

**PROBATE COURT OF HAMILTON COUNTY, OHIO
JAMES CISSELL, JUDGE**

**IN THE MATTER OF _____, AN ADULT
CASE NO. _____**

**NOTICE OF PETITION FOR COURT ORDERED
PROTECTIVE SERVICES**

[R.C. 5101.66]

TO: _____
Name and Address of Adult Incapacitated Person

Name	Address	Relationship	of Adult
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Adult, Guardian, Legal Counsel, Caretaker, Spouse, if any, and if none of these to the Adult's Children or Next of Kin

You are hereby notified that on the _____ day of _____, 20____, the _____ County Department of Job and Family Services filed in this Court a Petition for Court Ordered Protective Services for the above named Adult for the following reason(s): _____
_____.

This Petition for Court Ordered Protective Services shall be heard in the Hamilton County Probate Court, Cincinnati, Ohio located at _____ on the _____ day of _____, 20____, at _____ o'clock _____.M.

The Adult has the right to legal counsel and if indigent, legal counsel will be appointed if requested.

Witness my signature and the seal of the Court
this _____ day of _____, 20____.

Probate Judge

By:

Deputy Clerk

WAIVER OF NOTICE

We, the undersigned, whose relationship to the Adult is indicated, enter our appearance and waive notice and consent to the hearing.

Name	Relationship to the Adult
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_____	_____
_____	_____
_____	_____

CASE NO. _____

State of Ohio, Hamilton County Probate Court

I hereby certify that I caused a copy of the within notice to be mailed, by certified mail, to the last known address of

_____ at _____

_____ at _____

_____, Probate Judge

By: _____
Deputy Clerk

RETURN

_____ County, Ohio

Received this notice on the _____ day of _____, 20_____, at _____ o'clock _____ .M., and on the _____ day of _____, 20_____, I served the same by delivering a true copy thereof personally to _____

_____ FEES

Service and return, 1st name, \$ _____

Additional names, at \$ _____

Miles traveled, at \$ _____

_____ \$ _____

Total \$ _____

_____ Sheriff

_____ Deputy Sheriff/Process Server

_____ Name

_____ Title