

**IN THE COURT OF COMMON PLEAS
OF OTTAWA COUNTY, OHIO
PROBATE DIVISION**

ESTATE OF _____, DECEASED
CASE NO. _____

MOTION TO RELEASE INFORMATION

Now comes _____ (Name), the _____ (Relationship) of the above-named decedent who died on _____ and resided at _____ whose last four (4) digits of his/her social security number are _____ and hereby requests authority to obtain information regarding accounts and balances for the decedent at the following institution(s) for the purpose of pursuing an estate administration:

The Applicant submits with this Application a copy of the decedent's death certificate.

Attorney's Signature

Applicant's Signature

Printed/Typed Name of Attorney

Printed/Typed Name of Applicant

Address

Address

City/State/Zip

City/State/Zip

Phone

Supreme Court No.

Phone

JUDGMENT ENTRY TO RELEASE INFORMATION

For good cause shown, the above-named institutions are authorized to release written confirmation of the indicated financial information to the Applicant concerning this decedent. THIS IS NOT AUTHORITY TO RELEASE FUNDS, ONLY INFORMATION CONCERNING THE FUNDS.

JUDGE KATHLEEN L. GIESLER