

IN THE PROBATE COURT OF \_\_\_\_\_ COUNTY, OHIO  
\_\_\_\_\_, JUDGE

In the Matter of Estate of \_\_\_\_\_, DECEASED

Case No. \_\_\_\_\_

**MOTION FOR AUTHORITY TO OBTAIN RELEASE OF INFORMATION**

Now comes \_\_\_\_\_, the \_\_\_\_\_ of the above named decedent who died on \_\_\_\_\_, 2020, a resident of \_\_\_\_\_ County, Ohio. The applicant requests authority to obtain only information regarding the manner in which the following asset(s) of the decedent are titled and, if in the decedent's name, then the balances as of the date of death. No administration of the estate of the decedent has been commenced and the information is needed to determine whether to proceed with an administration. The Applicant submits with this Application (1) Applicant's current photo identification, and (2) a copy of the decedent's death certificate.

Asset: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Attorney's Signature

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Printed/Typed Name of Attorney

\_\_\_\_\_  
Printed/Typed Name of Applicant

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Supreme Court No

\_\_\_\_\_  
Phone

**JUDGMENT ENTRY**

For good cause shown, the above named institutions are authorized to release written confirmation of the indicated financial information concerning this decedent to the Applicant. **THIS DOES NOT AUTHORIZE THE RELEASE OF THE FUNDS.** Also, the financial institution shall not release any information if the above account has a listed surviving co-owner or "payable -on-death/transfer-on-death" beneficiary.

\_\_\_\_\_  
\_\_\_\_\_, JUDGE