IN THE COURT OF COMMON PLEAS
WAYNE COUNTY, OHIO

_____	)	CASE NO. _____
Plaintiff/Petitioner	)	
v.	)	JUDGE_____ MAGISTRATE_____
_____	)	**NOTICE OF COMPLIANCE**
Defendant/Petitioner	)	

A psychological or custody evaluation has been ordered in this case. I acknowledge that I may obtain receipt of a copy of the confidential report from that evaluation. I understand that I am not permitted to reveal the contents of this report or give a copy of this report to anyone outside of this case, except as needed or requested by a mental health counselor or physician treating me or the children involved with me, my family or this case. I understand that I can not allow any other person to reveal the contents of this report or give a copy of this report to anyone outside of this case and that I can be found in contempt of court of court under the Rules of the Wayne County Court of Common Pleas if I do so.

If I am found in contempt of court, I understand that I can be fined, sanctioned, and/or jailed. I agree to maintain the confidential nature of this report.

_____
Signature of Party/Guardian *ad litem* Date

_____
Counsel of Record Date

WITNESSED (needed for *pro se* party only):

_____