**IN THE COURT OF APPEALS**

**NINTH JUDICIAL DISTRICT**

**\_\_\_\_\_\_\_\_ COUNTY, OHIO**

) C.A. No.

)

)

)

1. )

) NOTICE OF WAIVER

) OF ORAL ARGUMENT

)

)

)

This case is scheduled for oral argument on at .

(Date) (Time)

, who is the , hereby waives

(Name of Party) (Party Designation)

oral argument.

(Party or Attorney Signature)

(Name and Address)

## PROOF OF SERVICE

# I certify that a copy of this Notice of Waiver of Oral Argument was served upon the

# following counsel and/or parties by on :

(Manner of Service) (Date of Service)

(Names and addresses of persons served)

(Party or Attorney Signature)