	PROBATE COURT OF	, JUDGE	COUNTY, O	HIO
STATI	TE OF		, DECE	EASED
ASE N	NO			
j	APPLICATION TO APPROVE SE WRONGFUL DEATH [R.C. 2117.05, 2125.02	AND SURVIVA	L CLAIMS	TION OF
heck w	iciary states: whichever of the following are applicable, strike i tatement.]	napplicable words, an	d incorporate all att	achments into a
Т	There is an offer of (full) (partial) settlement with	out suit being filed.		
	There is an offer of (full) (partial) settlement after number being		•	court, and case
	A judgment has been recovered for damages for property damage arising out of the same act and	· · · · · · · · · · · · · · · · · · ·	•	onal injury and
Т	The amount of the settlement or judgment is \$			
Т	There is a partial settlement and therefore the es	state must remain ope	en pending final disp	osition of the claims
	The offer includes, or the judgment sets forth se amount of \$	parately, reasonable f	uneral and burial ex	penses in the
	Reasonable compensation for the fiduciary for s an itemization of such services is attached.	ervices rendered is \$_		and
	Outstanding hospital and medical bills in the am itemization of such bills is attached.	ount of \$		and an
	Outstanding claims to a right of subrogation for t \$ and an ite			in the amount of
re a	A reasonable attorney fee for the attorney's serve reimbursement to the attorney for case expense attorney's fee contract that (has) (has not) receive itemization of the case expenses are attached.	rices is \$s s is \$ved prior approval of the	he Court, subject to	and A copy of the modification, and
C	Other:			
T d	The net proceeds of \$ to the death action and \$ to the death action	should be allocated \$_		_ to the wrongful

FORM 14.0 - APPLICATION TO APPROVE SETTLEMENT AND DISTRIBUTION OF WRONGFUL DEATH AND SURVIVAL CLAIMS

		[Reverse of Form 14.0]	ASE NO		
A statement in s	support of the proffered set	tlement is attached.			
Supplemental forms required by local rule of court are attached.					
	ciaries of the wrongful dea net proceeds allocated to			are adults, and have	
	es of the wrongful death ac s is a minor, or the benefic	•			
	pouse, children, and paren ason of the wrongful death				
lame	Residence Address	Relationship to Decedent	Birthdate of Minor	Amount	
he survival cla	im beneficiaries are as foll	ows:			
ame	Residence Address	Relationship to Decedent	Birthdate of Minor	Amount	
Name	Residence	Relationship		Amount	
Γhe fiduciary re	Residence Address	Relationship to Decedent	of Minor	execute a	
The fiduciary re	Residence Address	Relationship to Decedent	of Minor	execute a	
The fiduciary re (complete) (part the claim.	Residence Address	Relationship to Decedent  ove the application and augment of the settlement s	of Minor	execute a	
The fiduciary re (complete) (part the claim. Attorney for Fid	Residence Address	Relationship to Decedent  ove the application and autyment of the settlement s	of Minor  Ithorize the fiduciary to hall be a (complete) (page 1)	execute a	
The fiduciary re complete) (part he claim.	Residence Address  quests that the Court appretial) release which upon particles.	Relationship to Decedent  ove the application and autyment of the settlement s	of Minor  uthorize the fiduciary to hall be a (complete) (pa	execute a	
The fiduciary re complete) (part he claim.  Attorney for Fidattorney Regist	Residence Address  quests that the Court appretial) release which upon particulary ration No	Relationship to Decedent  ove the application and autyment of the settlement	of Minor  uthorize the fiduciary to hall be a (complete) (padduciary	execute a artial) discharge of	
(complete) (part the claim.  Attorney for Fid Attorney Regist  The Court sets and time for hea	Residence Address  quests that the Court appretial) release which upon partial uciary ration No	Relationship to Decedent  ove the application and augment of the settlement settlement settlement settlement at	of Minor  Ithorize the fiduciary to hall be a (complete) (padduciary  ING NOTICE  o'clock iven by the fiduciary, a	execute a artial) discharge ofm. as the date s provided in the	

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