

PROBATE COURT OF GREENE COUNTY, OHIO
THOMAS M. O'DIAM, JUDGE

GUARDIANSHIP OF _____
CASE NO. _____

**NOTICE TO WARD OF 72 HOUR APPOINTMENT
OF EMERGENCY GUARDIAN**

To: _____
Name of Facility: _____
(If applicable)
Address: _____

_____ was appointed Emergency Guardian for you on _____,
20____, with powers limited to those powers that are necessary to prevent injury to the: Person and estate Estate
only Person only

The guardianship is limited to 72 hours unless extended by the Court.

- There has not been a Motion for 30 Day Continued Appointment filed, and therefore, there is no hearing scheduled to determine the further necessity of the guardianship, beyond the 72 hours.
- A hearing to determine the further necessity of guardianship for a period not to exceed an additional thirty (30) days will be held on _____, 20____ at _____, ____ M at Greene County Probate Court, 45 N. Detroit St., Xenia, Ohio 45385.

- 1. You have the right to be present at the hearing to contest the application, and to be represented by an attorney of your choice;**
- 2. The right to have a friend or family member of your choice present at the hearing;**
- 3. The right to have evidence of an independent expert evaluation introduced at the hearing;**
- 4. If you are indigent, upon your request, an attorney and an independent expert evaluator will be appointed at court expense;**
- 5. If you are indigent, and you appeal the guardianship decision, you have the right to have an attorney appointed and necessary transcripts prepared at court expense.**

Witness my signature and the seal of the Court
Thomas M. O'Diam, Probate Judge

By: _____
Deputy Clerk

(Seal)

_____ Date

CASE NO. _____

RETURN

_____ County, Ohio
_____, 20____

Received this writ on the _____ day of _____, 20____, at _____ o'clock _____. M., and on the _____ day of _____, 20____, I served the same by (delivering leaving, or sending) _____

a true copy thereof (personally to at the usual place of residence, or by certified mail to the last known address of)

_____ Fees _____

Service and return, 1st name \$ _____

_____ Additional names, at _____

_____ Miles traveled, at _____

Total \$ _____

Sheriff

Deputy

AFFIDAVIT OF SERVICE

The State of Ohio, _____ County.

_____, being first duly sworn, says that on the _____ day of _____, 20____, he served the within notice by delivering a true copy thereof personally to _____

Sworn to before me and signed in my presence, this _____ day of _____, 20____

Notary Public