

PROBATE COURT OF \_\_\_\_\_ COUNTY, OHIO  
\_\_\_\_\_, JUDGE

IN THE INTEREST OF: \_\_\_\_\_

CASE NO. \_\_\_\_\_

**AFFIDAVIT OF REFUSAL OF EXAMINATION**  
[R.C. 5119.93(C)(1)]

I, \_\_\_\_\_, Petitioner, filed in this Court a  
Petition on \_\_\_\_\_ alleging that \_\_\_\_\_,  
Respondent, is a person in need of substance abuse treatment by Court Order.

Respondent has refused all requests made by me, the Petitioner, to undergo a  
physician's examination concerning the possible need for substance abuse treatment.

\_\_\_\_\_  
Petitioner's Printed Name

\_\_\_\_\_  
Petitioner's Signature

Sworn to and signed in my presence on \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public