

**IN THE CIRCUIT COURT OF THE STATE OF OREGON
THIRD JUDICIAL DISTRICT
Probate Department**

In the Matter of the Guardianship of: _____)
 _____) Case No. _____
 _____)
 _____) **AFFIDAVIT IN SUPPORT OF**
 _____) **MOTION FOR APPROVAL OF**
 A Protected Person.) **GUARDIAN’S FEE**

STATE OF OREGON)
) ss.
 County of _____)

I hereby swear or affirm that:

1. I am the Guardian in this matter and have provided valuable and necessary services on behalf of the protected person.

2. I am requesting approval of a Guardian’s fee for the period of time from _____, 20____ to _____, 20____.

3. I am requesting approval of a fee in the amount of \$_____. The amount of this fee is calculated as follows:

Time spent on guardianship matters during this period: _____ hours
 Hourly rate (*not to exceed \$30.00 per hour*): \$_____
 Total requested fee (*not to exceed \$750 first year and \$350 subsequent years*): \$_____

4. An itemization of the time I have spent on guardianship matters during the period covered by this request is attached to this Affidavit. (*Attach time itemization*)

5. I last requested approval of a guardian's fee from the court on: _____,
20_____.

6. To the best of my knowledge, no funds of the protected person have been found from which my fees could be paid.

7. My usual hourly rate for these types of matters in \$_____. If billed on a "full-fee" basis, my requested guardian fee for this case would have been in the amount of \$_____.

8. I make this Affidavit in support of my Motion for Approval of a Guardian's Fee.

Signature of Guardian

SUBSCRIBED AND SWORN TO before me this _____ day of _____,
20_____.

Clerk/Notary/Judge

My Commission Expires: _____

Submitted by:

Name Bar No. (if any)

Address

City, State, Zip

Telephone

E-mail Fax