PROBATE COURT OF HAMILTON COUNTY, OHIO

RALPH WINKLER, JUDGE

ESTATE OF	, DECEASED
CASE NO	
	GFUL DEATH CLAIM 25.02(B)]
[For dates of death or	n or after April 4, 2023]
Now comes decedent below:	, the of the
Decedent's Full Name:	
A.K.A.:	
Decedent's Date of Death:	
Proof of death (e.g., a copy of t	the decedent's death certificate) is attached.
Decedent's Social Security Number (if kno	own):
	ypically opened in the county where the are filing this notice in the proper county. A
I hereby notify all interested parties that I have sub wrongful death.	ffered damages as a result of the decedent's
In signing this form, I acknowledge that because I decedent, I must prove my damages. I understand opened and a fiduciary is appointed	am not a surviving spouse, parent, or child of the d that my claim may only be pursued if an estate is
I can be reached using the contact information pro responsibility to keep my contact information up-to	
Attorney for Claimant	Claimant's Signature
Typed or Printed Name	Typed or Printed Name
Street Address	Street Address
City, State, Zip Code	City, State, Zip Code

Telephone Number (include area code)

Email Address

Telephone Number (include area code)

Email Address

Attorney Registration No.