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RECAPITULATION

Total Receipts _____ \$ _____
Total Disbursements _____ \$ _____
Balance Remaining _____ \$ _____

ITEMIZED STATEMENT OF ALL FUNDS, ASSETS AND INVESTMENTS

(AT THE TIME OF FILING THIS ACCOUNT)

ITEM

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

Attorney

Attorney Registration No.

Phone Number

Email Address

Trustee

Typed or Printed Name

Address of Trustee

Email Address

ENTRY SETTING HEARING

The Court sets _____ at _____ o'clock _____ .M.
as the date and time for hearing the above account.

Date

Magistrate

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 a deposit in

The _____ of _____, Ohio

the sum of \$ _____ on _____ to the credit of the estate of

Nature of deposit

_____ Bank
Dated _____ 20 _____ By _____ Cashier