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

IN THE MATTER OF _____, AN ADULT

CASE NO. _____

NOTICE OF HEARING ON PETITION FOR TEMPORARY RESTRAINING ORDER TO PREVENT INTERFERENCE WITH THE PROVISION OF SERVICES

[R.C. 5101.69]

TO:_____
(Name of Person interfering with the provision of services)

_____
(Address)

The above captioned Adult has consented to the provision of adult protective services pursuant to Chapter 5101. of the Revised Code.

You hereby notified that a Petition for Temporary Restraining Order to Prevent Interference with the Provision of Services was filed with this Court pursuant to R.C. 5101.69. It is alleged in the Petition that you are interfering with the provision of protective services for the Adult, and that a temporary restraining order should be issued against you to prevent your interference. A copy of the Petition is attached hereto.

The Petition for Temporary Restraining Order to Prevent Interference with the Provision of Services shall be heard in the Geauga County Probate Court, Chardon, Ohio located at 231 Main St., Suite 200, Chardon, Ohio 44024 on the _____ day of _____, 20 _____ at _____ o'clock _____.M. You or any interested person is permitted to attend this hearing and give testimony or present other evidence as to why the petition for restraining order should or should not be granted.

Witness my signature and the seal of the Court
This _____ day of _____, 20 ___.

_____
Probate Judge

By:_____
Deputy Clerk

CASE NO._____

The 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_____

Timothy J. Grendell, Probate Judge

By: _____
Deputy Clerk

RETURN

Geauga 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