#### IN THE COURT OF COMMON PLEAS PIKE COUNTY, OHIO PROBATE DIVISION

ESTA	TE OF	, DECEASED	
CASE	Z NO:	DATE OF DEATH:	
	NOTICE TO COURT O	OF DECEDENT'S MEDICAID STATUS	
	ndersigned hereby certifies to the all applicable choices)	e Court the following:	
[]	The decedent WAS NOT over	the age of 55 years.	
[]	The decedent WAS over the ag	ge of 55 years.	
[]	The decedent WAS NOT a per	manently institutionalized individual.	
[]	The decedent WAS a permanen	ntly institutionalized individual.	
[]	The decedent WAS NOT a Medicaid recipient at any time during his/her life.		
[]	The decedent WAS a Medicaid recipient at any time during his/her life.		
[ ]			
Date		Signature and Title of Applicant	
	E OF OHIO NTY OF	} } ss	
	Sworn to by ceased, before me, a notary puble	, as to the Medicaid status of ic, in and for said County and State, this, 20	
		Notary Public	

My Commission Expires:

	PROBATE COURT	OF	COUNTY, OHIO
ES	TATE OF		, DECEASED
CA	SE NO		
	LEGA [R.C.	OUSE, CHILDREN, NATEES AND DEVISE 2105.06, 2106.13 and 2107.1	<b>ES</b> 9]
		m, for notice or other purposes. U	
If no	following are decedent's known survivin one, the following are decedent's next of cent and distribution.		
Nam	ne Residence Address	Relationship to Decedent	Birthdate of Minor
	Addless	Surviving Spouse	OI WIIIOI
[Ch	neck whichever of the following is app	licable]	
	The surviving spouse is the natural or a	adoptive parent of all of the de	ecedent's children.
	The surviving spouse is the natural or a	adoptive parent of at least one	e, but not all, of the decedent's children.
	The surviving spouse is not the natural	or adoptive parent of any of t	he decedent's children.
	There are minor children of the decede	nt who are not the children of	the surviving spouse.
	There are minor children of the decede	nt and no surviving spouse.	

	C	CASE NO
The following are the vested be	eneficiaries named in the decedent's will:	
Name	Residence Address	Birthdate of minor
	7 14 41 5 5	
		_
[Check whichever of the follo	owing is applicable]	
☐ The will contains a charita 109.41.	ble trust or a bequest or devise to a charitable	e trust, subject to R.C. 109.23 to
☐ The will is not subject to R	t.C. 109.23 to 109.41 relating to charitable true	sts.
Date	Applicant (or give other title	e)

	PROBATE COURT OF	COUNTY, OHIO
		, JUDGE
EST	ATE OF	, DECEASED
CAS	E NO	
		Γ OF APPRAISER 2 & R.C. 2115.06]
to app	prove the appointment. Subject to Court appros s to pay the appraiser reasonable compensation	o not have readily ascertainable value, and asks the Court oval on the amount of such compensation, the fiduciary of for the services as part of the expenses of administering
	The fiduciary / applicant will use the valuation	of the real property by the County Auditor.
	CERTI	FICATION
with th	The fiduciary / applicant hereby certifies that ne Local Rules of Court	the appraiser appointed above is qualified in accordance
Date	<del></del>	Fiduciary / Applicant
	ENTRY APPROVING APPRAIS	SER / ENTRY SETTING HEARING
	The application is hereby approved.	
	The Court sets date and time for hearing the above appointment	ato'clockM. as the ent of appraiser.
Date		Probate Judge

PROBA	TE COURT OF	COUNTY, OHIO
ESTATE OF		, DECEASED
CASE NO.		
APPLICATIO		STATE FROM ADMINISTRATION
Applicant states that deceden		2113.03]
Decedent's domicile was		
		Street Address
City or Village, or Township if unincorporat	ed area	County
Post Office	State	Zip Code
[Check one of the following]  Decedent's will has been a To applicant's knowledge,		
April 16, 1993.  The assets are \$85,000 or September 14, 1993.  The assets are \$100,000 or March 18, 1999.	less and decedent died or less and decedent died or less; the surviving spousor less spousor	n or after October 20, 1987. n or after November 9, 1994. se is entitled to all of the assets and the decedent died on or after se is entitled to all of the assets and the decedent died on or after use is entitled to all of the assets and the decedent died on or after se is entitled to all of the assets and the decedent died on or after sistration because the assets do not exceed the statutory limits. A
The decedent's surviving sport 1.0.	use, next of kin, legatees,	and devisees known to applicant, are listed on the attached Form
Attorney for Applicant		Applicant
Typed or Printed Name		Typed or Printed Name
Address		Address
Phone Number (include area	code)	Phone Number (include area code)
Attorney Registration No		

#### WAIVER OF NOTICE

The undersigned surviving spouse, heirs at law, legatees, devisees, and other persons entitled to notice of the filing of the application to relieve decedent's estate from administration, waive such notice.
ENTRY SETTING HEARING AND ORDERING NOTICE
The Court sets o'clock M., as the date and time for hearing the application to relieve decedent's estate from administration.
[Check one of the following]
All notice is dispensed with as unnecessary.
☐ Notice by publication to interested parties is dispensed with as unnecessary. Written notice shall be given, as provide by law and the Rules of Civil Procedure, to those persons entitled to notice, who have not waived notice.
☐ Written notice is dispensed with as unnecessary. Notice by publication shall be given to interested parties as provide by law and the Rules of Civil Procedure.
☐ Written notice shall be given to those persons entitled to notice, who have not waived notice, and notice by publication shall be given to interested parties, as provided by law and the Rules of Civil Procedure.
Date Probate Judge

PROBATE COURT	OF	COUNTY, OHIO	
ESTATE OF			, DECEASED
CASE NO.	_		
ASSETS AND LIABILITIES OF	ESTATE TO BE RELIEVED	FROM ADMINISTR	RATION
Following is a summary statement of the "Appraised" column opposite an item if it was the item was determined by applicant. Use ext	as valued by the appraiser. Leave		
Automobiles distributed to surviving spous	e by affidavit	Value	
First automobile selected by surviving spouse ( [Omit value when computing total assets] Second automobile selected by surviving spouse.	Appraised value \$ se under R.C. 2106.18		XXXX
[Omit value when computing total assets]	Appraised value \$		XXXX
Total value [not to exceed \$40,000.00]  Character of asset	\$ Appraised		XXXX Value
Real Estate, described in accompanying	Appraised	\$	value
Other assets		\$	
Total Assets		\$	

Following is a list of decedent's known debts. [Use extra sheets if necessary]

#### (Reverse of Form 5.1)

Name of Creditor	Nature of Debt	Amount
		\$
		· · · · · · · · · · · · · · · · · · ·
Total Debts		\$
	CERTIFICATION	
The undersigned appraiser agreed to act a ruly, honestly, impartially, and to the best of the agassets whose values were not readily ascertainabeach such item, and that such values are correct.	ppraiser's knowledge and ability. The	appraiser further says that those
The undersigned applicant determined the not appraised by the appraiser, and that such value debts is correct.		
Date	_	
Appraiser	Applicant	<del></del>

PROBATE COURT OF	COUNTY, OHIO
ESTATE OF	, DECEASED
CASE NO.	
WAIVER OF NOTICE OF APPLICATION T	O RELIEVE ESTATE FROM ADMINISTRATION
The undersigned surviving spouse, heirs at law, legate the application to relieve decedent's estate from administr	ees, devisees, and other persons entitled to notice of the filing of ration, waive such notice.
	<del></del>

PROBA	E COURT OF	COUNTY, OHIO
ESTATE OF		, DECEASED
CASE NO		
NOTICE OF APP	LICATION TO RELIEVE	E ESTATE FROM ADMINISTRATION
To the following persons:		
Name		Address
An application has bee the assets in the estate do not		ecedent's estate be relieved from administration, saying tha
The hearing on the ap	plication will be heldk M. in this Court.	
The Court is located a	:	
If you know of any rea	son why the application should no	ot be granted, you should appear and inform the Court.

Probate Judge/Deputy Clerk

PROBATE COURT OF	COUNTY, OHIO	
ESTATE OF	, DECEA	ASED
CASE NO		
ENTRY RELIEVING ESTATE [R.C. 211		
Upon hearing the application to relieve decedent's esta	te from administration, the Court finds that:	
Decedent died [check one of the following] -  the application, and the Court has jurisdiction over the estate;	intestate. The date of death and domicile are as	stated ir
Notice to the surviving spouse, heirs at law, legatees, develop the Court as unnecessary;	visees, and other persons was duly effected or disper	nsed with
The values of the several assets in the estate, given in	the application do not exceed the statutory limits.	
The Court therefore relieves the estate from administration are applicable]:	on, and orders [check and complete whichever of the	following
☐ That the following personal property be sold [descri	be]:	
☐ That the following debts of decedent shall be paid to	o the extent of assets:	
☐ That the statutory family allowance be paid to the ☐ apportioned between the surviving spouse and minor children of Attach Form 7.2A if necessary.		
☐ That Certificate of Transfer No, attached to and be preserved in the records of the Court and that authentic persons entitled to them;	the application and describing decedent's real esta ated copies of the certificate be delivered as require	ite, issue ed to the
☐ That the financial institutions holding accounts in decrelease [check one of the following] -☐ to the commissioner - ☐	edent's name as set forth below pay the same upon p ] to	roper tax

#### (Reverse of Form 5.6)

Name of Distributee	Property	Value or Amount
		\$
		<del></del>
documents of conveyance, includ	ing without limitation those necessary property sold or distributed in kind. The c	r proceeds thereof, and to execute all necessary to transfer title to any motor vehicle, motorcycle ommissioner shall complete the duties and report to
Date	PROBA	ATE JUDGE

# IN THE COURT OF COMMON PLEAS PIKE COUNTY, OHIO PROBATE DIVISION

ESTATE OF			DECEAS	SED
CASE NO:				
	REPORT C	F DISTRIBUTION		
Now comes you Distribution of the asse manner:	ur duly appointed ets has been made in accorda	herein and sunce withthe previous ord	ubmits hisReport in said matte er of this Court in the followin	er. Ig
DATE OF SALE	TO WHOM SOLD		PROCEEDS OR	
OR DISTRIBUTION	OR DISTRIBUTED	DESCRIPTION	VALUE	
			Commission	ner
	JUDGI	MENT ENTRY		
			, 20	
The within report o ordered that the report and	and distribution having been made a distribution are hereby approved.	ccording to law and the forme	rorder of the Court, it is	
		ludaa		
		Judge		

PROBATE COL	JRT OF	COUNTY, OHIO
_		, JUDGE
ESTATE OF:		, DECEASED
CASE NO.		
_		E TO ADMINISTRATOR OF ECOVERY PROGRAM AND 5162.21]
THIS FORM SHALL BE FI	LED IN THE PRO	OBATE COURT UPON COMPLETION OF MINISTRATOR
		liance with Ohio Revised Code 2117.061 and 5162.21 Civ.R. 73 on the day of,
	Medicaid Esta 150 E. Gay Stro Columbus, 0	eet, 21st Floor
Attorney for Applicant		Person Responsible for the Estate
Typed or Printed Name		Typed or Printed Name
Address	<del></del>	Address
City, State, Zip Code	<del></del>	City, State, Zip Code
Telephone Number (include area code)	)	Telephone Number (include area code)
Attorney Registration No.		

PR	DBATE COURT OF COUNTY, OHIO					
	, JUDGE					
ESTATE OF:						
CASE NO						
	NOTICE TO ADMINISTRATOR OF					
MEDICAID ESTATE RECOVERY PROGRAM						

IF THE ESTATE OF THE DECEDENT IS SUBJECT TO THE MEDICAID ESTATE RECOVERY PROGRAM PURSUANT TO R.C. 5162.21, THIS NOTICE SHALL BE FILED WITH THE ADMINISTRATOR OF THE PROGRAM AT THE FOLLOWING ADDRESS:

[R.C. 2117.061 AND 5162.21]

Medicaid Estate Recovery 150 E. Gay Street, 21st Floor Columbus, Ohio 43215

### THIS NOTICE IS NOT A PUBLIC RECORD AND SHALL NOT BE FILED IN THE PROBATE COURT

The undersigned person responsible for the estate hereby states the following: 1. Name of Decedent: 2. Address of Decedent: 3. Date of Birth:\_\_\_\_\_\_ Age: \_\_\_\_\_\_ 4. Date of Death: 5. Social Security Number: 6. Check all applicable boxes: A copy of the Schedule of Assets (Form 6.1) or Assets and Liabilities (Form 5.1) is attached; A schedule of any other real and personal property and other assets in which the decedent had any legal title or interest at the time of death (to the extent of the interest), including assets conveyed to a survivor, heir, or assign of the individual through joint tenancy, tenancy in common, survivorship, life estate, living trust, or other arrangement; The spouse of the decedent was subject to the Medicaid estate recovery program, a separate notice is being submitted for the pre-deceased spouse.

Signature - Person Responsible for the Estate	
Typed or Printed Name	
Address	
City, State, Zip	
Telephone Number (include area code)	_

## PROBATE COURT OF PIKE COUNTY, OHIO PAUL PRICE, JUDGE

ESTATE OF	, DECEASED
Case No	
APPLICATIO	N FOR TRANSFER OF MOTOR VEHICLE
The undersigned, qualified fiduciar described motor vehicle, belonging	y of the above estate, represents he has in his possession the following to said estate:
Year Body Type	Model Make
Mfrs. Serial No.	Cert. of Title No
Applicant states that the following	person is entitled to such motor vehicle: by virtue of the will
by the statute of descent and distri	oution by family allowance by purchase \$
	nentioned motor vehicle be transferred to:
Address	
	Applicant
ENTRY F	OR TRANSFER OF MOTOR VEHICLE
The Court finds that all of the state entitled to such motor vehicle.	ments in the above application are true and that the above transferee is
It is therefore ordered that said fidu	ciary transfer said motor vehicle as prayed for.
	PAUL PRICE Probate Judge

	PROBATE COURT OF COUNTY, OHIO		
ES	STATE OF DECEASED		
	ASE NO		
O,	APPLICATION FOR CERTIFICATE OF TRANSFER		
Ap	[R.C. 2113.61]  plicant states that decedent died on		
	cedent's domicile at death was		
City	or Village, or Township if unincorporated area  County		
Pos	st Office State Zip Code		
list	cedent died owning the real property described in the accompanying Certificate of Transfer No, which also s those persons to whom the real property passed. Applicant asks the Court to issue a Certificate of Transfer so that w ownership interests may be recorded.		
[Cł	heck the applicable boxes]		
	Decedent died intestate.		
	Decedent died testate on; will admitted to probate on		
	Decedent's known debts have been paid or secured to be paid.		
	Sufficient other assets are in hand to pay decedent's known debts.		
	Estate is insolvent and the transfer shall apply toward the allowance for support.		
	Applicant was appointed by this Court on and is the qualified and acting executor or administrator of decedent's estate.		
	Executor or administrator of decedent's estate failed to file this application before being discharged.		
	Applicant is the executor or administrator appointed in another state. There is and has been no ancillar administration in Ohio. The real property to be transferred is located in this county.		
	The transfer is subject to a written contract for the sale and conveyance of the real property, entered into but uncompleted by decedent before death. A copy of the contract is attached.		
	There has been no administration and none is contemplated [R.C. 2113.61(D)].		
	The transfer is pursuant to decedent's Will.		
	The transfer is pursuant to the statutes of descent and distribution.		
	The transfer is pursuant to summary release from administration [R.C. 2113.031(D)(3)].		
	The real property to be transferred is subject to a charge in favor of the surviving spouse in the amount of \$ as computed pursuant to R.C. 2106.11 on attached Exhibit A, and as shown on the accompanying Certificate of Transfer, in respect of the unpaid balance of the specific monetary share which is part of the surviving spouse's total intestate share.		

FORM 12.0 - APPLICATION FOR CERTIFICATE OF TRANSFER

	CASE N	0
Spousal elections have been exercised.		
☐ Disclaimers or assignments have been filed	d.	
The transfer is of decedent's entire interes such interest as part or all of the intestate following must be completed, and both to	e share and/or allowance for support. [If	this paragraph is checked, the
The value of the total intestate share to which d	decedent's surviving spouse is entitled is	\$
The value of the allowance for support to which	decedent's surviving spouse is entitled is	\$
The value of decedent's entire interest in the ma	ansion house is:	
Interest in mansion house	\$	
Interest in household goods in house	\$	
	ire	
Less: Decedent's share of liens on any and all of above	\$	
Total	\$	\$
Surviving Spouse	Applicant	
	Title or status	
The Court finding that the above application co	copy of the Certificate of Transfer be issue	orders that Certificate of Transfer d for recording.
Date	Probate Judge	

PROBATE CO	OURT OF	COUNTY, OHIC , JUDGE	)
ESTATE OF			_,DECEASED
CASE NO.			
	CERTIFICATE OF	TRANSFER	
	NO		
[Check one of the following]			
Decedent died intestate.			
Decedent died testate.			
Decedent died on		owning the real propert	y described in this
certificate. The persons to whom such			
Name	Residence Address		sferee's share ecedent's interest
			<del></del>
			<del></del>
[Complete if applicable] The real pro	perty described in this certific	cate is subject to a charge of \$	ir
favor of decedent's surviving spouse,		, , , , , , , , , , , , , , , , , , , ,	in respect of the

unpaid balance of the specific monetary share which is part of the surviving spouse's total intestate share.

necessary].			
Prior Instrument Reference:			
Parcel No:			
This instrument was prepared by			
	ISSUANCE		
This Certificate of Transfer is issued this	day of	, 20	
	Doob at a landon		
	Probate Judge		
	AUTUENTIOATION		
	AUTHENTICATION		
I certify that this document is a true copy of the and kept	e original Certificate of Transfer No by me as custodian of the official	o issued on records of this Court.	
Date	Probate Judge		
	Ву		
	Deputy Clerk		