

# PROBATE COURT OF FRANKLIN COUNTY, OHIO

ESTATE OF \_\_\_\_\_, DECEASED

CASE NO. \_\_\_\_\_

## EXECUTOR/ADMINISTRATOR - FIDUCIARY'S ACCEPTANCE

[R.C. 2109.02]

I, the undersigned, hereby accept the duties which are required of me by law, and such additional duties as are ordered by the Court. As executor/administrator of the estate I will:

- 1) Inventory any safe deposit box of the decedent.
- 2) Prepare and file an inventory of the real and personal assets of the estate within 3 months after appointment, or such time as extended by the Court.
- 3) Deposit funds which come into my hands in a lawful depository located within this state.
- 4) Keep estate funds in separate estate accounts at all times during the administration of the estate.
- 5) Invest all funds in a lawful manner.
- 6) Pay and disclose in the estate account all valid debts unless otherwise determined by law.
- 7) Timely pay appraiser fee and bond premium, if any.
- 8) Maintain a positive balance in the deposit account for court costs required by Loc.R. 58.1.
- 9) Send Notice of Probate of Will (if applicable) within 2 weeks of my appointment.
- 10) Prepare and file the final account within 6 months of my appointment or such other times as extended by the Court or by law.
- 11) File all tax documents as required by law.
- 12) Allow my name, address, and telephone number to appear in the Court's docket and be accessible through the Court's website.
- 13) Immediately notify the Probate Court if I change my name, address and/or telephone number.
- 14) Obey all Orders of the Court.

**NOTE:** The Attorney shall not be paid prior to the preparation of the final account unless specifically authorized by the Court.

I acknowledge that pursuant to 2109.02 I am subject to removal as fiduciary if I fail to perform my duties. Further, I acknowledge that I am subject to possible civil and criminal penalties for improper conversion of the property which I hold as fiduciary.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Executor/Administrator