PROBATE COURT OF JEFFERSON COUNTY, OHIO

ESTATE OF			,DECEASED	
CA	SE NO			
	APPLICATION FOR SUMMARY RI	ELEASE FROM ADMIN	IISTRATION	
	Applicant states that decedent died on			
Dece	edent's domicile was			
		Street Address		
City or	r Village, or Township if unincorporated area	County		
Post C	Office	State	Zip Code	
[Che	ck one of the following]			
	The applicant is decedent's surviving spouse entitled to one hundred percent of the allowance for support and decedent's funeral and burial expenses have been prepaid or the surviving spouse has paid or is obligated in writing to pay decedent's funeral and burial expenses and the value of the assets does not exceed the \$40,000 allowance for support under R.C. 2106.13(B) plus an amount not exceeding \$5,000 for decedent's funeral and burial expenses.			
	The applicant, who is not the surviving spouse, h and burial expenses and the value of the assets, and burial expenses.			
dece	thed hereto is a receipt, contract or other document dent's funeral and burial expenses or if the applicant cable.			
The o	decedent's surviving spouse, next of kin, legatees ar 1 1.0.	nd devisees known to applican	t, are listed on attached	
	cant states that there are no pending proceedings for dent's estate from administration under R.C. 2113.0		nt's estate or relief of	
	nown assets with date of death values of the estate a	are as follows:		
All kr	lowir assets with date of death values of the estate a			
All kr	Motor Vehicles (include year, make, model, body Certificate of Title number)	/ type, manufacturer's vehicle i	dentification number and	

	Accounts maintained by a Financial Institution (include financial institution name and the account's complet identifying number):			
		\$		
		tock or bond its serial number, the name of its issuer, the name and total number of shares of stocks or bonds):		
		\$		
	Real estate described in accompanying Form 12.0 Application for Certificate of Transfer and Form 12.1 Certificate of Transfer and date of death value. [Attach verification of value.]			
		\$		
	Other assets and date of death value	3		
		\$		
		Total Assets \$		
Applic	ant requests an order granting summar	y release.		
Attorney for Applicant		Applicant		
Typed or Printed Name		Typed or Printed Name		
Address		Address		
				
Phone Number (include area code)		Phone Number (include area code)		
Attorn	ey Registration No.	<u> </u>		