

**PROBATE COURT OF OTTAWA COUNTY, OHIO
FREDERICK C. HANY II, JUDGE**

IN THE MATTER OF: _____

CASE NO: _____

RELEASE FOR RECORD CHECK

By my signature below, I hereby authorize the release of any and all records or information that your agency may have pertaining to me to the Probate Court of Ottawa County, Ohio.

I understand that my social security number, driver's license number and birthday listed on the attached sheet be used for conducting the record check and upon conclusion of the record check that the attached sheet containing my social security number, driver license number and birth date shall be destroyed.

Date

Signature of Fiduciary/Applicant

Typed Name

CONCLUSION OF RECORD CHECK

Records checked and found to be in order.

Records checked and found not to be in order.

Record Check Information Sheet destroyed.

Record Check Information Sheet returned to attorney.

Date

RECORD CHECK
INFORMATION STATEMENT

Name: _____

Address: _____

Date of Birth: _____

Social Security Number: _____

Driver License Number: _____