

**IN THE COURT OF COMMON PLEAS, UNION COUNTY, OHIO
JUVENILE DIVISION**

In the Matter of _____

Case No. _____

(NAME OF MINOR CHILD)

**REVOCAION OF GRANDPARENT POWER OF ATTORNEY
PURSUANT TO R.C. 3109.59**

I(We), the undersigned, residing at _____ [ADDRESS], in the county of _____, state of _____, who is/are the parent(s) guardian(s) legal custodian(s) of _____ [CHILD'S NAME], born _____ [CHILD'S DOB], having previously appointed said child's grandparent, _____ [NAME], residing at _____ [ADDRESS], in Union County, Ohio, as my/our attorney in fact to exercise any and all of my/our rights and responsibilities regarding the care, physical custody, and control of the child, **hereby revoke and terminate that appointment.**

By the signature(s) below, I/we **certify** that a copy of this revocation (1) has been filed with this Court and (2) has been served upon the grandparent named in said power of attorney.

Parent(s)/Guardian(s)/Legal Custodian(s) who executed Original Power of Attorney:

Print Name

Signature

Date

Print Name

Signature

Date

IN ACCORD WITH SECTION R.C. 3109.74, THIS REVOCATION SHALL BE FILED WITH THIS COURT NOT LATER THAN FIVE DAYS AFTER THE TERMINATION DATE.

**IN THE COURT OF COMMON PLEAS, UNION COUNTY, OHIO
JUVENILE DIVISION**

In the Matter of _____

Case No. _____

(NAME OF MINOR CHILD)

**NOTICE OF TERMINATION OF
GRANDPARENT POWER OF ATTORNEY PURSUANT TO R.C. 3109.60**

I, the undersigned grandparent, residing at _____ [ADDRESS],
in Union County, Ohio, having previously appointed in a Power of Attorney issued pursuant to Section
3109.52 of the Revised Code by the parent or parents of this child _____ [NAME], born
_____ [CHILD'S DOB], having previously appointed the attorney in fact to exercise any and
all of the parent(s) rights and responsibilities regarding the care, physical custody, and control of said
child, **hereby indicates and notifies all interested persons that said appointment has been revoked
and terminated** pursuant to R.C. 3109.59 effective _____ [DATE OF TERMINATION].

By my signature below, I hereby certify that a copy of this notice has been filed with this Court and that
copies of this document have been or will be served upon the child's (1) most recent school; (2) medical
providers; (3) health insurance provider; (4) the parent who is not the residential parent and legal custodian
and who is required to be given notice under section 3109.55 of the Revised Code; and (5) any other
person or entity that has an ongoing relationship with the child or grandparent such that the person or
entity would reasonably rely upon and have acted in reliance upon the power of attorney that has now
been revoked.

Print Name of Grandparent

Signature of Grandparent

Date

IN ACCORD WITH SECTION R.C. 3109.60, THIS NOTICE SHALL BE SERVED UPON
ALL ENTITIES SET FORTH ABOVE NOT LATER THAN
ONE WEEK AFTER THE DATE THAT THE POWER OF ATTORNEY TERMINATES.