

IN THE COURT OF COMMON PLEAS

DIVISION

COUNTY, OHIO

IN THE MATTER OF:

\_\_\_\_\_

A Minor

\_\_\_\_\_

Name

\_\_\_\_\_

Street Address

\_\_\_\_\_

City, State and Zip Code

Case No. \_\_\_\_\_

Judge \_\_\_\_\_

Magistrate \_\_\_\_\_

Plaintiff

vs.

\_\_\_\_\_

Name

\_\_\_\_\_

Street Address

\_\_\_\_\_

City, State and Zip Code

Defendant

**WARNING: This form is not a substitute for the benefit of the advice of legal counsel.  
It is highly recommended that you consult an attorney.**

**Instructions:** This form is used to establish parentage of the child(ren), be designated as the residential parent, or obtain parenting time (companionship and visitation) with the child(ren). A Request for Service (Uniform Domestic Relations Form 31), a Parenting Proceeding Affidavit (Uniform Domestic Relations Form - Affidavit 3) and an Affidavit of Basic Information, Income and Expenses (Uniform Domestic Relations Form - Affidavit 1) must be filed with this Complaint. The Court may require additional forms to accompany this document. You must check the requirements of the county in which you file. **YOU MUST UPDATE THE CLERK OF COURTS IF ANY OF THE ABOVE CONTACT INFORMATION CHANGES.**

**COMPLAINT FOR PARENTAGE,  
ALLOCATION OF PARENTAL RIGHTS AND RESPONSIBILITIES (CUSTODY), AND  
PARENTING TIME (COMPANIONSHIP AND VISITATION)**

Now comes Plaintiff and states as follows:

1. Plaintiff is a parent of the following child(ren):

<b>Name of Child</b>	<b>Date of Birth</b>
_____	_____
_____	_____
_____	_____
_____	_____

2. Defendant, \_\_\_\_\_ (name) is a parent of the following child(ren):

<b>Name of Child</b>	<b>Date of Birth</b>
_____	_____
_____	_____
_____	_____
_____	_____

3. The child(ren) has/have resided in \_\_\_\_\_ County, Ohio since \_\_\_\_\_ (date).

4. A parent-child relationship has been established for the following child(ren):

<b>Name of Child</b>	<b>Date of Birth</b>
_____	_____
_____	_____
_____	_____
_____	_____

5. A parent-child relationship has not been established for the following child(ren):

<b>Name of Child</b>	<b>Date of Birth</b>
_____	_____
_____	_____
_____	_____
_____	_____

6. No Court has issued an order of parenting or support for the following child(ren):

<b>Name of Child</b>	<b>Date of Birth</b>
_____	_____
_____	_____
_____	_____
_____	_____

The following child(ren) is/are subject to an existing order of parenting or support of another Court:

Name of Child	Date of Birth
_____	_____
_____	_____
_____	_____
_____	_____

7. Plaintiff requests that the Court: *(check all that apply)*

Order genetic testing and determine the parent of the child(ren).

Designate \_\_\_\_\_ (parent's name) as the parent of the child(ren) \_\_\_\_\_ (child(ren)'s name).

Change the child(ren)'s name to \_\_\_\_\_.

Correct the child(ren)'s birth certificate(s) to indicate the child(ren)'s parent.

Adopt the proposed Shared Parenting Plan which is attached.

Adopt the proposed Parenting Plan which is attached.

Designate the residential parent and legal custodian of the child(ren).

Order reasonable parenting time (companionship or visitation).

Order child support, allocate the income tax dependency exemption, and determine who should provide health insurance coverage for the child(ren).

Order the Ohio Department of Health to prepare (a) new birth certificate(s) for the child(ren).

Other: *(specify)* \_\_\_\_\_

\_\_\_\_\_  
Attorney or Self Represented Party Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
Supreme Court Reg No. (if any)