

PROBATE COURT OF _____ COUNTY, OHIO

_____, JUDGE

ESTATE OF _____, DECEASED

CASE NO. _____

**NOTICE OF HEARING ON REPRESENTATION OF INSOLVENCY
AND SCHEDULE OF CLAIMS**

[R.C. 2117.17]

TO THE FOLLOWING CREDITOR, CLAIMANT OR INTERESTED PERSON:

Typed or Printed Name of Creditor, Claimant or Interested Person

Address

You are hereby notified that the fiduciary of this estate has filed a Representation of Insolvency and a Schedule of Claims in the Probate Court of _____ County, Ohio. A copy of the Representation of Insolvency and the Schedule of Claims is attached to this Notice of Hearing.

The Representation of Insolvency and the Schedule of Claims shall be heard before the _____ County Probate Court, located at _____ on the _____ day of _____, 20____, at _____ o'clock ____ . M.

The actions of the fiduciary in allowing and classifying claims will be confirmed at the hearing unless cause to the contrary is shown. Exceptions, if any, to the allowance or classification of any specific claim, must be in writing and filed with the Court prior to the hearing.

Fiduciary/Attorney for Fiduciary

Typed or Printed Name

Address

Phone Number (include area code)

Attorney Registration No. _____