

DARKE COUNTY JUVENILE COURT

300 GARST AVENUE
GREENVILLE, OHIO 45331
Phone (937) 547-7350
Fax (937) 547-1945
www.darkeprobatejuvenile.org

JASON R. ASLINGER
Juvenile Judge

JODY CANTRELL
Court Administrator

FINANCIAL AGREEMENT TO PAY FINES AND/OR COURT COST

Name _____ Phone _____

Address _____

Charge _____ Case # _____

It is mandated by the Darke County Juvenile Court that all Court costs and fines shall be paid within _____ days unless there is a written agreement to make periodic payments signed by the person so ordered, with a signature from a Deputy Clerk of the Juvenile Court. No payment agreement shall be accepted unless payments are made on a periodic basis, with no frequency than monthly.

I understand that if I am a licensed driver, I may have to surrender my license to the Court until payment is made in full. If I do not have a license, I will forfeit my privilege to obtain my license until all costs are paid in full.

Payment Agreement

I hereby agree to make consecutive payments to Darke county Juvenile Court, beginning _____.

These payments will be: Monthly in the amount of \$ _____.

There will be approximately _____ payments throughout this agreement. This financial obligation shall be paid in full by: _____.

It is the responsibility of the person signing the financial agreement to notify this Court of any address, phone number or employment changes as soon as they develop.

Deputy Clerk

Youth

Date

Parent or guardian

Date	Amount	Check#
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Date	Amount	Check#
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Date	Amount	Check#
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