PROBATE COURT OF MEDINA COUNTY, OHIO

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 the 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.

Attorney Signature			Applicant Signature		
Attorney Printed Name			Applicant Printed name		
Address			Address		
City	State Z	Zip	City	_ State	Zip
Phone number (include area code)			Phone number (include area code)		
Supreme Court Registration Numbe	r				