FOR CLERK USE ONLY	HAMILTON COUNTY M	MUNICIPAL (COURT, CINCINN	ATI, OH	Ю		
DATE							
ROOM							
TIME							
EX PARTE							
HEARING							
HEARING							
			CASE	NO			
PLAINTIFF							
ADDRESS							
CITY, STATE, ZIP CODE		PHONE NO.					
	VS.						
DEFENDANT							
ADDRESS							
CITY, STATE, ZIP CODE		PHONE NO.					
I hereby certify that a sent to all entitled part	true copy of the foregoing was ies by regular U.S. mail on:		REQUESTED BY:	PLT.	OR	DEF.	

DATE: _____

SIGNATURE: