PROBATE COURT OF GEAUGA COUNTY, OHIO

JUDGE TIMOTHY J. GRENDELL

ESTATE OF_____, DECEASED

CASE NO. _____

INSOLVENCY SCHEDULE OF CLAIMS

[R.C. 2117.15, 2117.17, 2117.25]

The fiduciary states that this Schedule of Claims lists all claims which are presented or secured. The claims are listed by classes and in the order of priority of payment pursuant to Section 2117.25 of the Ohio Revised Code. **(Use extra sheets if necessary)**

_____
Fiduciary

Page_____ of_____Pages

[Note: Include a subtotal following each payment class and a grand total for all payment classes.]

Name and Address of Claimant	Payment Class	Amount Claimed	Estimated Payment	Claim Rejected: Y/N
	A1	$	$	No
	A1	$	$	No
	A1	$	$	No
	A1	$	$	No
	A1	$	$	No
	A1	$	$	No
	A1	$	$	No
	A1	$	$	No

Comments (Refer to Claim Number):

_____
Fiduciary

Type Name