

Case No. _____

RECAPITULATION

Beginning Balance	_____	\$ _____
Total Receipts	_____	\$ _____
Total Disbursements	_____	\$ _____
Ending Balance	_____	\$ _____

ITEMIZED STATEMENT OF ALL REMAINING FUNDS, ASSETS AND INVESTMENTS

Item(s)	Ending Balance
_____	\$ _____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Attorney

Attorney No.

Trustee's signature

Trustee's signature

Typed or Printed Name(s)

Address

City, State, Zip Code

ENTRY SETTING HEARING AND ORDERING NOTICE

The Court sets _____ at _____ o'clock ____ m. as the date and time for hearing the above accounting and orders notice of the hearing to be given as provided by law and Rules of Civil Procedure.

Date

Jason W. Given, Judge

PROBATE COURT OF COSHOCTON COUNTY, OHIO

IN THE MATTER OF THE:

- TESTAMENTARY TRUST
- SPECIAL NEEDS TRUST

- WRONGFUL DEATH TRUST
- OTHER _____

OF _____, DECEASED, GRANTOR

CASE NO. _____

WAIVER OF NOTICE OF HEARING ON ACCOUNT
[R.C. 2109.33]

The undersigned, who are interested in the estate/trust, waive notice of the hearing on the account.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**IN THE PROBATE COURT OF COSHOCTON COUNTY, OHIO
JASON W. GIVEN, JUDGE**

IN THE MATTER OF THE:

- TESTAMENTARY TRUST
- SPECIAL NEEDS TRUST

- WRONGFUL DEATH TRUST
- OTHER _____

OF _____, DECEASED, GRANTOR

CASE NO. _____

CERTIFICATE OF SERVICE OF NOTICE OF HEARING

The undersigned certified that certain persons interested in the Account Inventory:

- Have waived notice of the hearing on said Account Inventory.
- Have received notice of the hearing on said Account Inventory by certified mail. Their waivers or certified mail receipts are attached hereto.
- Have received notice by publication.
- The following persons have not been notified because the place of residence are Unknown and cannot with reasonable diligence be ascertained:

 Fiduciary
 Attorney for the above person
Registration No. _____

**IN THE PROBATE COURT OF COSHOCTON COUNTY, OHIO
JASON W. GIVEN, JUDGE**

IN THE MATTER OF THE:

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- SPECIAL NEEDS TRUST

- WRONGFUL DEATH TRUST
- OTHER _____

OF _____, DECEASED, GRANTOR

CASE NO. _____

BANK CERTIFICATE

N.B. Must be executed when funds are on deposit.

I HEREBY CERTIFY that the within named fiduciary, on the date named below, had on deposit in

The _____ of _____, Ohio,
the sum of \$ _____ on _____ to the credit of
the estate of _____

Bank

By _____

Title _____

Date _____

Trustee

Co-Trustee