

**PROBATE COURT OF ALLEN COUNTY, OHIO  
TODD E. KOHLRIESER, JUDGE**

**GUARDIAN WITH TEN OR MORE WARDS  
ANNUAL FEE SCHEDULE**

[Sup.R. 66.05(B)(3)]

I, the undersigned, currently serve at the Guardian to ten or more wards. I hereby submit to the Court the following fee schedule indicating guardianship service fees, legal fees, and other direct service fees incurred from serving as Guardian for said wards.

Description of Fee or Expense	Fee	Fee
Guardianship Service Fees		
Legal Fees		
Other Direct Service Fees		

[Attach additional pages if necessary.]

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

\_\_\_\_\_  
Street

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

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

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

\_\_\_\_\_  
Guardian's Printed Name

\_\_\_\_\_  
Guardian's Signature

\_\_\_\_\_  
Street

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

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