

**IN THE COURT OF COMMON PLEAS
DIVISION OF DOMESTIC RELATIONS
HAMILTON COUNTY, OHIO**

Case No. _____

Plaintiff/Petitioner 1

Judge _____

vs./and

Magistrate _____

Defendant/Petitioner 2

Instructions: This form must be filed pursuant to Hamilton County, Court of Domestic Relations Local Rules 1.10 and 1.26. List all of YOUR property and debts, your SPOUSE's property and debts, and any JOINT property and 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 you need more space, add additional pages.**

AFFIDAVIT OF PROPERTY AND DEBT

AFFIDAVIT OF _____ **DATE COMPLETED** _____
(Print Name)

1. REAL ESTATE INTERESTS (house, land, mortgage, timeshares, etc.)

| Property Address/ Date purchased | Titled To | Current Fair Market Value | Name(s) on Mortgage | Mortgage Balance | Equity |
|-------------------------------------|-----------|------------------------------|------------------------|---------------------|--------|
| | | \$ | | \$ | \$ |
| | | \$ | | \$ | \$ |
| | | \$ | | \$ | \$ |

2. AUTOMOBILES (cars, trucks, motorcycles, boats, motor homes, trailers, ATV's, snow mobiles, jet skis, etc.)

| Description of Vehicle (include type, year, make, model, color) | VIN # | Titled To | Purchase Date | Loan Balance | Current Market Value |
|---|-------|-----------|------------------|-----------------|-------------------------|
| | | | | \$ | \$ |
| | | | | \$ | \$ |

| | | | | | |
|--|--|--|--|----|----|
| | | | | \$ | \$ |
| | | | | \$ | \$ |
| | | | | \$ | \$ |

3. EMPLOYMENT (list all sources of income and ATTACH PAYSTUB for you and your spouse)

| Employer | Address of Employer | Date of Hire | Current Salary |
|----------|---------------------|--------------|----------------|
| | | | \$ |
| | | | \$ |
| | | | \$ |

4. BANK/FINANCIAL INSTITUTIONS (include checking, savings, CDs, POD accounts, money markets, etc.)

| Name of Financial Institution | Type of Account | Last 4 #'s of Acct. No. | Name(s) on Account | Current Balance |
|-------------------------------|-----------------|-------------------------|--------------------|-----------------|
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |

5. PENSIONS/RETIREMENT PLANS (include profit-sharing, IRAs, 401(k) plans, savings plans, etc.)

| Name of Employer/Plan | Type of Plan | Last 4 #'s of Acct. No. | Name(s) on Account | Current Balance |
|-----------------------|--------------|-------------------------|--------------------|-----------------|
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |

6. PUBLICLY HELD STOCKS, BONDS, SECURITIES & MUTUAL FUNDS

| Name of Company or Organization | Type of Account | # of Shares | Last 4 #'s of Acct. No. | Name(s) on Account | Current Balance |
|---------------------------------|-----------------|-------------|-------------------------|--------------------|-----------------|
| | | | | | \$ |
| | | | | | \$ |

7. LIFE INSURANCE

| Life Insurance Company Name | Insured Life | Titled To | Loan Balance | Current Cash Value |
|-----------------------------|--------------|-----------|--------------|--------------------|
| | | | \$ | \$ |
| | | | \$ | \$ |
| | | | \$ | \$ |
| | | | \$ | \$ |

8. BUSINESS INTERESTS/CLOSELY HELD STOCKS

| Name of Company | Type of Ownership | Date Business Started | Type of Business | Name(s) on Business | Current Market Value |
|-----------------|-------------------|-----------------------|------------------|---------------------|----------------------|
| | | | | | \$ |
| | | | | | \$ |
| | | | | | \$ |
| | | | | | \$ |

9. OTHER ITEMS OF VALUE WITH A VALUE GREATER THAN \$500.00 (furniture, appliances, jewelry, art, tools, firearms, collectibles, sky/air/flight miles, credit card reward points, cash app accounts, etc.)

| Item Description | Date Purchased/Acquired | Amount Owed (if any) | Name(s) on Account (if applicable) | Current Market Value |
|------------------|-------------------------|----------------------|------------------------------------|----------------------|
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |

10. SAFE DEPOSIT BOX(ES)

| Name of Financial Institution and Location | Description of Contents | Name(s) on Account | Current Market Value |
|--|-------------------------|--------------------|----------------------|
| | | | \$ |

11. EXPECTED OR RECEIVED INHERITANCES OF THE PARTIES

| Name of Recipient | Name of Donor | Date Received or Expected to Receive | Any Portion Commingled with Marital Funds | Value of Fund/Inheritance |
|-------------------|---------------|--------------------------------------|---|---------------------------|
| | | | | \$ |
| | | | | \$ |

12. OTHER SEPARATE PROPERTY CLAIMS (includes, but not limited to, property owned before marriage and/or gifts or inheritances to only one spouse)

| Item Description | Date Purchased – Acquired – Gifted | Name(s) on Account or Title | Reason for Separate Property Claim | Current Market Value |
|------------------|------------------------------------|-----------------------------|------------------------------------|----------------------|
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |

13. DEBTS

List ALL OF YOUR DEBTS, your spouse’s debts, and any joint debts. Do not leave any space blank. For each item, if none, put “NONE.” If you do not know exact figures for any debt, give your best estimate, and put “EST.”

SECURED DEBTS (mortgages, car loans, furniture/appliance rent-to-own, etc.)

| Name of Creditor | Type of Account | Last 4 #'s of Acct. No. | Name(s) on Account | Current Balance Due |
|------------------|-----------------|-------------------------|--------------------|---------------------|
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |

UNSECURED DEBTS (credit cards, medical bills, overdue utilities, personal loans, etc.)

| Name of Creditor | Type of Account | Last 4 #'s of Acct. No. | Name(s) on Account | Current Balance Due |
|------------------|-----------------|-------------------------|--------------------|---------------------|
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |

