

**PROBATE COURT OF FRANKLIN COUNTY, OHIO
ROBERT G. MONTGOMERY, JUDGE**

IN THE MATTER OF _____ RESPONDENT
CASE NO. MI _____

SUMMONS AND NOTICE TO RESPONDENT

You have been named as a person who is mentally ill and subject to court ordered treatment in the attached Affidavit which has been filed in the Franklin County Probate Court, Columbus, Ohio.

You are hereby summoned, ordered to appear and notified that the Affidavit will be set for hearing before this court at:

PLACE: Twin Valley Behavioral Healthcare, 2200 W. Broad St., Columbus, Ohio 43223

DATE: _____ TIME: 9:00 A.M.

You may retain counsel. If you are unable to obtain an attorney, you will be represented by court appointed counsel. You may have an independent expert evaluation at state expense. Consult with your attorney on the need for an independent expert evaluation.

If you do not wish to obtain your own counsel, _____ has been appointed to represent you at this hearing.

Phone: _____ **Address:** _____

Witness my signature and seal of said Court on this _____ day of _____, 20 _____.

Robert G. Montgomery, Judge

By: _____ Signature Page Attached
Deputy Clerk