



**RECAPITULATION**

Total Receipts..... \$ \_\_\_\_\_

Total Disbursements..... \$ \_\_\_\_\_

Balance Remaining..... \$ \_\_\_\_\_

**ITEMIZED STATEMENT OF ALL FUNDS, ASSETS AND INVESTMENTS**

ITEM \_\_\_\_\_

\$ \_\_\_\_\_

\_\_\_\_\_  
 Attorney  
 Attorney Registration No. \_\_\_\_\_

\_\_\_\_\_  
 Guardian  
 \_\_\_\_\_  
 Typed or Printed Name  
 \_\_\_\_\_  
 Address of Guardian  
 \_\_\_\_\_

**BANK CERTIFICATE**

**N.B. Must be executed when funds are on deposit.**

I HEREBY CERTIFY that the within named fiduciary, on the date named below, had on deposit in

The \_\_\_\_\_ of \_\_\_\_\_, Ohio, the sum of \$ \_\_\_\_\_

on \_\_\_\_\_ to the credit of the estate of  
Nature of Deposit

\_\_\_\_\_  
 \_\_\_\_\_  
 Dated

\_\_\_\_\_  
 Bank  
 By \_\_\_\_\_  
 Cashier