

IN THE ASHLAND MUNICIPAL COURT, ASHLAND, OHIO
SMALL CLAIMS DIVISION

Name _____

Plaintiff(s)/Judgment Creditor(s)

Case No. _____

-vs-

JUDGMENT DEBTOR DISCLOSURE FORM

Name _____

Defendant(s)/Judgment Debtor(s)

Judgment Date: _____

Unpaid Balance: \$ _____

TO _____, THE JUDGMENT DEBTOR:
Judgment Debtor Name

Pursuant to the enclosed Order, please provide the information requested below (attach additional pages, if necessary).

YOUR FAILURE TO COMPLETE THIS FORM AND RETURN IT TO THE ASHLAND MUNICIPAL COURT, 1209 EAST MAIN STREET, ASHLAND, OHIO, 44805, (419) 281-4890, WITHIN ONE (1) WEEK AFTER YOUR RECEIPT OF IT MAY RESULT IN A CITATION FOR CONTEMPT OF COURT. ANY PARTY WHO, WITH NOTICE OF THIS POSSIBLE CONTEMPT CITATION, WILLFULLY FAILS TO COMPLY WITH THE ORDER OF THIS COURT, MAY BE CITED FOR CONTEMPT OF COURT, AS PROVIDED IN CHAPTER 2705 OF THE OHIO REVISED CODE. O.R.C. § 1925.13(B).

INFORMATION ABOUT YOU (JUDGMENT DEBTOR)

Your full (first, middle, last) name: _____
Your Social Security No. (last 4 digits): _____
Your current address: _____
Your telephone number: _____

INFORMATION ABOUT YOUR INCOME AND EARNINGS

Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Self-Employed	Name/Address of Employer: _____ Wage/Salary: \$ _____	Name/Address of Employer: _____ Wage/Salary: \$ _____
Do you have other sources of income? <input type="checkbox"/> Yes <input type="checkbox"/> No	Source: _____ Monthly Income: \$ _____	Source: _____ Monthly Income: \$ _____

INFORMATION ABOUT YOUR ASSETS

Do you own any real estate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Address/Location of Property: _____ _____	Address/Location of Property: _____ _____
Do you have any bank or investment/brokerage accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No	Name/Address of Institution: _____ <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Investment Acct. # (last 4 digits): _____ Balance: \$ _____	Name/Address of Institution: _____ <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Investment Acct. # (last 4 digits): _____ Balance: \$ _____
Do you have any motor vehicles? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Car <input type="checkbox"/> Truck <input type="checkbox"/> Boat <input type="checkbox"/> Other Year/Make/Model: _____ VIN: _____	<input type="checkbox"/> Car <input type="checkbox"/> Truck <input type="checkbox"/> Boat <input type="checkbox"/> Other Year/Make/Model: _____ VIN: _____
Do you have other assets (est. value > \$500.00) not listed above? <input type="checkbox"/> Yes <input type="checkbox"/> No	Type of Asset: _____ Address/Location of Asset: _____ Est. Value: \$ _____	Type of Asset: _____ Address/Location of Asset: _____ Est. Value: \$ _____

TURN OVER TO COMPLETE DEBTS/LIABILITIES INFORMATION AND TO SIGN

INFORMATION ABOUT YOUR DEBTS AND LIABILITIES

Do you have a mortgage on any real estate that you own?
 Yes No

Address/Location of Property: _____

 Mortgagee Name: _____
 Monthly Pmt.: \$ _____
 Balance: \$ _____

Address/Location of Property: _____

 Mortgagee Name: _____
 Monthly Pmt.: \$ _____
 Balance: \$ _____

Are there any liens against any real estate that you own?
 Yes No

Nature of Lien: _____

 Unpaid Balance: \$ _____

Nature of Lien: _____

 Unpaid Balance: \$ _____

Do you have any credit cards?
 Yes No

Bank Name: _____
 VISA MasterCard Discover
 Other _____
 Monthly Pmt.: \$ _____
 Balance: \$ _____

Bank Name: _____
 VISA MasterCard Discover
 Other _____
 Monthly Pmt.: \$ _____
 Balance: \$ _____

Do you have any vehicle loans?
 Yes No

Car Truck Boat Other
 Year/Make/Model: _____

 Monthly Pmt.: \$ _____
 Balance: \$ _____

Car Truck Boat Other
 Year/Make/Model: _____

 Monthly Pmt.: \$ _____
 Balance: \$ _____

Do you have any educational loans?
 Yes No

Lender Name: _____
 Repayment deferred? Yes No
 In repayment? Yes No
 Monthly Pmt.: \$ _____
 Balance: \$ _____

Lender Name: _____
 Repayment deferred? Yes No
 In repayment? Yes No
 Monthly Pmt.: \$ _____
 Balance: \$ _____

Do you have any unpaid civil or small claims judgments?
 Yes No

Name/Address of Court: _____

 Case #: _____
 Name/Address of Judgment Creditor: _____

 Judgment Date: _____
 Unpaid Balance: \$ _____

Name/Address of Court: _____

 Case #: _____
 Name/Address of Judgment Creditor: _____

 Judgment Date: _____
 Unpaid Balance: \$ _____

Do you have any debts/liabilities (unpaid balance > \$500.00) not listed above?
 Yes No

Name/Address of Creditor: _____

 Unpaid Balance: \$ _____

Name/Address of Creditor: _____

 Unpaid Balance: \$ _____

Are your wages currently being garnished?
 Yes No

Name/Address of Court: _____

 Case #: _____
 Name/Address of Judgment Creditor: _____

 Start Date: _____
 Unpaid Balance: \$ _____

Name/Address of Court: _____

 Case #: _____
 Name/Address of Judgment Creditor: _____

 Start Date: _____
 Unpaid Balance: \$ _____

_____ Date

_____ Judgment Debtor's Signature(s)

_____ Judgment Debtor's Name (Please Print)