	PROBATE COURT OF, JUDGE	COUNTY, OHIO
IN T	HE MATTER OF	
	SE NO	
	APPLICATION TO SETTLE A CLAIM OF AI [R.C. 2111.18, Sup.R. 69]	N ADULT WARD
	ck applicable boxes, complete applicable blanks, strike inapplicable imentation.]	e language, and attach supporting
The	applicant states that:	, is an adult
ward	residing at, suffered personal injury and/or ut, suffered personal injury and/or neglect, or default that entitles this person to maintain an action to r	in this county who on or
abou	neglect_or default that entitles this person to maintain an action to r	r damage to property by wrongtul ecover damages
occu and	ched is a narrative statement in support of the proffered settlement surrence, the injury or damage, the treatment progress and current prother proposed or actual settlements resulting from the same occur rethan this ward. Counsel will advise at the hearing as to liability and the treatment of the country	rognosis by the treating physicians rence being paid to the persons d collectability.
	There is a (full) (partial) sottlement offer of ©	ofter ouit was filed, the
	There is a (full) (partial) settlement offer of \$style of the case, court, and case number being	
	style of the case, court, and case number being	·
	The proffered settlement should be approved.	
	Unreimbursed medical and other expenses of \$	have been incurred.
	Attached is a list of such expenses and proposed payees.	
	A reasonable attorney fee for the attorney's services is \$	and
	reimbursement to the attorney for suit expenses is \$	A copy of the
	attorney's fee contract that has (has not) received prior approval modification, and an itemization of suit expenses are attached.	of this Court, subject to
	This is a structured settlement. All necessary documents, includ	ing a statement of the present valu

FORM 22.5 - APPLICATION TO SETTLE A CLAIM OF AN ADULT WARD

of the settlement, are filed herewith.

		CASE NO		
int requests tha	t:			
The Court auth settlement.	The Court authorize the applicant to execute a release which shall be effective upon payment of the settlement.			
	e Court order payment of the above expenses and order that the net amount of for the benefit of the ward be:			
	Deposited in the name of the, a financ without written order of this 0	ial institution,	in a restricted account and not be releas	
	Delivered to guardian of the estate.			
	Structured as set forth in the attached documents.			
	Other:			
Typed or Printed Name			Typed or Printed Name	
Attorney for Ap	· 		Applicant	
Address			Address	
Phone Number	r (include area code)		Phone Number (include area code)	
Attorney Regis	tration No			
	ENTRY SETTING HEAR	RING AND OF	RDERING NOTICE	
	above application and order Procedure, to all interested p		o'clockm. as the date and tine given by the applicant, as provided in the	
			, PROBATE JUDG	