

STATEMENT OF ASSETS, LIABILITIES AND PERSONAL EARNINGS

Name _____ Case No. _____

Address _____

Telephone No. _____ Social Security No. _____

Place of Employment _____

Address of Employer _____

Weekly INcome -Net \$ _____ Other Income _____

ASSETS

Real Estate: Location of Property _____

Value Of Property \$ _____ Amount owing \$ _____

Checking Account: Name of Bank _____

Savings Account: Name of Bank _____

Other Assets: _____

Vehicles: _____

Liabilities:

Housing \$ _____ per month

Utilities \$ _____ per month

Groceries \$ _____ per month

Other Debts: _____

Proposed Payment Schedule:

I would like to pay \$ _____ per (week, every two weeks, month)
on this judgment, starting _____

Signature of Defendant _____

Before me, a person duly authorized to administer an oath, personally appeared the
above named affiant who, being duly sworn, stated that the foregoing statements
were true.

In testimony whereof, I hereunto set my hand and affix my official seal this
_____ day of _____, _____, at Bellefontaine OH

Notary, Dep. Clk.