

SERVICE

When a complaint/motion and affidavit is filed with the Juvenile Court clerks:

In accordance with Civil Rules 4(A), (C) and (C), 4.1-4.3, 4.5 and 4.6, a summons shall be served to direct the parties being served to appear at a stated time and place.

1. A summons will be issued to all necessary parties with a copy of the original complaint attached.
2. The summons will require the parties to appear at a fixed time to answer the complaint. The hearing will be set approximately 45 days from the date the complaint was filed to allow enough time for service to be completed.
3. The minor child(ren) of the action will not be summoned unless the Court directs otherwise.
4. The court will issue the summons by certified mail through the U.S. Postal Service and the Post Office will be required to notify the court when service is made by returning the *green signature card* to the court.
5. If the Post Office is not able to serve the summons, they are required to notify the court. The court will then re-issue the summons by regular mail through the U.S. Postal Service using a certificate of mailing form which requires the Post Office to verify that it was mailed by regular mail.
6. If the summons is returned to the court after being issued by regular mail, the court will contact you.

COURT OF COMMON PLEAS, CHAMPAIGN COUNTY, OHIO
DOMESTIC RELATIONS-JUVENILE-PROBATE

IN THE MATTER OF:
THE MINOR CHILD

CASE NO.: _____
PRO SE COMPLAINT/MOTION FOR

Child's full name

(For example: Custody, Visitation, Support, etc.)

1. My name is: _____
My address is: Street _____ Phone _____
City _____ State _____ Zip Code _____

2. My relationship to the child is: Father _____ Mother _____ Grandparent _____ Custodian _____
Other (state relationship) _____

3. The child's Social Security No. is: _____ Date of Birth _____

The child's address is: Street _____
City _____ State _____ Zip Code _____

4. The child's mother's name is: _____ Phone _____

The mother's address is: Street _____
City _____ State _____ Zip Code _____

5. The child's father's name is: _____ Phone _____

The father's address is: Street _____
City _____ State _____ Zip Code _____

6. The Legal Custodian of the child is: _____ Phone _____

The Legal Custodian's address is: Street _____
City _____ State _____ Zip Code _____

7. Paternity of the child (Check one) has been determined by Court Order.
Name of Court _____ State of _____

has been determined by Administrative Order through the
_____ County Child Support Enforcement Agency

8. I am asking the Court to (Briefly state the type of action you are asking the Court to take): _____

Complainant/Movant Signature Date

SWORN TO AND SUBSCRIBED IN MY PRESENCE THIS
_____ DAY OF _____, 20____.

BY: _____ Deputy Clerk

COURT OF COMMON PLEAS, CHAMPAIGN COUNTY, OHIO
DOMESTIC RELATIONS-JUVENILE-PROBATE

IN THE MATTER OF:

THE MINOR CHILD

CASE NO.: _____

AFFIDAVIT

CHILD'S FULL NAME

I, _____, being first duly sworn, certify that the following that the
PRINT FULL NAME

following statements are true:

1. This case involves the custody or visitation, or both, of the following child:

Name of child: _____

Date of Birth: _____

Social Security Number: _____

Address of child: _____

STREET

CITY STATE ZIP CODE

2. The names and addresses of the persons the child has lived with in the last five (5) years are:

Name	Address	How long?
(A) _____	_____	_____
(B) _____	_____	_____
(C) _____	_____	_____
(D) _____	_____	_____
(E) _____	_____	_____

3. The father of the child is: _____

And his address is: _____

STREET

CITY STATE ZIP CODE

4. The mother of the child is: _____

And her address is: _____

STREET

CITY STATE ZIP CODE

5. That I (Check one) HAVE HAVE NOT participated as a party, a witness, or in any other capacity in any custody proceeding concerning this child in the State of Ohio or any other state.

6. That I (Check one) HAVE HAVE NO knowledge of any custody proceeding concerning the child that is currently taking place or has taken place in any court in the State of Ohio or any other state.

7. That I (Check one) HAVE HAVE NO knowledge of any other person that has physical custody of the child or claims to have custody or visitation rights in regards to this child.

8. That I (Check one) HAVE HAVE NOT been convicted of or plead guilty to any criminal offense that resulted in this child or any child being an abused or neglected.

9. That I (Check one) HAVE HAVE NOT been found to be the person responsible for any action in which this child or any child was determined to be an abused or neglected child.

10. I understand that if I obtain any information about any other proceedings taking place regarding this child within the State of Ohio or any other state during the process of this action, I am required to immediately inform this Court.

I swear or affirm by my dated signature that the foregoing information provided by me within this Affidavit is true and correct, to the best of my knowledge.

Signature Date

Sworn to before me and subscribed in my presence by _____
on this _____ day of _____, 20____.

Deputy Clerk / Notary Public

seal

Notary Commission expires _____