

**PROBATE COURT OF COSHOCTON COUNTY, OHIO  
VAN BLANCHARD II, JUDGE**

ESTATE OF \_\_\_\_\_, DECEASED  
CASE NO. \_\_\_\_\_

**CERTIFICATE OF TRANSFER FILING INFORMATION  
Real Estate Only  
(O.R.C. 2113.61 (D))**

Applicant states that the decedent died  testate  intestate on \_\_\_\_\_

Decedent's domicile was \_\_\_\_\_  
Street Address

\_\_\_\_\_  
City of Village or Township id unincorporated area County

\_\_\_\_\_  
Post Office State Zip Code

The following documents are attached for filing:

- 1) Original Will; Application to File Will for Record Only  not applicable
- 2) Surviving Spouse, Next of Kin, Legatees and Devisees
- 3) Application for Certificate of Transfer
- 4) Certificate of Transfer
- 5) Auditor's Value/Original Appraisal (DOD Value)
- 6) Paid Funeral Bill
- 7) Copy of Death Certificate

Applicant states that decedent was not a Medicaid recipient, the real estate described in the Certificate of Transfer is the only probate asset, and it has been six (6) months since the date of death.

\_\_\_\_\_  
Attorney for Applicant

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Typed or Printed Name and S. Ct. Atty. Regis. No.

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Telephone Number