

**PROBATE COURT OF GEAUGA COUNTY, OHIO
JUDGE TIMOTHY J. GREDELL**

In Re: _____

Case No.: _____

WAIVER OF NOTICE OF HEARING ON TRUST ACCOUNT

The undersigned, being the current beneficiaries or other interested persons acknowledge receipt of a copy of the account, and waive notice of the hearing on the trust account.

Signature	Type Name
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**PROBATE COURT OF GEAUGA COUNTY, OHIO
JUDGE TIMOTHY J. GREDELL**

In Re: _____

Case No. _____

NOTICE OF HEARING ON TRUST ACCOUNT

To: _____

Street Address

City, State, Zip Code

You are hereby notified that a _____ account covering the period from _____, 20__ to _____, 20__ has been filed in this matter and a hearing will be held on _____, 20__ at 8:30 a.m. The court is located at Geauga County Courthouse Annex, 231 Main St Suite 200, Chardon, Ohio 44024.

You are required to examine the account, to inquire into the contents of the account, and into all matters that may come before the Court at the hearing on the account. **Any exceptions to the account shall be filed in writing not less than five days prior to the hearing.** Absent filing of written exceptions, the account may be approved without further notice.

Fiduciary

Attorney for the Fiduciary

Attorney Registration Number

PROBATE COURT OF GEAUGA COUNTY, OHIO
JUDGE TIMOTHY J. GREDELL

In Re: _____

Case No. _____

CERTIFICATE OF SERVICE OF TRUST ACCOUNT TO CURRENT BENEFICIARIES

This is to certify that a true and accurate copy of the _____ trust account was
(type of account)

served on _____ upon all current beneficiaries except:
(date)

The following current beneficiaries whose address is unknown:

Attorney

Fiduciary

Attorney Registration Number

PROBATE COURT OF GEAUGA COUNTY, OHIO
Timothy J. Grendell, Judge
[Geauga Probate Local Rule 74.1]

IN RE _____

CASE NO. _____

COMPUTATION OF TRUSTEE'S FEE

Fair Market Value of Trust Property as of _____, 20____ \$ _____

A. \$9.50 per \$1,000 on the first \$200,000 of fair market value of the trust property; \$ _____

B. \$7.50 per \$1,000 on the next \$800,000 of fair market value of the trust property; and \$ _____

C. \$5.50 per \$1,000 of fair market value of the trust property in excess of \$1,000,000 of the fair market value of the trust property. \$ _____

Total Fee \$ _____

Date: _____

Signature of attorney or trustee

Print name

Attorney registration no.