEE:</u>
	_____ x.10	0.00
3% of the remaining income	_____ x.03	_____

II. Expenditures, not including any guardian's fees or distributions, covered in this account.

3% of the total expenditures where the total expenditures are LESS THAN \$200,000.00	Total Expenditures:	<u>FEE:</u>
	_____ x.03	_____

III. Fair value of the guardianship principal (inventory value or balance on hand from last account).

\$2.50 per thousand of the total principal x _____ yr (s)	Total Principal:	<u>FEE:</u>
	_____	_____

TOTAL FEES allowable in computations I, II and III above ..... =  
(The Guardian may charge a minimum fee of \$500.00 per year)

TOTAL FEE:
0.00



**PROBATE COURT OF CUYAHOGA COUNTY, OHIO**

Anthony J. Russo, Presiding Judge

Laura J. Gallagher, Judge

IN THE MATTER OF THE GUARDIANSHIP OF \_\_\_\_\_

CASE NUMBER \_\_\_\_\_

**COMPUTATION OF GUARDIAN FEES**

**VETERAN GUARDIANSHIP ESTATES**

This Account Covers:  One Year OR  Two Years

**I. V.A. Income received this accounting period.**

5% of the total V.A. income	Total VA Income: _____ x .05	<u>FEE:</u> 0.00
-----------------------------	---------------------------------	---------------------

**II. All other income received, not including a conversion of assets.**

3% of all other income	Total Other Income: _____ x .03	<u>FEE:</u> 0.00
------------------------	------------------------------------	---------------------

**III. Expenditures, after deducting the V.A. income**

3% of (the total expenditures less the total V.A. income)	Expenditures: _____ x .03	<u>FEE:</u> 0.00
---	------------------------------	---------------------

**IV. Fair value of the guardianship principal (inventory value or balance on hand from last account).**

\$2.50 per thousand of the total principal x _____ yr (s)	Total Principal: _____	<u>FEE:</u> _____
---	---------------------------	----------------------

TOTAL FEES allowable in computations I, II, III and IV above ..... =

<b>TOTAL FEE:</b>  0.00
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**PROBATE COURT OF CUYAHOGA COUNTY**

Anthony J. Russo, Presiding Judge

Laura J. Gallagher, Judge

**IN THE MATTER OF THE GUARDIANSHIP OF** \_\_\_\_\_

**CASE NUMBER:** \_\_\_\_\_

**APPLICATION TO PAY OR DELIVER ESTATE OF AN INCOMPETENT ADULT WITHOUT APPOINTMENT OF A GUARDIAN OF ESTATE**

Now comes the undersigned and represents that \_\_ he is Guardian of the Person of \_\_\_\_\_, aged \_\_\_\_\_ years, who resides at \_\_\_\_\_, who was on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, adjudge an incompetent person by the probate Court of Cuyahoga County. The Guardian of the Person further represents that the above named person is the owner of, or entitled to receive property not exceeding in value the sum of \$25,000.00, described as follows: \_\_\_\_\_

The Guardian of the Person further represents that the above listed property constitutes the entire estate of the person and that \_\_ he has no legally appointed Guardian of Estate.

The Guardian of the Person further represents that the funds or property received will be deposited or used for the benefit of the ward as follows:

\_\_\_\_\_ Funds to be deposited and held in a depository authorized to receive fiduciary funds; Verification of Receipt and Deposit, Form 22.3 shall be filed with the Court within thirty days.

\_\_\_\_\_ Funds to be released to the Guardian of the Person and expended for the benefit of the ward as follows:

\_\_\_\_\_  
Attorney for Guardian

\_\_\_\_\_  
Guardian of Person

\_\_\_\_\_  
Typed or printed name

\_\_\_\_\_  
Typed or printed name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Telephone Number (include area code)

\_\_\_\_\_  
Telephone Number (include area code)

\_\_\_\_\_  
Registration Number