

**PROBATE COURT OF CLERMONT COUNTY, OHIO**

**JAMES A. SHRIVER, JUDGE**

ESTATE OF \_\_\_\_\_, DECEASED

CASE NO. \_\_\_\_\_

**REPORT ON RECEIPT OF MEDICAL RECORDS AND MEDICAL  
BILLING RECORDS**

[R.C. 2113.032]

Now comes \_\_\_\_\_, who was authorized to receive the decedent's medical records and medical billing records, and hereby certifies that all requested medical records and medical billing records have been received.

An application to administer decedent's estate will not be filed.

An application to administer decedent's estate will be filed prior to the expiration of the applicable statute of limitations.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_

\_\_\_\_\_  
Phone Number