

**IN THE COURT OF COMMON PLEAS OF UNION COUNTY, OHIO**  
**PROBATE DIVISION**  
JUDGE RICK RODGER

ESTATE OF \_\_\_\_\_, DECEASED

CASE NO. \_\_\_\_\_

**COMMISSIONER'S VERIFIED  
REPORT AND INVENTORY OF SAFE DEPOSIT BOX**

R.C. 5731.39(F)

The duly appointed Commissioner hereby states that on \_\_\_\_\_, \_\_\_\_\_  
DATE  
I completed the inventory of the safe deposit box as ordered by this Court, located within and controlled  
by \_\_\_\_\_  
FINANCIAL INSTITUTION

- ☐ It was determined that no such safe deposit box was leased by the Decedent upon their death.
- ☐ The safe deposit box contained the Decedent's Last Will and Testament, which was removed and is delivered to the Court herewith.
- ☐ The safe deposit box contained the following items, which were inventoried but not removed:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

☐ Additional pages attached. Total Pages: \_\_\_\_\_

\_\_\_\_\_  
Signature of Attorney for Commissioner

\_\_\_\_\_  
Signature of Commissioner

\_\_\_\_\_  
Attorney Name

\_\_\_\_\_  
Commissioner Name (Typed or Printed)

\_\_\_\_\_  
Attorney Registration No.

**VERIFICATION**

I, the undersigned Financial Institution Employee, verify that I was personally present when the safe deposit box was opened and during the inventory, and verify the above report (and \_\_\_\_\_ attached page(s), if any) is accurate.

\_\_\_\_\_  
Financial Institution Employee Name (Printed)

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Date