## PROBATE COURT OF SUMMIT COUNTY, OHIO ELINORE MARSH STORMER, JUDGE

| ESTATE OF |  |                                |                 |                        |           |                  |             | DECEASED        |
|-----------|--|--------------------------------|-----------------|------------------------|-----------|------------------|-------------|-----------------|
| CASE NO   |  |                                |                 |                        |           |                  |             |                 |
| COMPU     | TATI   | ON SCHEDU                      |                 | <b>ADN</b><br>. 2113.3 |           | RATOR/E          | XECUT       | OR FEES         |
| 1. FULL A | ADMINIS  | STRATION OF ESTA               | ATE             |                        |           |                  |             |                 |
| A.        | PERS   | ONAL PROPERTY                  | and INCOME      | (IN ES                 | STATE in  | cluding gross pr | oceeds of r | eal estate sold |
|           | under  | authority of Will)             |                 |                        |           |                  |             |                 |
|           |  | Personal F                     | Property        | \$                     |           |                  |             |                 |
|           |  | Income                         |                 |                        |           |                  |             |                 |
|           |  | TOTAL                          |                 | \$                     |           |                  |             |                 |
|           |  |                                |                 |                        |           |                  |             |                 |
|           | Fees:  | 0 -                            | \$100,000       | @                      | 4%        | \$               |             |                 |
|           |  | \$100,001 -                    | \$400,000       |                        | 3%        |                  |             |                 |
|           |  | \$400,001 -                    | Up              | @                      | 2%        | \$               |             |                 |
|           |  |                                |                 | A                      | . TOTAL   | _ \$             |             |                 |
| В.        | REAL   | ESTATE (NOT SOL                | D IN ESTAT      | Έ)                     |           |                  |             |                 |
|           | В.   | 1 % of \$                      |                 | -                      | ld Real E | state            | \$          |                 |
| <u></u>   | NON E  | PROBATE ASSETS                 |                 |                        |           |                  |             |                 |
| 0.        |  |                                |                 |                        |           | •                |             |                 |
|           | C.   | 1 % of \$<br>would have been i |                 |                        |           |                  |             |                 |
|           |  | the Decedent died              | \$              |                        |           |                  |             |                 |
| D.        | EXTR   | AORDINARY FEES                 |                 |                        |           |                  |             |                 |
|           | D. Extraordinary Fees Requested (Attach itemized time records, and unless waived, a date for hearing should be requested when filing this form). |                                |                 |                        |           |                  |             |                 |
|           |  | · ·                            | ···· <i>)</i> . |                        |           |                  | \$          |                 |
| RECAF     | PITULAT  |                                |                 |                        |           |                  |             |                 |
|           | Item   | A. \$                          |                 |                        |           |                  |             |                 |
|           | Item   | B. \$                          |                 |                        |           |                  |             |                 |
|           | Item   | C. \$                          |                 |                        |           |                  |             |                 |
|           | Item   | D. \$                          |                 |                        |           |                  |             |                 |

|                             | Total Administrator/E | Executor Allowable | e by St                             | atute           |   | \$ |  |  |
|-----------------------------|-----------------------|--------------------|-------------------------------------|-----------------|---|----|--|--|
|                             | Fees Paid In Prior A  |                    | (-)                                 | \$              |   |    |  |  |
|                             | Balance Payable       |                    |                                     |                 |   | \$ |  |  |
|                             | Fee Requested         | ☐ Final            |                                     | Partial Account |   | \$ |  |  |
| Signature of Atto           |                       | Signature of Ad    | Signature of Administrator/Executor |                 |   |    |  |  |
| Attorney Print or Type Name |                       |                    |                                     | Administrator/E | Administrator/Executor Print or Type Name |    |  |  |

CASE NO.

To Be Attached To Estate Account