

PROBATE COURT OF FRANKLIN COUNTY, OHIO

ESTATE OF _____, DECEASED

CASE NO. _____

APPLICATION FOR RELEASE OF ASSET(S) [NOT TO EXCEED \$200.00]

The undersigned states that the above named decedent resided at _____, Franklin County, Ohio and died on the ____ day of _____, _____, leaving the following next of kin:

NAME	ADDRESS	RELATIONSHIP

Applicant requests the release of \$ _____ (Not to exceed \$200.00) in the name of the above decedent, currently held by _____, to _____ the alleged _____ of the decedent.

ACKNOWLEDGMENT

I acknowledge that I may be required to return any or all of the distribution I receive at this time if a valid claim is filed with the estate in the time allowed by law and the distribution I have received is needed to pay that claim.

Witness:

Deputy Clerk

Applicant's Signature

Printed Name

Address

City, State, Zip Code

Telephone Number (include area code)

I. D. Number

ENTRY

The Court has no objection to the distribution of the property in question to the applicant and the Court makes no finding with respect to whom is entitled to the assets.

Date
