

MID-OHIO PSYCHOLOGICAL SERVICES, INC.
624 & 630 East Main Street
Lancaster, Ohio 43130

Voice (740) 687-0042

Fax (740) 687-6677

Bradley A. Hedges, Ph.D.
Executive Director

State of Ohio
County of Fairfield

I, _____ do hereby under oath depose and say that
the attached documents are copies of original documents from the mental health record for
_____ stored at the above address.

(Signature) (Title)

(Signature of Supervisor if Applicable) (Title)

Subscribed and sworn to me in Lancaster, Ohio on the _____ day of
_____, 20_____.

(Signature Notary Public, Title)