PROBATE COURT OF MEDINA COUNTY, OHIO Kevin W. Dunn, Judge

Request to Withdraw Previously Deposited Will

What is the name of the person who made the will?

First name	Last name
What is the date of the original Certificate of Dep	posit? (If known)
What is the case number on the original Certifica	ate of Deposit? (If known)
	-
I request that I be permitted to withdraw	
my own Will(s)	
or	
the Will(s) of the person who made it (written authorization attached)	
Requestor's full name and address	
First name	Last name
Address (Street, City, State and Zip Code)	
	Signature of Requestor and Date

For Office Use Only

Case Number

Date Will Removed