

PROBATE COURT OF ROSS COUNTY, OHIO
J. JEFFREY BENSON, JUDGE

ESTATE OF _____, DECEASED

CASE NO. _____

APPLICATION SEEKING RELEASE OF DECEDENT'S MEDICAL RECORDS
[R.C. 2113.032]

Applicant states that decedent died on _____

Decedent's domicile was _____
Street Address

City or Village, or Township if unincorporated area _____ County _____

Post Office _____ State _____ Zip Code _____

The decedent's surviving spouse, next of kin, legatees, and devisees known to applicant are listed on attached Form 1.0 ("estate form"). Supplemental contact information, if any, for the decedent's surviving spouse, next of kin, legatees, and devisees is listed on attached Form 28.1.

[Check all that apply]

- ☐ Applicant is nominated as executor in decedent's Will.
 ☐ Decedent's Will has previously been filed in this Court for record only
 ☐ Decedent's Will has previously been admitted to probate only in this Court.
 ☐ This application is accompanied by a document purporting to be the original of decedent's Will and either ☐ an application to file the Will for record only; or ☐ an application to probate the Will.
- ☐ Applicant is a resident of the State of Ohio who is eligible to be appointed administrator of decedent's estate as ☐ the surviving spouse of decedent; ☐ other next of kin of decedent; or ☐ another person suitable to be appointed administrator.

Applicant requests an entry authorizing the release of the decedent's medical records and medical billing records for the limited purpose of evaluating a potential wrongful death claim or a personal injury and survivorship action on behalf of decedent.

Signature of Applicant

Typed or Printed Name

Address

City, State, Zip

Telephone Number [include area code]