

**ASHTABULA COUNTY COURT OF COMMON PLEAS
PROBATE DIVISION
ALBERT S. CAMPLESE, JUDGE**

IN THE MATTER OF _____
CASE NO. _____

WILL FOR DEPOSIT

[R.C. 2107.07 & 2107.08; Local Rules 59.2 & 66.09.1]

I, _____, present a document purporting to be the Last Will & Testament of _____, dated _____, a resident of Ashtabula County, Ohio and request the Court accept it for deposit for safekeeping pursuant to R.C. 2107.07.

I represent to the Court that I am either the Testator, the Guardian of the Testator, the maker of the document, or I am presenting it to the Court for deposit at the request of the Testator or Guardian. The name and current address and telephone number of the Testator, nominated executor(s), attorney preparing the will, if any, known to the undersigned are identified below:

Testator Name

Address

City, State, Zip

Phone

Executor Name

Address

City, State, Zip

Phone

Alt. Executor Name

Address

City, State, Zip

Phone

Attorney Name

Address

City, State, Zip

Phone

Note: When the will is presented for a person under guardianship, a copy of this form shall be filed in the Court's guardianship file. If applicable, the guardianship case number is _____.

Depositor Signature

Address

City, State ZIP

Phone