

PROBATE COURT OF STARK COUNTY, OHIO
CURT WERREN, JUDGE

IN THE MATTER OF _____

CASE NO. _____

APPLICATION TO SETTLE A MINOR'S CLAIM

[R.C. 2111.05, R.C. 2111.18, SUP. R. 67 AND 68]

[Check applicable boxes, complete applicable blanks, strike inapplicable language, and attach supporting documentation.]

The applicant states that:

_____, is an unemancipated minor, born _____,
_____, residing at _____ in this county who on or about _____,
_____, suffered personal injury (and damage to this minor's property)
by wrongful act, neglect, or default that entitles this minor to maintain an action to recover damages.
A copy of the birth certificate is attached.

Attached is a narrative statement in support of the proffered settlement setting forth a description of the occurrence, the injury or damage, the treatment progress and current prognosis by the treating physicians, and other proposed or actual settlements resulting from the same occurrence being paid to persons other than this minor. Counsel will advise at the hearing as to liability and collectability.

☐ There is no legal guardian of the estate, and the Court may authorize the settlement without the appointment of a guardian.

☐ _____ is the legal guardian of the estate. Case No. _____

☐ _____ is (are) the parent ___ and natural guardian __.

☐ _____ is the person by whom the minor is maintained.

☐ There is a (full) (partial) settlement offer of \$ _____ without suit being filed.

☐ There is a (full) (partial) settlement offer of \$ _____ after suit was filed; the 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 of this Court, subject to modification, and an itemization of suit expenses are attached.

- ☐ The parent _____, claim \$_____ for damages on account of loss of service of this minor and that claim is included in this settlement offer.
- ☐ This is a structured settlement. All necessary documents, including a statement of the present value of the settlement are filed herewith.

The applicant requests that:

- ☐ The Court authorize the applicant to execute a release which shall be effective upon payment of the settlement.
- ☐ The Court order payment of the above expenses and order that the net amount of \$ _____ for the benefit of the minor be:
- ☐ Deposited in the name of the minor with _____, a financial institution, and not to be released until the minor attains the age of majority or upon further order of this Court.
 - ☐ Delivered to the legal guardian
 - ☐ Delivered to _____, parent and natural guardian__.
 - ☐ Delivered to _____, the person by whom the minor is maintained.
 - ☐ Structured as set forth in the attached documents.
 - ☐ Deposited into a trust, proposed trust attached, for the benefit of the beneficiary until the beneficiary reaches twenty-five years of age (R.C. 2111.82)
- ☐ Supplemental forms required by local rule of Court are attached.

Attorney for Applicant

Typed or Printed Name

Address

Phone Number (include area code)

Attorney Registration No. _____

Applicant

Typed or Printed Name

Address

Phone Number (include area code)

ENTRY SETTING HEARING AND ORDERING NOTICE

The Court sets _____, at _____ o'clock ____ m. as the date and time for hearing the above application and orders notice to be given by the applicant, as provided in the Rules of Civil Procedure, to the parents who have not waived notice and (further orders that the minor and parent ____ attend the hearing.

Curt Werren - Probate Judge

**PROBATE COURT OF STARK COUNTY, OHIO
CURT WERREN, PROBATE JUDGE**

IN RE: GUARDIANSHIP OF _____ CASE NO. _____

IN THE MATTER OF _____ CASE NO. _____

PROPOSAL FOR MINOR SETTLEMENT

AGE OF MINOR _____ DATE OF BIRTH _____

NAME OF FATHER _____ NAME OF MOTHER _____

ADDRESS OF CUSTODIAN _____

NAME OF ATTORNEY (PLAINTIFF) _____

NAME OF ATTORNEY (DEFENDANT) _____

BRIEF DESCRIPTION OF INJURY _____

NATURE OF ACCIDENT _____

POLICY LIMITS \$ _____ SUIT FILED YES ☐ NO ☐

OFFER OF SETTLEMENT \$ _____ VERDICT \$ _____

DID THE PARENTS RECEIVE MONEY IN THIS OR A RELATED CASE? YES ☐ NO ☐

IF YES HOW MUCH \$ _____ MINOR'S S.S. # _____

EXPENSES

MEDICAL EXPENSE \$ _____

HOSPITAL EXPENSE _____

TO PARENTS _____

ATTORNEY FEE _____ (%)

NET TO MINOR _____

STRUCTURED YES ☐ NO ☐ BEST RATING OF ANNUITY UNDERWRITER _____

PRESENT VALUE OF STRUCTURE \$ _____

WILL MINOR BE PRESENT? YES ☐ NO ☐

WILL BOTH PARENTS BE PRESENT? YES ☐ NO ☐

WILL DOCTOR'S DISCHARGE LETTER BE PRESENTED? YES ☐ NO ☐

WILL TORTFEASOR'S ATTORNEY BE PRESENT? YES ☐ NO ☐

WILL FUNDS BE IMPOUNDED? YES ☐ NO ☐

DATE _____

ATTORNEY FOR CLAIMANT

☐ DETAILS OF STRUCTURE ATTACHED

PROBATE COURT OF STARK COUNTY, OHIO
CURT WERREN, PROBATE JUDGE

IN THE MATTER OF _____

CASE NO. _____

WAIVER AND CONSENT TO SETTLE MINOR'S CLAIM

The undersigned, waive all claims for damages on account of loss of services of said minor, waive notice of the hearing, and consent to and approve the Form 22.0, Application to Settle Minor's Claim, a copy of which is attached hereto.

Typed or Printed Name

Typed or Printed Name

PROBATE COURT OF STARK COUNTY, OHIO
CURT WERREN, JUDGE

IN THE MATTER OF _____

CASE NO. _____

ENTRY APPROVING SETTLEMENT OF A MINOR'S CLAIM

Upon hearing the application to approve and distribute the settlement of the claim of the minor, the Court: **[check whichever of the following are applicable]**

- ☐ Approves the proffered settlement of \$ _____;
- ☐ Orders payment of \$ _____ for medical and other expenses, as follows: _____;
- ☐ Orders payment of \$ _____ to the attorney for reimbursement of suit expenses and \$ _____ for attorney fees for service rendered with respect to this matter;
- ☐ Orders payment of \$ _____ to the parent _____ for damages on account of loss of service of this minor;
- ☐ Authorizes the applicant to execute a release which, shall be effective upon payment of the settlement;
- ☐ Orders that the net amount of \$ _____, for the benefit of the minor be:
 - ☐ Deposited in the name of the minor and not to be released until the minor attains the age of majority or upon further order of this Court with Form 22.3 Verification of Receipt and Deposit filed with the Court;
 - ☐ Delivered to the legal guardian of the estate of this minor;
 - ☐ Delivered to _____, parent _____ and natural guardian _____
 - ☐ Delivered to _____, the person by whom the minor is maintained;
 - ☐ Structured as set forth in the documents attached to the application;
 - ☐ Deposited into a trust, for the benefit of the beneficiary until the beneficiary reaches twenty- five years of age. (R.C. 2111.182)
- ☐ Orders the applicant and the attorney to report on their distribution of the proceeds within thirty days of the date of this entry;
- ☐ Further orders _____

Date

Curt Werren, Probate Judge

PROBATE COURT OF STARK COUNTY, OHIO
CURT WERREN, PROBATE JUDGE

IN THE MATTER OF _____

CASE NO. _____

VERIFICATION OF RECEIPT AND DEPOSIT

Pursuant to Court order, the sum of \$ _____ was deposited with
_____ on the _____ day of _____,
_____, as evidenced by Savings/Certificate of Deposit Account Number
_____. This account is held solely in the name of
_____, a minor, whose Social
Security Number is _____

By accepting said deposit for said minor, this institution agrees that said deposit, together with accumulated interest, shall be held and no part thereof released until minor attains the age of majority or upon further order of this Court.

Financial Institution

By _____
Authorized Officer

Typed or Printed Name

Phone Number

Date

PROBATE COURT OF STARK COUNTY, OHIO
CURT WERREN JUDGE

IN THE MATTER OF _____

CASE NO. _____

REPORT OF DISTRIBUTION AND ENTRY MINOR'S CLAIM

Pursuant to Entry filed _____, the proceeds have been paid as shown below and on the accompanying vouchers.

Gross Proceeds \$ _____

Less:

Medical expenses \$ _____

Reimbursement of suit expenses to _____

\$ _____

Attorney fees to _____

\$ _____

Loss of service to _____

\$ _____

Other: _____

\$ _____

Total \$ _____

Net Proceeds

☐ Deposited pursuant to R. C. 2109.13
Form 22.3 attached

\$ _____

☐ Delivered to _____,
legal guardian of the estate

\$ _____

☐ Delivered to _____,
parent and natural guardian _____

\$ _____

☐ Delivered to _____,
the person by whom the minor is maintained

\$ _____

☐ Structured - see documents previously filed

\$ _____

☐ Deposited into a trust, for the benefit of the beneficiary until the
beneficiary reaches twenty- five years of age. (R.C. 2111.182)

\$ _____

Balance \$ - 0 -

Attorney for Applicant
Attorney Registration No. _____

Applicant

ENTRY

The above report of distribution is hereby approved and the applicant is discharged from further responsibility.

Date

Probate Judge