

PROBATE COURT OF CLARK COUNTY, OHIO
Richard P. Carey, 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.
 - Decedent's will has not been probated however a copy is attached.
 - 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 record 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

 Typed or Printed Name

 Typed or Printed Name

 Address

 Address

 City, State, Zip

 City, State, Zip

 Telephone Number (include area code)

 Telephone Number (include area code)

 Attorney Registration No.