

PROBATE COURT OF BUTLER COUNTY, OHIO
JOHN M. HOLCOMB, JUDGE

IN THE MATTER OF: _____, **AN ADULT**

CASE NO. _____

**NOTICE OF PETITION FOR COURT ORDERED
PROTECTIVE SERVICES ON AN EMERGENCY BASIS**

[R.C. 5101.69]

TO: _____
Name of Adult, spouse, if any, if no spouse, adult children or next of kin, and guardian, if any, if their whereabouts are known.

You are hereby notified that on the _____ day of _____, _____, the Butler County Department of Job & Family Services filed a Petition for Court Ordered Protective Services to be provided for the above named Adult without the Adult's consent on the grounds that an emergency exists and that the Department has been unable to obtain the consent of the Adult for protective services to be given. A copy of the petition is attached hereto.

This Petition has been set for hearing in the Butler County Probate Court, Hamilton, Ohio located at the Butler County Courthouse 101 High Street, Second Floor on the _____ day of _____, _____, at _____ o'clock AM/PM. The Adult may appear at the hearing, may present, examine, and cross-examine witnesses, and present evidence to contest the petition. The Adult is entitled to be represented by an attorney and, if found to be indigent, the Adult may request an attorney to be appointed without cost.

WITNESS my signature and seal of said Court,
this _____ day of _____, _____

Probate Judge

By: _____
Deputy Clerk

CASE NO. _____

The State of Ohio, Butler 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 _____

John M. Holcomb, Probate Judge

By: _____
Deputy Clerk

RETURN

Butler County, Ohio

_____ , _____

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

_____	FEES	_____
_____		_____
_____	Service and return, 1 st name, \$	_____
_____	Additional names, at \$	_____
_____	Miles traveled, at \$	_____
_____		\$ _____
_____	Total	\$ _____
_____		_____

_____	Sheriff

_____	Deputy Sheriff/Process Server

_____	Name

_____	Title