

PROBATE COURT OF PORTAGE COUNTY, OHIO
PATRICIA J. SMITH, JUDGE

ADOPTION OF _____
(Name after adoption)

CASE NO. _____

PETITIONER'S ACCOUNT
[R.C. 3107.055]

- ☐ **PRELIMINARY ESTIMATE ACCOUNTING** ☐ **FINAL ACCOUNTING**
(To be filed not later than date petition filed) To be filed not later than 10 days prior to date of final hearing)

This accounting specifies all disbursements of anything of value the petitioner, a person on the petitioner's behalf, and the agency or attorney made and has agreed to make in connection with the minor's permanent surrender under division (B) of Section 5103.15 of the Revised Code, placement under Section 5103.16 of the Revised Code, and adoption under Chapter 3107. (Attach extra sheets if necessary).

| DATE | NAME AND ADDRESS | DISBURSMENTS MADE OR AGREED TO BE MADE | ACTUAL COSTS |
|------|--|--|-----------------|
| | PHYSICIAN(S) ***** | | |
| | | | |
| | HOSPITAL/MEDICAL FACILITY ***** | | |
| | | | |
| | ATTORNEY FEES ***** | | |
| | | | |
| | ACTUAL COSTS TO ATTORNEY ***** | | |
| | | | |
| | AGENCY ***** | | |
| | | | |
| | ACTUAL COSTS TO AGENCY ***** | | |
| | | | |
| | MAINTENANCE/5103.15 MED CARE* | | |
| | | | |
| | FOSTER CARE ***** | | |
| | | | |
| | GUARDIAN AD LITEM ***** | | |
| | | | |
| | COURT COSTS ***** | | |
| | TOTAL (including any continuation pages) | 0.00 | 0.00 |

ADOPTION OF _____
(Name after adoption)

CASE NO. _____

[R.C. 3107.10]
(CONTINUATION PAGE)

[illegible]

CASE NO. _____

CERTIFICATION OF PETITIONER'S ACCOUNT

The undersigned certifies this _____ day of _____ 20 ____ that this accounting is true and accurate.

Attorney or Agency

Typed or Printed Name

Address

City State Zip code

Phone Number (include area code)

The petitioner has reviewed this accounting and attests to its accuracy this _____ day of _____ 20____.

Petitioner

Petitioner

