

**PROBATE COURT OF HAMILTON COUNTY, OHIO
RALPH WINKLER, JUDGE**

GUARDIANSHIP OF _____

CASE NO. _____

**AUTHORIZATION TO RELEASE
CONFIDENTIAL INFORMATION**

Name _____
Last First Middle

Date of Birth _____ Social Security Number _____

I hereby authorize the release of all confidential records and information concerning me to any officer or agent of the Hamilton County Probate Court for the purpose of an investigation pertaining to a proposed Guardianship.

Witness Date

Applicant