COURT OF COMMON PLEAS DIVISION OF DOMESTIC RELATIONS HAMILTON COUNTY, OHIO

Plaintiff / Petitioner		Date:		
-VS/2	ınd-			
Defendant / Petitioner		CSEA NO.		
			Property State	ement
			Troperty State	
If the Court finds that the ischeduling conference, the Court attorney fees and costs, and a di and time indicated on the Notice	vision of property as are neo of Hearing.	ders including all paren cessary and appropriate	ting orders, child so to the resolution of	upport, spousal support f this matter on the date
	INST	RUCTIONS		
Court. Therefore, every asset and I Pursuant to O.R.C. §3105.1′ date of marriage to the date of final For purpose of this property sta (date of marriage).	71 (A) (2) "during the marriaghearing "unless it would be interest "during the marriage"	ge" for purposes of ident nequitable to use such date is defined as the following	g dates:	
(other) to				
filing complaint)	· · · · · · · · · · · · · · · · · · ·			
specify)				
Date of Valuation used for	or purpose of this statement			
1: REAL ESTATE Address/Title	Appraisal/ Market Value	Marital/Separate Mixed	Source of Valuation	Equity
Comment:				
2: HOUSEHOLD GOODS (Pleas an individual award. If all househo			well as marital prope	rty for which you request
Comment:				

Description/Title	Year & Make	Appraisal or Current Market Price		tal/Separate d	Source of Valuation	E	quity
Comment:							
4: FUNDS ON DEP	OSIT					Mowitol/S	lama wa 4 a
Description/Title		Type of Acco	unt 	Number		Marital/S Mixed	ерагасе
Comment:							
5: STOCKS AND B	ONDS		Appra	ical			
Location/Title		Description/ Number	or Cui		urce of Valuat		arital/Separate ixed
Comment:6: RETIREMENT :							
Name of Plan/Empl	oyer	Year of Employment	Years in	n Plan Ves	sted? Amo		Aarital/Separate Aixed
H:							
W:							
Comment:							
7: TAX REFUNDS					Date of		Marital/Separate
Year		Source	Present	Value	Receipt		Mixed
H:							
W:							
J:							
How many tax exem	ptions are you pres	ently claiming, inclu	ding yourself?				
8: LIFE INSURAN	CE	<u> </u>		<u> </u>	Face	Cash	Marital/Separate
Name of Company	Policy N	No. Insured	Owner	Beneficiary	Amount	Value	Mixed
Comment:							
9: EXPECTANCIE	S AND INHERIT	ANCES OF THE P	ARTIES		Source of	Mar	rital/Separate
Location/Titled		Value of Fund	Date of	Valuation	Valuation	Mix	
Comment:							

3: AUTOMOBILES

	<u> </u>				
	\$				
		LIABILITIES			
Name of Creditor	Encumbrance	Who is Liable: Plaintiff/Defendant	Bal. Due	As of	Marital/Sep/ Mixed
:					
::					
3:					
4:					
5:					
ó:					
<i>!</i> :					
3:					
Comment:					
Гotal Asset Value minus Total Liabi	llities equals Total Equi	ty			
STATE OF OHIO }					
COUNTY OF HAMILTON }	S.S.				
		y cautioned and sworn, de	eposes and states	that the facts	set forth in the
oregoing Property Statement are tru	e as they verily believe				
Sworn to and subscribed in	n my presence this		lav of		
20					
		Nota	ry Public		
	PRO	OOF OF SERVICE			
I hereby certify that a copy		•	-		
20, been served by			_ upon		
Service has been requested through	the Clerk of Courts.				
			ntiff / Dafandant		

Plaintiff / Defendant Attorney for Plaintiff / Defendant