INSTRUCTIONS TO APPROVE SETTLEMENT AND DISTRIBUTION OF WRONGFUL DEATH AND SURVIVAL CLAIM

These instructions are intended as a <u>guideline only</u> and should not be relied upon as a comprehensive list of duties in the approval of wrongful death and survival claim.

In all cases where the gross distribution is going to a minor and is in excess of \$25,000, there <u>must</u> be a guardianship of the estate established for the minor prior to the settlement hearing.

When the proceeds will be distributed to a wrongful death trust the Judge will hear the Application to Approve Wrongful Death Settlement, Application to Create the Trust and the Application to Appoint Trustee.

If the proceeds to be distributed in a wrongful death trust are in the form of an annuity, the parties must comply with Hamilton County Local Rule 68.2.

The forms may be obtained from the Issue Desk on the 9th floor of the Probate Court, 230 East 9th Street, Cincinnati, Ohio or by downloading the forms from the web site.

C4

_	: COMPLETE THE FOLLOWING FORMS
Applic	cation to Approve Settlement and Distribution of Wrongful Death and Survival Claims (Form 14.0)
-	Complete Form.
Entry	Setting Hearing and Ordering Notice (Form 14.01)
-	Fill in the name of the decedent only, the magistrate will fill in the hearing date & time, if the matter will be heard by the magistrate or;
-	The form must be taken to the Assignment Desk on the 10 th floor of the Probate Court to obtain a
	hearing date of the Judge's calendar is if he is going to hear the settlement.
Waive	r and Consent Wrongful Death and Survival Claims (Form 14.1)
-	Obtain waivers from all interested parties.
-	If waivers cannot be obtained, notice of the hearing may have to be perfected by certified mail or
	publication.
Applic	ation and Entry to Appoint Guardian Ad Litem (No Standard Probate Form)
-	If a minor is involved with the settlement then the magistrate may require a guardian ad litem.
-	Forms must be prepared by attorney and presented to the magistrate at the time of filing.
Entry .	Approving Settlement and Distribution of Wrongful Death and Survival Claims (Form 14.2)
-	Complete form.
-	Present day of hearing for magistrate's approval.
Report	t of Distribution of Wrongful Death and Survival Claims (Form 14.3)
-	Complete form.
-	Form due within 30 days of Entry Approving Settlement (14.2)
Entry .	Approving Report of Distribution (Form H.C. 14.4)
-	Complete form.
-	Take to assigned magistrate for approval.
-	Canceled checks and/or receipts must be displayed to the magistrate as proof of distribution.

STEP 2: REVIEWING and FILING OF FORMS

When all forms have been reviewed by the assigned magistrate on the 9th Floor of Probate Court and after the magistrate has set the hearing take the forms to the cashier for filing.

STEP 3: DAY OF HEARING

At the date and time of the hearing, you should report to the 9th Floor of the Probate Court to the assigned magistrate or the 10th Floor Courtroom A before the Judge (The Judge or magistrate will already have the file with the papers you already filed).

Note: The fiduciary of the estate must appear at the hearing.

ESTATE OF	, DECEASED
CASE NO	
APPLICATION TO APPROVE SETTLEMENT A WRONGFUL DEATH AND SURVIV [R.C. 2117.05, 2125.02, Civ. R. 19.1 and Su	AL CLAIMS
The fiduciary states: [Check whichever of the following are applicable, strike inapplicable words, and i statement.]	ncorporate all attachments into a single
There is an offer of (full) (partial) settlement without suit being filed.	
There is an offer of (full)(partial) settlement after suit was filed. The style o being	f the case, the court, and case number
A judgment has been recovered for damages for the decedent's wrongful of damage arising out of the same act and which survive the decedent)	death (and personal injury and property
The amount of the settlement or judgment is \$	
There is a partial settlement and therefore the estate must remain open pendi	ng final disposition of the claims.
The offer includes, or the judgment sets forth separately, reasonable funera \$	al and burial expenses in the amount of
Reasonable compensation for the fiduciary for services rendered is \$ such services is attached.	and an itemization of
Outstanding hospital and medical bills in the amount of \$ attached.	and an itemization of such bills is
Outstanding claims to a right of subrogation for the payment of hospita \$ and an itemization of such is attached.	al and medical bills In the amount of
A reasonable attorney fee for the attorney's services is \$ A copy of the attorney's fee constrained approval of the Court, subject to modification, and itemization of the case expense	and reimbursement to the attorney ontract that (has) (has not) received prior enses are attached.
Other:	
The net proceeds of \$ should be allocated \$ action and \$ to the survival action. A statement in su	

[Reverse of Form 14.0]

CASE NO. _____

A statement in s	upport of the proffered settlem	ent is attached.			
Supplemental fc	orms required by local rule of c	ourt are attached.			
	All of the beneficiaries of the wrongful death action are on equal degree of consanguinity, are adults, and have agreed how the net proceeds allocated to the wrongful death claim are to be distributed.				
	The beneficiaries of the wrongful death action are not all on equal degree of consanguinity, or one or more of the beneficiaries is a minor, or the beneficiaries have not agreed how the net proceeds are to be distributed.				
	oouse, children, and parents of ongful death are as follows an			ve suffered damages by	
Name	Residence Address	Relationship to Decedent	Birthdate of Minor	Amount	
The survival clai	m beneficiaries are as follows: Residence	Relationship	Birthdate	Amount	
	Address	to Decedent	of Minor		

The fiduciary requests that the Court approve the application and authorize the fiduciary to execute a (complete) (partial) release which upon payment of the settlement shall be a (complete) (partial) discharge of the claim.

Attorney for Fiduciary

Fiduciary

Attorney Registration No._____

ESTATE OF	,	DECEASED
ESTATE OF	,	DECEASED

CASE NO._____

ENTRY SETTING HEARING AND ORDERING NOTICE

The Court sets	at	o'clock M.
as the date and time for hearing on the appli	ication to approve set	tlement and distribution
of wrongful death and survival claims and	orders notice be give	en by the fiduciary, as
provided in the Rules of Civil Procedure, to	the wrongful death an	nd survival claim
beneficiaries who have not waived notice.		

Ralph Winkler, Probate Judge

ESTATE OF_____, DECEASED

CASE NO. _____

WAIVER AND CONSENT WRONGFUL DEATH AND SURVIVAL CLAIMS

The undersigned waive notice of the hearing and consent to and approve the settlement and distribution as set forth in Form 14.0, Application to Approve Settlement and Distribution of Wrongful Death and Survival Claims, a copy of which I have received.

ESTATE OF_____

, DECEASED

CASE NO.

ENTRY APPROVING SETTLEMENT AND DISTRIBUTION OF WRONGFUL DEATH AND SURVIVAL CLAIMS

Upon hearing the application to approve settlement and distribution of the wrongful death and survival claims, the Court:

Approves the proffered settlement of \$	
Orders payment of \$	to be applied to decedent's funeral and burial expenses.
Orders payment of \$ the wrongful death and survival claims.	to the fiduciary for services rendered with respect to
Orders payment of \$for attorn \$for attorn death and survival claims.	to the attorney for reimbursement of case expenses and ney fees for services rendered with respect to the wrongful
the wrongful death claim and \$	be allocated \$to to the survival claim. The amount allocated to asset of the estate and shall be reflected in the fiduciary's e.
	ul death claim are on an equal degree of consanguinity, are roceeds allocated to the wrongful death claim are to be

Orders distribution of the net proceeds allocated to the wrongful death claim to the surviving spouse, children, parents and other next of kin, in the equitable shares shown below, fixed by the Court having due regard for the injury and loss to each beneficiary resulting from the death and for the age and condition of the beneficiaries.

Name	Residence Address	Relationship to Decedent	Birthdate of Minor	Amount

CASE NO._____

Orders that the share of:	
in lieu of bond pursuant to R. C. 2111.05.	a minor(s) be deposited
guardian of the estate of such minor.	a minor(s) be paid to the
in a trust for the benefit of the child(ren) until	twenty-five years of age.
Authorizes the fiduciary to execute a release which, u	upon payment, shall be a discharge of the claim.
Orders the fiduciary and the attorney to report the dis this Entry.	stribution of the proceeds within thirty days of the date of
Further orders	
Approved:	
Attorney for Fiduciary	Ralph Winkler, Probate Judge
Attorney Registration No.	Date

FS	ТΑ	TF	OF	
_				

___, DECEASED

REPORT OF DISTRIBUTION OF WRONGFUL DEATH AND SURVIVAL CLAIMS

Pursuant to Entry filed	, the proceeds have been paid as	
shown below and on the accompanying vo	uchers.	
Gross proceeds		\$
Funeral and burial expenses	\$	
Fiduciary fees to		
Reimbursement of case expenses to		
	\$	
Attorney fees to		
Survival claim to the estate	\$	
Total deductions	\$	
Net proceeds		\$
Net proceeds to beneficiaries.		
То:	\$	
Total payments to beneficiaries		\$
	Balance	-0-

☐ The fiduciary states that there are no other assets remaining in the estate.

 $\hfill\square$ The fiduciary states that there are assets remaining in the estate.

Attorney for Fiduciary

Fiduciary

Attorney Registration No.

ESTATE OF______, DECEASED

CASE NO._____

ENTRY APPROVING REPORT OF DISTRIBUTION

The report of the distribution of the proceeds is hereby approved.

There being no further assets to administer, the fiduciary and surety, if any, are discharged.

Date

Ralph Winkler, Probate Judge