PROBATE COURT OF GEAUGA COUNTY, OHIO
JUDGE TIMOTHY J. GRENDELL

IN THE MATTER OF _____, AN

ADULT CASE NO. _____

NOTICE OF PETITION FOR COURT ORDERED PROTECTIVE SERVICES

[R.C. 5101.681]

TO:
Name and Address of Adult Incapacitated Person
_____

Name **Address** **Relationship of Adult**

_____
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 _____County Probate Court, _____, 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**

_____
_____
_____

CASE NO._____

State of Ohio, _____ 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		Sheriff
_____		
Service and return, 1st name,	$ _____	_____
		Deputy Sheriff/Process Server
Additional names, at	$ _____	
Miles traveled, at	$ _____	_____
		Name
_____	$ _____	
		_____
Total	$ _____	Title