

If you or your spouse own any **real estate**, or have any type of **pension plan**, you should **consult a private attorney** before using these forms.

### **Do It Yourself DIVORCE - WITH CHILDREN** - Washington County

Type or Print all Forms - *If you are downloading the forms from the website, the forms are in PDF and can be typed online and then saved on your computer or flash drive for revision and printing.*

**\* All forms in BOLD must be signed in front of a notary.\***

#### Forms to be completed by you

- 1** Complaint - Tells the Court why you want a divorce and what you want.
- 2** **Affidavit of Indigency** - Tells the Court you cannot afford to prepay the filing fee.
- 3** Instructions for Service - Tells the Court where to send copies to your spouse.
- 4** **Parenting Proceeding Affidavit** - Tells the Court about your children.
- A** **Financial Affidavit**- Provides financial information to be used in your case. Make two copies. You fill out one and leave one blank for the clerk to send to your spouse. You will also need to complete a **Property Affidavit** and a **Health Insurance Affidavit**.
- B** **Information Sheet** - Provides background information for the clerk to use in your case.
- C** **Application for Child Support Services - DO NOT FILL THIS OUT IF THERE ALREADY IS A SUPPORT ORDER.** If there is **NO** child support order, you **MUST** fill out the IV-D Application and file it with the Washington County Child support Enforcement Agency to calculate the appropriate child support **BEFORE YOUR DIVORCE WILL BE ACCEPTED FOR FILING.** *Your divorce will NOT be accepted if you do not have the child support agency receipt showing that you filed with the agency before you filed this divorce.*

#### Additional Forms if You Need Immediate Orders

- 5** **Motion and Affidavit for Temporary Orders** - Tells the Court what you are asking for now.

#### After completing the forms

- Make three (3) copies of each completed form.
- Take the originals and three (3) copies to Clerk of Common Pleas Court.
- If you completed Form **2**, you will pay nothing at the time of filing.
- If you did not complete Form **2**, the filing fee is \$350.00. You should call the clerk and ask.
- 6** **Affidavit for Service** - If you do not know where your spouse lives **and** you have completed Form **2** then complete Form **6** to obtain service then also give the Clerk Order A  Order for Service
- If you filed Form **5** then also give the Clerk Order B  Temporary Orders

#### After forms are filed

Clerk will send you notice of any court dates. Attend all of these court dates.

If you move, call the Clerk with your new address.

Bring **Order C** Judgment Decree of Divorce to the final hearing. The judge will complete the form.

IN THE COURT OF COMMON PLEAS

Division
COUNTY, OHIO

Name
Street Address
City, State and Zip Code
Plaintiff
vs.
Name
Street Address
City, State and Zip Code
Defendant
Case No.
Judge
Magistrate

Instructions: This form is used to request a divorce if you and your spouse have (a) minor child(ren), adult child(ren) attending high school, or child(ren) with disabilities, and/or the Wife is pregnant. Check to determine if you meet the residency requirement to file in this county. A Request for Service (Uniform Domestic Relations Form 28) must be filed with this form. The Parenting Proceeding Affidavit (Uniform Domestic Relations Form - Affidavit 3) must be filed.

COMPLAINT FOR DIVORCE WITH CHILDREN

I, the Plaintiff, for this Complaint say:

- 1. I have been a resident of the State of Ohio for at least six months.
2. I have been a resident of County for at least 90 days immediately before the filing of this Complaint; or
The Defendant resides in County where this Complaint is filed.
3. The Defendant and I were married to one another on (date of marriage) in (city or county, and state).

# Form 1

4. I state regarding children (check all that apply):

- The Wife is not pregnant.
- The Wife is pregnant and the approximate due date is: \_\_\_\_\_
- The following child(ren) were born from or adopted during this marriage or relationship (name and date of birth of each child):

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

- Husband is not the biological father of the following child(ren) who were born during the marriage (name and date of birth of each child): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. I state the following grounds for divorce exist (check all that apply):

- The Defendant and I are incompatible.
- The Defendant and I have lived separate and apart without cohabitation and without interruption for one year.
- The Defendant or I had a Husband or Wife living at the time of the marriage.
- The Defendant has been willfully absent for one year.
- The Defendant is guilty of adultery.
- The Defendant is guilty of extreme cruelty.
- The Defendant is guilty of fraudulent contract.
- The Defendant is guilty of gross neglect of duty.
- The Defendant is guilty of habitual drunkenness.
- The Defendant was imprisoned in a state or federal correctional institution at the time the Complaint was filed.
- The Defendant procured a divorce outside this state by virtue of which the Defendant has been released from the obligations of the marriage, while those obligations remain binding on me.

6. The Defendant and I are owners of real estate and/or personal property.

I request that a divorce be granted from the Defendant, that the Court determine an equitable division of debts and property, and as follows that (check all that apply):

- The Defendant be required to pay me spousal support.
- The Plaintiff be named the residential parent and legal custodian of the following minor child(ren): \_\_\_\_\_  
\_\_\_\_\_
- The Defendant be named the residential parent and legal custodian of the following

# Form 1

child(ren): \_\_\_\_\_

- The non-residential parent be granted specific parenting time.  
 The Defendant and I be granted shared parenting of the following child(ren):

\_\_\_\_\_

pursuant to a Shared Parenting Plan (Uniform Domestic Relations Form 17), which I will prepare and file with the Court.

- The Defendant be ordered to pay child support and medical support.  
 I be restored to my prior name of: \_\_\_\_\_  
 The Defendant be required to pay attorney fees.  
 The Defendant be required to pay the court costs of the proceeding.  
 The Court make the following additional orders: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

and that the Court grant such other and further relief as the Court may deem proper.

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Telephone number at which the Court may reach you  
or at which messages may be left for you

**INSTRUCTIONS FOR POVERTY AFFIDAVIT – COMMON PLEAS**

- **PRINT OR TYPE** -

1. Fill in the name of the county where the action is.
2. Fill in the name of the Plaintiff.
3. Fill in the name of the Defendant.
4. Fill in the Case Number of the action.
5. Fill in your name.
6. Sign your name ONLY IN FRONT OF A NOTARY IF THE affidavit is correct.

**MAKE 2 COPIES AND TAKE WITH THE MOTION TO THE COURT**

**PLEASE NOTE: FILING WITH A POVERTY AFFIDAVIT DOES NOT MEAN YOU DO NOT HAVE TO PAY COURT COSTS. IT ONLY MEANS THAT YOU DO NOT HAVE TO PAY IT IN ADVANCE. THE COURT WILL DETERMINE WHO IS TO PAY COURT COSTS AT THE TIME OF THE HEARING.**

IN THE COURT OF COMMON PLEAS

- 1 - Name of County, OHIO

- 2 - Name of Plaintiff ,

Plaintiff,  
vs.

Case No. - 4 - Case Number

- 3 - Name of Defendant ,

Defendant.

AFFIDAVIT OF INABILITY  
TO PREPAY COURT COSTS.

I, - 5 - Fill in your name , being first duly cautioned and sworn, depose and state:

1. That I am a party in interest in the above-captioned action; that I have a meritorious cause of action but am unable to give security or a cash deposit to secure costs.
2. That I am unable to afford the hiring of an attorney to represent me in this matter.
3. That I own no liquid assets or property of any substantial value to prepay court costs.

- 6 - Sign Only In Front of Notary

Sworn to and subscribed in my presence this \_\_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

**IN THE COURT OF COMMON PLEAS**

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

\_\_\_\_\_

Plaintiff,

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

vs.

\_\_\_\_\_

Defendant.

**AFFIDAVIT OF INABILITY  
TO PREPAY COURT COSTS**

I, \_\_\_\_\_, being first duly cautioned and

sworn, depose and state:

1. That I am a party in interest in the above-captioned action; that I have a meritorious cause of action but am unable to give security or a cash deposit to secure costs.
2. That I am unable to afford the hiring of an attorney to represent me in this matter.
3. That I own no liquid assets or property of any substantial value to prepay court costs.

\_\_\_\_\_

Sworn to and subscribed in my presence this \_\_\_\_\_ day of \_\_\_\_\_,

20\_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

IN THE COURT OF COMMON PLEAS

Division  
COUNTY, OHIO

IN THE MATTER OF:

A Minor

Name

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

Street Address

:  
: Judge \_\_\_\_\_

City, State and Zip Code

Plaintiff/Petitioner

:  
: Magistrate \_\_\_\_\_

vs./and

Name

Street Address

City, State and Zip Code

Defendant/Petitioner

**Instructions:** This form is used when you want to request documents to be served on the other party. You must indicate the requested method of service by marking the appropriate box.

REQUEST FOR SERVICE

TO THE CLERK OF COURT:

Please serve the following documents on the following parties as I have indicated below:

\_\_\_\_\_  
\_\_\_\_\_

- Defendant/Petitioner at the address shown above.
  - Certified Mail, Return Receipt Requested
  - Issuance to Sheriff of \_\_\_\_\_ County, Ohio for  Personal or  Residence service
  - Other (specify) \_\_\_\_\_



# Form 28

- Plaintiff/Petitioner at the address shown above.
  - Certified Mail, Return Receipt Requested
  - Issuance to Sheriff of \_\_\_\_\_ County, Ohio for  Personal or  Residence service
  - Other (specify) \_\_\_\_\_

- \_\_\_\_\_ County Child Support Enforcement Agency (provide address below):  
\_\_\_\_\_
  - Certified Mail, Return Receipt Requested
  - Issuance to Sheriff of \_\_\_\_\_ County, Ohio for  Personal or  Residence service
  - Other (specify) \_\_\_\_\_

- Other (address): \_\_\_\_\_
  - Certified Mail, Return Receipt Requested
  - Issuance to Sheriff of \_\_\_\_\_ County, Ohio for  Personal or  Residence service
  - Other (specify) \_\_\_\_\_

SPECIAL INSTRUCTIONS TO SHERIFF:

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\_\_\_\_\_  
Your Signature

# Affidavit 3

## COURT OF COMMON PLEAS \_\_\_\_\_ COUNTY, OHIO

Plaintiff/Petitioner	Case No.	
v./and	Judge	
Defendant/Petitioner/Respondent	Magistrate	

**Instructions:** Check local court rules to determine when this form must be filed.  
 By law, an affidavit must be filed and served with the first pleading filed by each party in every parenting (custody/visitation) proceeding in this Court, including Dissolutions, Divorces and Domestic Violence Petitions. Each party has a continuing duty while this case is pending to inform the Court of any parenting proceeding concerning the child(ren) in any other court in this or any other state. **If more space is needed, add additional pages.**

### PARENTING PROCEEDING AFFIDAVIT (R.C. 3127.23(A))

Affidavit of \_\_\_\_\_  
 (Print Your Name)

**Check and complete ALL THAT APPLY:**

1.  I request that the court not disclose my current address or that of the child(ren). My address is confidential pursuant to R.C. 3127.23(D) and should be placed under seal to protect the health, safety, or liberty of myself and/or the child(ren).
2.  Minor child(ren) are subject to this case as follows:

Insert the information requested below for all minor or dependent children of this marriage. You must list the residences for all places where the children have lived for the last **FIVE** years.

<b>a.</b>	<b>Child's Name:</b> _____	<b>Place of Birth:</b> _____	
	<b>Date of Birth:</b> _____	<b>Sex:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	
	<u>Period of Residence</u>	<u>Check if Confidential</u>	<u>Person(s) With Whom Child Lived</u> (name & address)
	to present	<input type="checkbox"/> Address Confidential?	<u>Relationship</u>
	to _____	<input type="checkbox"/> Address Confidential?	
	to _____	<input type="checkbox"/> Address Confidential?	
	to _____	<input type="checkbox"/> Address Confidential?	

# Affidavit 3

**b. Child's Name:** \_\_\_\_\_ **Place of Birth:** \_\_\_\_\_  
**Date of Birth:** \_\_\_\_\_ **Sex:**  Male  Female

Check this box if the information requested below would be the same as in subsection 2a and skip to the next question.

<u>Period of Residence</u>	<u>Check if Confidential</u>	<u>Person(s) With Whom Child Lived</u> (name & address)	<u>Relationship</u>
_____ to present	<input type="checkbox"/> Address Confidential?	_____	_____
_____ to _____	<input type="checkbox"/> Address Confidential?	_____	_____
_____ to _____	<input type="checkbox"/> Address Confidential?	_____	_____
_____ to _____	<input type="checkbox"/> Address Confidential?	_____	_____

**c. Child's Name:** \_\_\_\_\_ **Place of Birth:** \_\_\_\_\_  
**Date of Birth:** \_\_\_\_\_ **Sex:**  Male  Female

Check this box if the information requested below would be the same as in subsection 2a and skip to the next question.

<u>Period of Residence</u>	<u>Check if Confidential</u>	<u>Person(s) With Whom Child Lived</u> (name & address)	<u>Relationship</u>
_____ to present	<input type="checkbox"/> Address Confidential?	_____	_____
_____ to _____	<input type="checkbox"/> Address Confidential?	_____	_____
_____ to _____	<input type="checkbox"/> Address Confidential?	_____	_____
_____ to _____	<input type="checkbox"/> Address Confidential?	_____	_____

IF MORE SPACE IS NEEDED FOR ADDITIONAL CHILDREN, ATTACH A SEPARATE PAGE AND CHECK THIS BOX .

**3. Participation in custody case(s): (Check only one box.)**

- I **HAVE NOT** participated as a party, witness, or in any capacity in any other case, in this or any other state, concerning the custody of, or visitation (parenting time), with any child subject to this case.
- I **HAVE** participated as a party, witness, or in any capacity in any other case, in this or any other state, concerning the custody of, or visitation (parenting time), with any child subject to this case. For each case in which you participated, give the following information:

# Affidavit 3

- a. Name of each child: \_\_\_\_\_
- b. Type of case: \_\_\_\_\_
- c. Court and State: \_\_\_\_\_
- d. Date and court order or judgment (if any): \_\_\_\_\_

IF MORE SPACE IS NEEDED FOR ADDITIONAL CUSTODY CASES, ATTACH A SEPARATE PAGE AND CHECK THIS BOX .

**4. Information about other civil case(s) that could affect this case: (Check only one box.)**

- I **HAVE NO INFORMATION** about any other civil cases that could affect the current case, including any cases relating to custody, domestic violence or protection orders, dependency, neglect or abuse allegations or adoptions concerning any child subject to this case.
- I **HAVE THE FOLLOWING INFORMATION** concerning other civil cases that could affect the current case, including any cases relating to custody, domestic violence or protection orders, dependency, neglect or abuse allegations or adoptions concerning a child subject to this case. Do not repeat cases already listed in Paragraph 3. Explain:

- a. Name of each child: \_\_\_\_\_
- b. Type of case: \_\_\_\_\_
- c. Court and State: \_\_\_\_\_
- d. Date and court order or judgment (if any): \_\_\_\_\_

IF MORE SPACE IS NEEDED FOR ADDITIONAL CASES, ATTACH A SEPARATE PAGE AND CHECK THIS BOX .

**5. Information about criminal case(s):**

List all of the criminal convictions, including guilty pleas, for you and the members of your household for the following offenses: any criminal offense involving acts that resulted in a child being abused or neglected; any domestic violence offense that is a violation of R.C. 2919.25; any sexually oriented offense as defined in R.C. 2950.01; and any offense involving a victim who was a family or household member at the time of the offense and caused physical harm to the victim during the commission of the offense.

<u>Name</u>	<u>Case Number</u>	<u>Court/State/County</u>	<u>Convicted of What Crime?</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

IF MORE SPACE IS NEEDED FOR ADDITIONAL CASES, ATTACH A SEPARATE PAGE AND CHECK THIS BOX .

# Affidavit 3

**6. Persons not a party to this case who has physical custody or claims to have custody or visitation rights to children subject to this case: (Check only one box.)**

I **DO NOT KNOW OF ANY PERSON(S)** not a party to this case who has/have physical custody or claim(s) to have custody or visitation rights with respect to any child subject to this case.

I **KNOW THAT THE FOLLOWING NAMED PERSON(S)** not a party to this case has/have physical custody or claim(s) to have custody or visitation rights with respect to any child subject to this case.

a. Name/Address of Person \_\_\_\_\_

Has physical custody

Claims custody rights

Claims visitation rights

Name of each child: \_\_\_\_\_

\_\_\_\_\_

b. Name/Address of Person \_\_\_\_\_

Has physical custody

Claims custody rights

Claims visitation rights

Name of each child: \_\_\_\_\_

\_\_\_\_\_

c. Name/Address of Person \_\_\_\_\_

Has physical custody

Claims custody rights

Claims visitation rights

Name of each child: \_\_\_\_\_

\_\_\_\_\_

**OATH**

(Do Not Sign Until Notary is Present)

I, (print name) \_\_\_\_\_, swear or affirm that I have read this document and, to the best of my knowledge and belief, the facts and information stated in this document are true, accurate and complete. I understand that if I do not tell the truth, I may be subject to penalties for perjury.

\_\_\_\_\_  
Your Signature

Sworn before me and signed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

\_\_\_\_\_

IN THE COURT OF COMMON PLEAS  
 \_\_\_\_\_ COUNTY, OHIO

\_\_\_\_\_  
 Plaintiff,  
 - vs -  
 \_\_\_\_\_  
 Defendant

Case No. \_\_\_\_\_  
 JUDGE: \_\_\_\_\_

**AFFIDAVIT OF INCOME, EXPENSES  
 AND FINANCIAL DISCLOSURE**

STATE OF OHIO, COUNTY OF \_\_\_\_\_ ss:

Now comes \_\_\_\_\_ and after being duly cautioned and sworn says:

\_\_\_\_\_ Plaintiff \_\_\_\_\_ is \_\_\_\_\_ child support  
 \_\_\_\_\_ Defendant \_\_\_\_\_ is not requesting a temporary order for \_\_\_\_\_ alimony

Minor and/or dependent children (not including children by previous spouses):

\_\_\_\_\_ age \_\_\_\_\_ is residing with \_\_\_\_\_  
 \_\_\_\_\_ age \_\_\_\_\_ is residing with \_\_\_\_\_  
 \_\_\_\_\_ age \_\_\_\_\_ is residing with \_\_\_\_\_  
 \_\_\_\_\_ age \_\_\_\_\_ is residing with \_\_\_\_\_

	<b>PLAINTIFF</b>	<b>DEFENDANT</b>
<b>GROSS WEEKLY WAGES:</b>	\$ _____	\$ _____
Deductions:		
Taxes	_____	_____
Credit Union	_____	_____
Other (Specify)	_____	_____
	_____	_____
<b>TOTAL DEDUCTIONS:</b>	\$ _____	\$ _____
Net Weekly Wages (Subtract Total Deductions from Gross Wages)	\$ _____	\$ _____
_____ Unemployment	_____	_____
_____ Workers Comp.	_____	_____
Other Income Specify Source _____	_____	_____
<b>NET WEEKLY INCOME:</b>	\$ _____	\$ _____

**EXPENSES**

**Necessary Living Expenses**

(If children are residing with you, calculate expenses below for you and them combined)

\_\_\_\_\_  
PLAINTIFF  
\_\_\_\_\_  
DEFENDANT

Monthly:

- A. Housing
- 1. Rent or Mortgage payment  
(Including taxes & insurance) \$ \_\_\_\_\_
  - 2. Utilities
    - a. Gas & Electric \_\_\_\_\_
    - b. Water & Sewer \_\_\_\_\_
    - c. Telephone (excluding long distance) \_\_\_\_\_
    - d. Trash collection \_\_\_\_\_
    - e. Water softener \_\_\_\_\_
  - 3. Housing repairs \_\_\_\_\_
  - 4. Homeowner's or Renter's Insurance \_\_\_\_\_
  - 5. Other (specify) \_\_\_\_\_ \_\_\_\_\_
- TOTAL HOUSING: \$ \_\_\_\_\_

- B. Other
- 1. Car repairs \$ \_\_\_\_\_
  - 2. Insurance
    - a. Auto \_\_\_\_\_
    - b. Life \_\_\_\_\_
    - c. Medical \_\_\_\_\_
    - d. Other (specify) \_\_\_\_\_
  - 3. Medical (not covered by Insurance) \_\_\_\_\_
  - 4. Clothing \_\_\_\_\_
  - 5. Hair care \_\_\_\_\_
  - 6. Dry Cleaning \_\_\_\_\_
  - 7. Other (specify) \_\_\_\_\_ \_\_\_\_\_
- TOTAL OTHER: \$ \_\_\_\_\_
- TOTAL MONTHLY (Sum of A & B) \$ \_\_\_\_\_

**I. WEEKLY COST (divide monthly total by 4.3) \$ \_\_\_\_\_ (I)**

Weekly

- 1. Grocery items (include food, laundry & cleaning products) \$ \_\_\_\_\_
- 2. Toilet accessories \_\_\_\_\_
- 3. Child care \_\_\_\_\_
- 4. School lunch program \_\_\_\_\_
- 5. Children's allowances \_\_\_\_\_
- 6. Activities of Minor Children  
(Music, sports, dances, etc.) \_\_\_\_\_
- 7. Entertainment \_\_\_\_\_
- 8. Contributions \_\_\_\_\_
- 9. Gasoline & Oil \_\_\_\_\_
- 10. Other (specify) \_\_\_\_\_ \_\_\_\_\_

**II. WEEKLY TOTAL \$ \_\_\_\_\_ (II)**

**Monthly Installment Payments**  
(Do not list expenses previously listed on Page 2)

To Whom Paid	Purpose	Balance Due	Monthly Payment
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

MONTHLY TOTAL: \$ \_\_\_\_\_

**III. WEEKLY TOTAL (divide monthly total by 4.3)** \$ \_\_\_\_\_ (III)

**TOTAL WEEKLY EXPENSES (Sum of I, II & III)** \$ \_\_\_\_\_

**FINANCIAL DISCLOSURE**

List all funds on deposit in any and all accounts in any Bank, Savings & Loan, Credit Union, Regulated Investment Company, Mutual Fund, or other financial institution. Account may include one or more of the following: Checking, Certificate of Deposit (CD), Investment, Savings, Individual Retirement (IRA), Stock Option, etc. (Use reverse side if needed)

Name of Financial Institution	Address of Financial Institution	Account No.	Name(s) on Account	Balance as of Date of this Affidavit
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

\_\_\_\_\_ Plaintiff \_\_\_\_\_ does  
\_\_\_\_\_ Defendant \_\_\_\_\_ does not have any other assets from which child support can be paid or secured.  
(If "does", list all such assets on reverse side)

Sworn to and subscribed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC

\_\_\_\_\_  
Attorney for \_\_\_\_\_ Plaintiff  
\_\_\_\_\_ Defendant



COURT OF COMMON PLEAS

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

\_\_\_\_\_  
Plaintiff/Petitioner

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

v./and

Judge \_\_\_\_\_

Magistrate \_\_\_\_\_

\_\_\_\_\_  
Respondent/Petitioner

**Instructions:** Check local court rules to determine when this form must be filed.  
List ALL OF YOUR PROPERTY AND DEBTS, the property and debts of your spouse, and any joint property or debts. Do not leave any category blank. For each item, if none, put "NONE." If you do not know exact figures for any item, give your best estimate, and put "EST." **If more space is needed, add additional pages.**

**AFFIDAVIT OF PROPERTY**

Affidavit of \_\_\_\_\_  
(Print Your Name)

**I. REAL ESTATE INTERESTS**

	<u>Address</u>	<u>Present Fair Market Value</u>	<u>Titled To</u>	<u>Mortgage Balance</u>	<u>Equity (as of date)</u>
1.	_____	\$ _____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____	\$ _____
2.	_____	\$ _____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____	\$ _____
<b>TOTAL SECTION I: REAL ESTATE INTERESTS</b>					\$ _____

**II. OTHER ASSETS**

<u>Category</u>	<u>Description</u> (List who has possession)	<u>Titled To</u>	<u>Value/Date of Value</u>
<b>A. Vehicles and Other Certificate of Title Property</b>			
	(Include model and year of automobiles, trucks, motorcycles, boats, motors, motor homes, etc.)		
1.	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
2.	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
3.	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
4.	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
5.	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
6.	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
<b>B. Financial Accounts</b>			
	(Include checking, savings, CDs, POD accounts, money market accounts, etc.)		
1.	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
2.	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
3.	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
4.	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____

<u>Category</u>	<u>Description</u> (List who has possession)	<u>Titled To</u>	<u>Value/Date of Value</u>
<b>C. Pensions &amp; Retirement plans</b>			
1.	_____ _____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____
2.	_____ _____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____
3.	_____ _____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____
4.	_____ _____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____

<b>D. Publicly Held Stocks, Bonds, Securities &amp; Mutual Funds</b>			
1.	_____ _____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____
2.	_____ _____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____
3.	_____ _____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____
4.	_____ _____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____

<u>Category</u>	<u>Description</u> (List who has possession)	<u>Titled To</u>	<u>Value/Date of Value</u>
<b>E. Closely Held Stocks &amp; Other Business Interests and Name of Company</b>			
1.	_____ _____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____
2.	_____ _____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____

**F. Life Insurance Type  
(Term/Whole Life)**

(Any cash value or loans)

(Insured party  
& value upon death)

1.	<hr/>		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ <hr/>
	<hr/>			<hr/>
2.	<hr/>		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ <hr/>
	<hr/>			<hr/>
3.	<hr/>		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ <hr/>
	<hr/>			<hr/>
4.	<hr/>		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ <hr/>
	<hr/>			<hr/>

Category

Description

Who Has Possession

Value/Date of Value

**G. Furniture & Appliances**

(Estimate value of those in your possession, and value of those in your spouse's possession)

1.	<hr/>		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ <hr/>
	<hr/>			<hr/>
2.	<hr/>		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ <hr/>
	<hr/>			<hr/>
3.	<hr/>		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ <hr/>
	<hr/>			<hr/>
4.	<hr/>		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ <hr/>
	<hr/>			<hr/>

**H. Safe Deposit Box**

(Give location and describe contents)

Titled To

1.	<hr/>		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ <hr/>
	<hr/>			<hr/>
2.	<hr/>		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ <hr/>
	<hr/>			<hr/>

**I. Transfer of Assets**

**Explanation:** List the name and address of any person (other than creditors listed on your Affidavit) who has received money or property from you exceeding \$300 in value in the past 12 months and the reason for each transfer.

1.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
2.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
3.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
4.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____

<u>Category</u>	<u>Description</u> (Also list who has possession)	<u>Titled To</u>	<u>Value/Date of Value</u>
<b>J. All Other Assets Not Listed Above</b>	<b>Explanation:</b> List any item you have not listed above that is considered an asset.		

1.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
2.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____

**TOTAL SECTION II: OTHER ASSETS** \$ \_\_\_\_\_

**III. SEPARATE PROPERTY CLAIMS: Pre-marital assets, gifts to one spouse only, inheritances**

If you are making any claims in any of the categories below, explain the nature and amount of your claim. **This includes, but is not limited to, inheritances, property owned before marriage, and any pre-marital agreements.**

	<u>Category</u> <small>(Pre-marital Gift, Inheritance, etc., acquired after separation)</small>	<u>Description</u>	<u>Why do you claim this as a separate property?</u>	<u>Present Fair Market Value</u>
1.	_____	_____	_____	\$ _____
2.	_____	_____	_____	\$ _____
3.	_____	_____	_____	\$ _____
4.	_____	_____	_____	\$ _____
5.	_____	_____	_____	\$ _____

**TOTAL SECTION III: SEPARATE PROPERTY CLAIMS** \$ \_\_\_\_\_

**IV. DEBT**

List ALL OF YOUR DEBTS, the debts of your spouse, and any joint debts. Do not leave any category blank. For each item, if none, put "NONE." If you don't know exact figures for any item, give your best estimate, and put "EST." **If more space is needed to explain, please attach an additional page with the explanation and identify which question you are answering.**

<u>Type</u>	<u>Name of Creditor/Purpose of Debt</u>	<u>Account Name</u>	<u>Name(s) on Account</u>	<u>Total Debt Due</u>	<u>Monthly Payment</u>
<b>A. Secured Debt (Mortgages, Car, etc.)</b>					
1.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
2.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
3.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
4.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
5.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
<b>B. Unsecured Debt, including credit cards</b>					
1.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
2.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
3.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
4.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
5.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
<b>TOTAL SECTION IV: DEBT</b>				\$ _____	_____

**V. BANKRUPTCY**

	<u>Filed by: Wife, Husband, Both</u>	<u>Date of Filing: Case Number</u>	<u>Date of Discharge or Relief from Stay</u>	<u>Type of Case (Ch. 7, 11, 12, 13)</u>	<u>Current Monthly Payments</u>
1.	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	_____	_____	_____	\$ _____
2.	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	_____	_____	_____	\$ _____
<b>TOTAL SECTION V: BANKRUPTCY</b>					\$ _____

**OATH**

(Do Not Sign Until Notary is Present)

I, (print name) \_\_\_\_\_ swear or affirm that I have read this document and, to the best of my knowledge and belief, the facts and information stated in this document are true, accurate and complete. I understand that if I do not tell the truth, I may be subject to penalties for perjury.

\_\_\_\_\_  
Your Signature

Sworn before me and signed in my presence this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public  
My Commission Expires:  
\_\_\_\_\_

# AFFIDAVIT 4

## COURT OF COMMON PLEAS COUNTY, OHIO

\_\_\_\_\_  
Plaintiff/Petitioner

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

v./and

Judge \_\_\_\_\_

Magistrate \_\_\_\_\_

\_\_\_\_\_  
Defendant/Petitioner

**Instructions:** Check local court rules to determine when this form must be filed.  
This affidavit is used to disclose health insurance coverage that is available for children. It is also used to determine child support. It must be filed if there are minor children of the relationship. **If more space is needed, add additional pages.**

### HEALTH INSURANCE AFFIDAVIT

Affidavit of \_\_\_\_\_  
(Print Your Name)

#### Mother

#### Father

Are your child(ren) currently enrolled in a low-income government-assisted health care program (Healthy Start/Medicaid)?

Yes  No

Yes  No

Are you enrolled in an individual (non-group or COBRA) health insurance plan?

Yes  No

Yes  No

Are you enrolled in a health insurance plan through a group (employer or other organization)?

Yes  No

Yes  No

If you are not enrolled, do you have health insurance available through a group (employer or other organization)?

Yes  No

Yes  No

Does the available insurance cover primary care services within 30 miles of the child(ren)'s home?

Yes  No

Yes  No



# AFFIDAVIT 4

## Mother

## Father

Under the available insurance, what would be the annual premium for a plan covering you and the child(ren) of this relationship (not including a spouse)?

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Under the available insurance, what would be the annual premium for a plan covering you alone (not including children or spouse)?

\$ \_\_\_\_\_

\$ \_\_\_\_\_

If you are enrolled in a health insurance plan through a group (employer or other organization) or individual insurance plan, which of the following people is/are covered:

Yourself?  Yes  No

Yes  No

Your spouse?  Yes  No

Yes  No

Minor child(ren) of this relationship?  Yes  No

Yes  No

Number \_\_\_\_\_

Number \_\_\_\_\_

Other individuals?  Yes  No

Yes  No

Number \_\_\_\_\_

Number \_\_\_\_\_

Name of group (employer or organization) that provides health insurance

\_\_\_\_\_

\_\_\_\_\_

Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone number

\_\_\_\_\_

\_\_\_\_\_

## OATH

(Do not sign until notary is present.)

I, (print name) \_\_\_\_\_, swear or affirm that I have read this document and, to the best of my knowledge and belief, the facts and information stated in this document are true, accurate and complete. I understand that if I do not tell the truth, I may be subject to penalties for perjury.

\_\_\_\_\_  
Your Signature

Sworn before me and signed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires:  
\_\_\_\_\_

## INFORMATION SHEET NOTICE TO WCCSEA

(Three copies must be filed in each domestic relations case/motion)

ALL BLANKS MUST BE COMPLETED.

IF INFORMATION CANNOT BE DETERMINED WRITE "UNKNOWN"

IF INFORMATION DOES NOT APPLY WRITE "NONE"

DIVORCE  
DISSOLUTION

CHANGE OF CUSTODY  
CHANGE OF SUPPORT

CASE NO. \_\_\_\_\_

JUDGE: \_\_\_\_\_

### WIFE'S INFORMATION

Attorney  
\_\_\_\_\_  
Full Name  
\_\_\_\_\_  
Date of Birth  
\_\_\_\_\_  
Number of this Marriage  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City \_\_\_\_\_ State  
\_\_\_\_\_  
Phone #  
\_\_\_\_\_  
Gross Income \$ \_\_\_\_\_ per  
\_\_\_\_\_

Date of Marriage  
\_\_\_\_\_

### HUSBAND'S INFORMATION

Attorney  
\_\_\_\_\_  
Full Name  
\_\_\_\_\_  
Date of Birth  
\_\_\_\_\_  
Number of this Marriage  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City \_\_\_\_\_ State  
\_\_\_\_\_  
Phone #  
\_\_\_\_\_  
Gross Income \$ \_\_\_\_\_ per  
\_\_\_\_\_

Place of Marriage  
\_\_\_\_\_

### EMPLOYER

Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City \_\_\_\_\_ State  
\_\_\_\_\_  
Phone #  
\_\_\_\_\_

### EMPLOYER

Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City \_\_\_\_\_ State  
\_\_\_\_\_  
Phone #  
\_\_\_\_\_

### PARENT'S INFORMATION

Mother's Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City \_\_\_\_\_ State  
\_\_\_\_\_  
Phone #  
\_\_\_\_\_

Father's Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City \_\_\_\_\_ State  
\_\_\_\_\_  
Phone #  
\_\_\_\_\_

### PARENT'S INFORMATION

Mother's Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City \_\_\_\_\_ State  
\_\_\_\_\_  
Phone #  
\_\_\_\_\_

Father's Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City \_\_\_\_\_ State  
\_\_\_\_\_  
Phone #  
\_\_\_\_\_

### LIST ALL CHILDREN UNDER THE AGE OF 18

NAME	BIRTH DATE	NAME	BIRTH DATE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

The undersigned hereby certifies that a completed Title IV-D application has been filed with the Washington County Child Support Enforcement Agency prior to or contemporaneously with the filing of this action.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

Copies to: Court  
CSEA

Revised 03/22/2012

DATE:  
APPLICATION NUMBER:

APPLICANT NAME  
ADDRESS  
ADDRESS

## APPLICATION AND QUESTIONNAIRE FOR CHILD SUPPORT SERVICES

The Child Support program aims to provide services to help families by promoting family self-sufficiency and child well-being. Services are available to either parent when one parent is living outside the home. Services are also available to caretakers of children. Services are available automatically for families receiving assistance under the Ohio Works First (OWF) program.

The child support enforcement agency (CSEA) can assist you with the following services:

**1. Establishment of Paternity – Legally Identifying a Child’s Father**

The CSEA can assist in establishing paternity (legal fatherhood) if there has not been a final and enforceable determination of paternity for the child.

**2. Establishment or Adjustment of Child Support and Medical Support Orders**

The CSEA can assist in obtaining an order for child support and medical support. A support order establishes how much a parent should pay for child support. It also allocates the costs of providing for the health care of the child between the parents. The CSEA can assist in modifying a support order (review and adjustment) every 36 months or sooner if there is a qualifying change in circumstances.

**3. Enforcement of Support Orders**

The CSEA can assist in collecting and disbursing current and past due support, as well as enforcing medical support orders. The parent ordered to pay support (obligor), will be required to pay child support by income withholding. The CSEA will issue income withholding orders to collect support from the parent’s wages and/or unearned income. Overdue support may also be collected from Federal or state income tax refunds and liens placed on property. In addition, when past-due support is owed, the following may occur:

- Unpaid child support may be reported automatically to credit reporting bureaus
- Driver’s, professional, occupational and recreational licenses may be suspended if the obligated parent is not paying the required support
- The U.S. State Department will deny a passport to a parent who owes more than \$2,500 in back child support
- Funds may be seized from accounts in financial institutions
- Court actions, such as contempt, and possibly criminal actions may be taken against chronic delinquent parents

**4. Location of Parents**

The CSEA can use available information to locate parents and their income and assets. The applicant can request “Location Only Services,” if the sole need is to find the whereabouts of the non-residential parent.

**Child Support Services Requested:**

All child support services available       Location of non-residential parent only       Other (please explain): \_\_\_\_\_

<b>PLEASE READ BEFORE SIGNING RIGHTS AND RESPONSIBILITIES</b>
---

**Confidentiality of Case Material**

You have the right to see the parts of your file at the CSEA about you and the actions taken for you by the agency. You cannot see some parts of your file that are protected by confidentiality laws, such as information obtained from the IRS. Information about you in the CSEA file is confidential. However certain portions of your file become public record when a court is notified about your case.

**Hearing Rights**

If you disagree with an action, lack of action or delay by the CSEA, you may request a state hearing.

**OWF Participants**

As a condition of eligibility to receive Ohio Works First (OWF) benefits, you give up the right to keep child and spousal support up to the amount of assistance you received. You must cooperate in establishing paternity for each child born, if you were not married to the father. You must assist the CSEA in getting support payments and any other payments. If you fail to cooperate without good cause (determined by the CSEA), you may be ineligible to receive OWF benefits.

While a family is receiving OWF, support collections are used to repay benefits. When a family leaves OWF, current support and family arrears are released to the family. Payments from the IRS are applied to repay OWF benefits before being applied to support payable to the household.

**Medicaid Participants**

While Medicaid benefits are received, medical support is paid to ODJFS to reimburse Medicaid benefits. If health insurance is available, that insurance will be used first for payment of medical bills. If you are eligible for Medicaid and are also covered by a health insurance plan, it is your responsibility to notify the provider of medical services that you have medical insurance coverage and Medicaid coverage for uninsured costs.

**IV-E Foster Care Participants**

If a child receives Title IV-E foster care benefits, the assignment includes current child support during the time the child is eligible for benefits and child support arrearages accruing before and during the time the child is eligible for benefits. Support received that does not exceed foster care maintenance payments is distributed to reimburse Title IV-E benefits. When IV-E foster care maintenance benefits stop, the assignment of support rights terminates, except for the amount of any unpaid support that accrued under that assignment.

**Fees**

There is an application fee of one dollar for applicants not receiving OWF or IV-E foster care benefits. Some counties waive this fee for the applicants.

**Child Support Overpayments**

An overpayment is child support that you are not entitled to keep because you have assigned your rights to support to ODJFS, the payment was made to you instead of ODJFS, or the payment was sent to you in error by ODJFS. You may be personally liable for returning any amounts paid in error, including amounts that must be returned because the IRS or ODT accepts an amended tax return or complaint from the non-obligated spouse. In tax refund situations you may be required to sign an affidavit attesting to the amount of support arrears.

The child support agency has provided sufficient information regarding the services available and my responsibilities.

I declare that I have examined this application and, to the best of my knowledge and belief, it is a true and correct statement of every material point.

I understand that the CSEA, its staff, and any of its contracted agencies, represent only the county and the State of Ohio, and do not represent me, either parent, the child(ren), or other custodian of the children.

I understand that within 20 days of receiving this completed and signed application and questionnaire, the CSEA will send a written notice informing me whether my application for Title IV-D child support services has been accepted.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Parent/ Guardian if Applicant is a Minor :** \_\_\_\_\_ **Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Ohio Child Support Website and Customer Service Portal available at [www.jfs.ohio.gov/ocs](http://www.jfs.ohio.gov/ocs)**

**If you are receiving a type of public assistance that requires cooperation with Child Support, you are required to complete and sign this questionnaire and to cooperate with the CSEA in establishing paternity or in establishing, modifying, or enforcing a support order. Unless the CSEA approves a good cause waiver of cooperation, failure to cooperate could result in delay, denial, and/ or termination of your public assistance benefits.**

**INSTRUCTIONS**

**PLEASE COMPLETE EACH APPLICABLE FIELD CLEARLY, PROVIDING THE MOST INFORMATION YOU CAN, INCLUDING ANY PARTIAL INFORMATION. PLEASE SUPPLY COPIES OF ALL PERTINENT INFORMATION LISTED IN THE CHECKLIST ON THE LAST PAGE OF THE APPLICATION. YOUR SIGNATURE IS REQUIRED ON PAGE 4.**

**APPLICANT INFORMATION**

LAST NAME		FIRST NAME		MIDDLE	
MAIDEN OR OTHER		SSN		DOB	
CURRENT MARITAL STATUS			NAME OF SPOUSE		
GENDER	RACE	DO YOU NEED AN INTERPRETER? <input type="checkbox"/> YES <input type="checkbox"/> NO LANGUAGE OR OTHER SERVICE REQUESTED:			
RESIDENTIAL ADDRESS-STREET		CITY		STATE	ZIP
MAILING ADDRESS-STREET		CITY		STATE	ZIP
HOME PHONE			WORK PHONE		
CELL PHONE Can you receive texts from the CSEA? <input type="checkbox"/> YES <input type="checkbox"/> NO			OTHER PHONE		
EMAIL:					
EMPLOYER NAME AND ADDRESS			EMPLOYER PHONE		

**CHILD 1 SERVICES REQUESTED FOR THIS CHILD :**     **PATERNITY**     **SUPPORT ESTABLISHMENT**     **ENFORCEMENT**  
 \* PLEASE MAKE COPIES AS NEEDED TO PROVIDE INFORMATION FOR ADDITIONAL CHILDREN\*

LAST NAME		FIRST NAME		MIDDLE	CITY & STATE OF BIRTH
SSN	DOB	WHERE WAS THE CHILD CONCEIVED (STATE)?	WHEN WAS CHILD CONCEIVED (MO/YR)?		
APPLICANT'S RELATIONSHIP TO CHILD 1: <input type="checkbox"/> MOTHER <input type="checkbox"/> FATHER <input type="checkbox"/> OTHER (Please specify)				GENDER: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
IS THERE A FATHER'S NAME ON THE BIRTH CERTIFICATE? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF YES, WHAT IS THE FATHER'S NAME (LAST, FIRST)?			
WAS AN ACKNOWLEDGEMENT OF PATERNITY AFFIDAVIT SIGNED? <input type="checkbox"/> YES, <input type="checkbox"/> NO    IF YES, WHERE AND WHEN:			NAME OF FATHER THAT SIGNED THE AFFIDAVIT (LAST, FIRST)?		
CHILD'S MOTHER'S NAME (LAST, FIRST)			CHILD'S FATHER/ALLEGED FATHER'S NAME (LAST, FIRST)		
COULD THERE BE MORE THAN ONE POSSIBLE ALLEGED FATHER? <input type="checkbox"/> YES <input type="checkbox"/> NO    (Sex with anyone 2 months before or 2 months after becoming pregnant) If yes, please list the names here and complete an Other Parent Information Sheet for each named father.					
WAS THE MOTHER EVER MARRIED? <input type="checkbox"/> YES <input type="checkbox"/> NO		WAS THE MOTHER MARRIED WHEN THE CHILD WAS BORN? <input type="checkbox"/> YES <input type="checkbox"/> NO			
HUSBAND'S NAME:		DATE OF MARRIAGE:	CITY, STATE:	DIVORCE DATE:	
HUSBAND'S NAME:		DATE OF MARRIAGE:	CITY, STATE:	DIVORCE DATE:	
IS THERE AN ORDER DETERMINING PATERNITY FOR THIS CHILD? <input type="checkbox"/> YES <input type="checkbox"/> NO		WHEN WAS THE ORDER FILED?	IN WHICH COUNTY, STATE?		
IS THERE A CHILD SUPPORT ORDER FOR THIS CHILD? <input type="checkbox"/> YES <input type="checkbox"/> NO		WHEN WAS THE ORDER FILED?	IN WHICH COUNTY, STATE?		
IS THERE ANY PENDING LEGAL ACTION INVOLVING THIS CHILD? <input type="checkbox"/> YES <input type="checkbox"/> NO		MOST RECENT FILE DATE?	IN WHICH COUNTY, STATE?		

**CHILD 2 SERVICES REQUESTED FOR THIS CHILD :**     **PATERNITY**     **SUPPORT ESTABLISHMENT**     **ENFORCEMENT**

LAST NAME		FIRST NAME		MIDDLE	CITY & STATE OF BIRTH
SSN	DOB	WHERE WAS THE CHILD CONCEIVED (STATE)?	WHEN WAS CHILD CONCEIVED (MO/YR)?		
APPLICANT'S RELATIONSHIP TO CHILD 2: <input type="checkbox"/> MOTHER <input type="checkbox"/> FATHER <input type="checkbox"/> OTHER (Please specify)				GENDER: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
IS THERE A FATHER'S NAME ON THE BIRTH CERTIFICATE? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF YES, WHAT IS THE FATHER'S NAME (LAST, FIRST)?			
WAS AN ACKNOWLEDGEMENT OF PATERNITY AFFIDAVIT SIGNED? <input type="checkbox"/> YES <input type="checkbox"/> NO    IF YES, WHERE AND WHEN:			NAME OF FATHER THAT SIGNED THE AFFIDAVIT (LAST, FIRST)?		
CHILD'S MOTHER'S NAME (LAST, FIRST)			CHILD'S FATHER/ALLEGED FATHER'S NAME (LAST, FIRST)		
COULD THERE BE MORE THAN ONE POSSIBLE ALLEGED FATHER? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please list the names here and complete an Other Parent Information Sheet for each named father.					
WAS THE MOTHER EVER MARRIED? <input type="checkbox"/> YES <input type="checkbox"/> NO		WAS THE MOTHER MARRIED WHEN THE CHILD WAS BORN? <input type="checkbox"/> YES <input type="checkbox"/> NO			
HUSBAND'S NAME:		DATE OF MARRIAGE:	CITY, STATE:	DIVORCE DATE:	
HUSBAND'S NAME:		DATE OF MARRIAGE:	CITY, STATE:	DIVORCE DATE:	
IS THERE AN ORDER DETERMINING PATERNITY FOR THIS CHILD? <input type="checkbox"/> YES <input type="checkbox"/> NO		WHEN WAS THE ORDER FILED?	IN WHICH COUNTY, STATE?		
IS THERE A CHILD SUPPORT ORDER FOR THIS CHILD? <input type="checkbox"/> YES <input type="checkbox"/> NO		WHEN WAS THE ORDER FILED?	IN WHICH COUNTY, STATE?		
IS THERE ANY PENDING LEGAL ACTION INVOLVING THIS CHILD? <input type="checkbox"/> YES <input type="checkbox"/> NO		MOST RECENT FILE DATE?	IN WHICH COUNTY, STATE?		

### INFORMATION ABOUT THE OTHER PARENT

**THIS OTHER PARENT IS THE**  **MOTHER**  **FATHER/ALLEGED FATHER OF** \_\_\_\_\_ **(LIST CHILD(REN))**

**OTHER PARENT** REFERS TO THE NON-APPLICANT PARENT OF THE CHILD(REN) **OR** IN THE CASE OF A CARETAKER APPLICANT, IT REFERS TO **BOTH** THE MOTHER AND FATHER OF THE CHILD(REN) AND AN INFORMATION SHEET FOR EACH PARENT IS NEEDED.

**\*IF THERE ARE MORE THAN 2 OTHER PARENTS, PLEASE MAKE COPIES AS NEEDED TO PROVIDE INFORMATION FOR EACH ADDITIONAL OTHER PARENT.\***

IS THERE A HISTORY OF DOMESTIC VIOLENCE WITH THIS OTHER PARENT?  YES  NO

IF YES, PROVIDE AVAILABLE DOCUMENTATION OR A STATEMENT EXPLAINING THE SITUATION.

APPLICANT'S RELATIONSHIP TO THIS OTHER PARENT:  NEVER MARRIED  MARRIED  LEGALLY SEPARATED  DIVORCED  OTHER (note below)

LAST NAME		FIRST	MIDDLE	MAIDEN OR OTHER	
SSN		DOB/AGE (APPX)	PLACE OF BIRTH (CITY & STATE)		
GENDER	RACE		DOES OTHER PARENT NEED AN INTERPRETER? <input type="checkbox"/> YES <input type="checkbox"/> NO LANGUAGE OR OTHER SERVICE NEEDED:		
MAILING ADDRESS-STREET			CITY	STATE	ZIP
RESIDENTIAL OR OTHER ADDRESS-STREET			CITY	STATE	ZIP
MOTHER'S NAME			HER ADDRESS/PHONE:		
FATHER'S NAME			HIS ADDRESS/PHONE:		

#### INFORMATION ABOUT OTHER PARENT'S EMPLOYMENT

CURRENT EMPLOYER	ADDRESS-STREET	CITY	STATE	ZIP
IF UNEMPLOYED, NAME LAST EMPLOYER	ADDRESS-STREET	CITY	STATE	ZIP
OCCUPATION	UNION NAME		LOCAL NO.	

ADDITIONAL INFORMATION THAT COULD ASSIST IN LOCATION OF PARENT, INCOME AND ASSETS. INCLUDE NAMES AND CONTACT INFORMATION OF OTHER FAMILY MEMBERS AND FRIENDS. LIST TYPES AND LOCATION OF ANY PROPERTY OR ASSETS OWNED BY OTHER PARENT.

### ADDITIONAL INFORMATION

Please provide any additional information here.

### SIGNATURE AND DOCUMENTATION

SIGNATURE OF APPLICANT	PRINT NAME OF APPLICANT	DATE
SIGNATURE OF PARENT/ GUARDIAN IF APPLICANT IS A MINOR	PRINT NAME OF PARENT/ GUARDIAN	DATE

#### CHECKLIST OF INFORMATION TO SUBMIT

- Copy of Social Security Card for Each Child
- Copies of all Court Orders including Civil Protection Orders
- Copy of Marriage Certificate(s)
- Copy of birth certificate for each child, if child was born outside of the State of Ohio
- Copy of Out of State Support Payment Records
- Copy of Medical Insurance Cards

**Ohio Child Support Website and Customer Service Portal available at [www.jfs.ohio.gov/ocs](http://www.jfs.ohio.gov/ocs)**

COURT OF COMMON PLEAS
COUNTY, OHIO

Plaintiff Case No.
Judge
Magistrate
V.
Defendant

Instructions: Check local court rules to determine when this form must be filed.
This form is used to request temporary orders in your divorce or legal separation case. After a party serves a Motion and Affidavit, the other party has 14 days to file a Counter Affidavit and serve it on the party who filed the motion. If more space is needed, add additional pages.

MOTION AND AFFIDAVIT OR COUNTER AFFIDAVIT
FOR TEMPORARY ORDERS
WITHOUT ORAL HEARING

Check one box below to show whether you are filing a (1) Motion and Affidavit or (2) Counter Affidavit.

(1) Motion and Affidavit

(Print Your Name) files this Motion and Affidavit under Rule 75(N) of the Ohio Rules of Civil Procedure to request the temporary orders checked here.

- Check only those that apply. Residential parenting rights (custody)
Parenting time (visitation)
Child support
Spousal support (alimony)
Payment of debts and/or expenses

THE OTHER PARTY HAS 14 DAYS FROM THE DATE ON WHICH THIS MOTION IS SERVED TO FILE A COUNTER AFFIDAVIT AND SERVE IT UPON THE PARTY WHO FILED THE MOTION. (See below.)

(2) Counter Affidavit

(Print Your Name) files this Counter Affidavit in response to a Motion and Affidavit.

Complete the following information, whether filing Motion and Affidavit or Counter Affidavit. Check all that apply.

- 1.  My spouse and I are living separately.  
Date of separation is \_\_\_\_\_ .
- My spouse and I are living together.
- We have no minor children. (Skip to number 5.)
- There are minor child(ren) who are adopted or born of this marriage.  
(List children here.)

Name	Date of birth	Living with
_____	_____	_____
_____	_____	_____
_____	_____	_____

- In addition to the above children there is/are in my household:  
\_\_\_\_\_ adult(s)  
\_\_\_\_\_ other minor and/or dependent child(ren).

2. My child(ren) attend(s) school in:

- Father's school district
- Mother's school district
- Open enrollment
- Other (Explain.) \_\_\_\_\_ .
- All children do not attend school in the same district. (Explain.) \_\_\_\_\_

- 3.  I request to be named the temporary residential parent and legal custodian of the child(ren).  
(Specify child(ren) if request is not for all children.) \_\_\_\_\_
- I do not object to my spouse being named the temporary residential parent of the child(ren).
- I request the following parenting time order:
  - The Court's standard parenting order (See county's local rules of court.)
  - A specific parenting time order as follows:  
\_\_\_\_\_



I have reached an agreement regarding parenting time with my spouse as follows:

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I request that my spouse's parenting time (visitation) be supervised. (Explain--supervised parenting time order will NOT be granted if the reasons are not explained.)

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Name of an appropriate supervisor \_\_\_\_\_

4.  A court or agency has made a child support order concerning the child(ren).

Name of Court/Agency \_\_\_\_\_

Date of Order \_\_\_\_\_

SETS No. \_\_\_\_\_

5. I request the Court to order my spouse to pay:

\$ \_\_\_\_\_ child support per month

\$ \_\_\_\_\_ spousal support per month

\$ \_\_\_\_\_ attorney fees, expert fees, court costs

The following debts and/or expenses:

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Other

6.  I am willing to attend mediation.

I am not willing to attend mediation.

I request the following court services. (See local rules of court for available services.)

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State specific reasons why court services are required.

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OATH

(Do not sign until notary is present.)

I, (print name) \_\_\_\_\_, swear or affirm that I have read this document and, to the best of my knowledge and belief, the facts and information stated in this document are true, accurate and complete. I understand that if I do not tell the truth, I may be subject to penalties for perjury.

\_\_\_\_\_  
Your Signature

Sworn before me and signed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public  
My Commission Expires:

NOTICE OF HEARING

(Check with local court for scheduling procedure.)

You are hereby given notice that this motion for temporary orders will be heard upon affidavits only, and without oral testimony, before Judge/Magistrate \_\_\_\_\_, Hearing Room \_\_\_\_\_, at \_\_\_\_\_ a.m./p.m. on \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_ floor.

CERTIFICATE OF SERVICE

Check the boxes that apply.

I delivered a copy of my:  Motion and Affidavit or  Counter Affidavit

On: (Date) \_\_\_\_\_, 20\_\_\_\_

To: (Print name of other party's attorney or, if there is no attorney, print name of the party.)

\_\_\_\_\_  
At: (Print address or fax number.) \_\_\_\_\_

- By:  U.S. Mail
- Fax
- Messenger
- Clerk of courts (if address is unknown)

\_\_\_\_\_  
Your Signature

IN THE COURT OF COMMON PLEAS OF \_\_\_\_\_ COUNTY, OHIO

\_\_\_\_\_  
Plaintiff,

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

vs.

\_\_\_\_\_  
Defendant.

**AFFIDAVIT FOR SERVICE**  
**PURSUANT TO O.R.C.P.**  
**4.4(A)(2)**

I, \_\_\_\_\_, being first duly sworn and cautioned, depose and state as follows:

- 1. I have filed for a divorce and am not able to prepay the filing fees;
- 2. I do not know the current address of the defendant, my spouse;
- 3. I have made efforts to determine the defendant's current address but have been unable to do so;
- 4. The defendant's residence cannot be learned with reasonable effort;
- 5. The defendant's last known mailing address is:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Affiant

STATE OF OHIO, COUNTY OF \_\_\_\_\_, SS:

Sworn to before me and signed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

Order A

IN THE COURT OF COMMON PLEAS  
WASHINGTON COUNTY, OHIO

\_\_\_\_\_  
(Your Name)

Case No. \_\_\_\_\_  
(Court will complete)

Plaintiff,

Judge/Magistrate \_\_\_\_\_  
(Court will complete)

vs.

\_\_\_\_\_  
(Your Spouse's Name)

Defendant.

JOURNAL ENTRY

The Plaintiff having filed an Affidavit pursuant to Civil Rule 4.4(A)(2) which satisfies the Court that the residence of the Defendant is unknown, and the Court being satisfied that due diligence has been exercised by Plaintiff, now ORDERS the Clerk of Courts to post service of notice pursuant to O.R.C. Rule 4.4(A)(2) and any applicable local rules.

\_\_\_\_\_  
MAGISTRATE BROOKER

**NOTICE: A party may appeal to the Court from a magistrate's order by filing a motion to set aside within ten days of the filing of the magistrate's order as permitted by Civil Rule 53(D)(2)(b). An appeal from a magistrate's order shall be specific and state with particularity all grounds for appeal. The pendency of a motion to set aside does not stay the effectiveness of the magistrate's order unless the magistrate or the court grants stay.**

cc: Plaintiff

**Order B**

**IN THE COURT OF COMMON PLEAS  
WASHINGTON COUNTY, OHIO**

\_\_\_\_\_  
(Your Name)

Plaintiff,

vs.

\_\_\_\_\_  
(Your Spouse's Name)

Defendant.

Case No. \_\_\_\_\_  
(Court will complete)

Judge/Magistrate \_\_\_\_\_  
(Court will complete)

**JUDGMENT ENTRY -  
TEMPORARY ORDERS**

Upon Motion for Temporary Orders and affidavits of Plaintiff and for good cause shown,  
this Court ORDERS the following:

- 1.      Mother      Father is named the temporary residential parent;
- 2.      Mother      Father will pay child support of \$ \_\_\_\_\_  
Per \_\_\_\_\_ commencing on \_\_\_\_\_ (Based on  
attached child support worksheet).
- 3.     Defendant shall pay temporary spousal support in the amount of \$ \_\_\_\_\_  
a month.
- 4.     Defendant shall pay Plaintiff \$ \_\_\_\_\_ for attorney's fees no  
later than \_\_\_\_\_. Plaintiff  
would be prevented from fully litigating his/her rights and adequately protecting  
his/her interests if this Court did not award Plaintiff reasonable attorney's fees.
- 5.     Plaintiff is awarded temporary possession of the home and land located at  
\_\_\_\_\_.

- 6. Plaintiff is awarded temporary possession of the following motor vehicle:  
\_\_\_\_\_.
- 7. Defendant shall pay the following bills and/or debts:\_\_\_\_\_.
- 8. Defendant shall not injure, threaten, harass, or physically abuse Plaintiff.
- 9. Defendant shall not damage, destroy, sell or attempt to sell, dispose of, remove marital property, property of either party or the child(ren)'s personal property from Plaintiff's residence, or incur debts in Plaintiff's or Defendant's name for which Plaintiff may be held liable.

**IT IS SO ORDERED.**

\_\_\_\_\_  
MAGISTRATE BROOKER

**NOTICE: A party may appeal to the Court from a magistrate's order by filing a motion to set aside within ten days of the filing of the magistrate's order as permitted by Civil Rule 53(D)(2)(b). An appeal from a magistrate's order shall be specific and state with particularity all grounds for appeal. The pendency of a motion to set aside does not stay the effectiveness of the magistrate's order unless the magistrate or the court grants stay.**

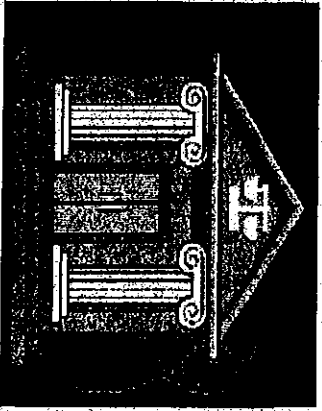


# REPRESENTING YOURSELF IN COURT

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## A CITIZENS GUIDE

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### Preparing Your Case

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If you do decide to represent yourself, you need to manage all aspects of your case.

- Familiarize yourself with the local court rules.** Rules and procedures vary slightly from court to court, and you need to know the rules that apply in the court that will hear your case. Obtain a copy of the local rules from your court.
- Make sure your filings and documents conform to local standards.** Generic forms and sample filings are available in books and on the internet. However, these generic documents may not conform to the standards of the court that will hear your case. To make sure that your documents will be accepted, ask your court for forms and sample filings.
- Respond to all inquiries on time.** During trial preparations, you may receive inquiries from the court or the opposing party. For example, the opposing party may be entitled to "discovery"—to learn about evidence or testimony you plan to introduce (you may be entitled to the same). If you fail to respond to such inquiries, you may limit your ability to present your case.
- Rules about admissible evidence are complicated.** There are many possible reasons that evidence or testimony you think is relevant and important may not be admissible in court. Since questions about what evidence is admissible are legal questions that are often contested, neither court staff nor the judge may answer them ahead of time. This can be frustrating for non-attorneys: if your case will involve contested evidence, consider again whether you need an attorney.
- Make sure evidence you plan to use will be acceptable and available in court.** If your case will involve evidence—documents, pictures, cost estimates, receipts, or other items—you must prepare it for court use. In particular, you must
  - ♦ bring at least three copies of all documents (for the court, for the opposing party, and for yourself); and

- ♦ be able to verify that documents are what you say they are or contain accurate information.

- Make sure any witnesses are prepared and available in court.** If your case will involve testimony from witnesses, you need to work with them before you and they appear in court. Make sure your witnesses know what you will ask, and instruct them to answer truthfully. And remember that your witnesses must be
    - ♦ present at your trial (they may not, for example, prepare written statements or appear by telephone); and
    - ♦ prepared to answer questions from the opposing party or his or her attorney.
- When you decide to represent yourself, you take on full responsibility for your case. You need to handle legal questions as well as deadlines, documents, evidence, witnesses, and any other issues that may come up. Even a seemingly simple case can demand a lot of your time and attention.

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### In the Courtroom

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At the trial or hearing itself, you need to present your case in its strongest way. Here are some simple tips:

- Make a good impression.** Dress appropriately. Arrive on time with all your materials.
- Respect the court.** Stand when the judge enters or leaves the courtroom and when you speak to the judge. Address the judge as "Your Honor."
- Respect the opposing party.** Never argue with the opposing party in front of the judge. Use respectful terms of address.
- Speak clearly and succinctly.** Be prepared to state your case in a few sentences. Listen carefully and answer questions directly.
- Be prepared.** Courts are very busy. You want to present your case in the strongest way, but you also want to help the proceedings move efficiently. The better prepared you are, the better the case will go.

## The Role of the Judge

Your case will be heard and decided by a judge (or a magistrate). Keep in mind that the role of the judge is to be an impartial referee in the dispute between you and the opposing party. Among other things, this means that

- The judge may not help you present your case.** Helping you—by pointing out possible mistakes or by letting you know what you need to do next—would be unfair to the opposing party. When you represent yourself, you take on the full responsibility of presenting your case.
- The judge may not speak with you about your case when the opposing party is not present.** This is true even if the issue you want to speak with the judge about seems like a simple procedural question. Again, such communications would be unfair to the opposing party.
- The judge will decide the case on the basis of the facts presented in court and the applicable law.** The judge may only consider the facts as they are presented in court, through evidence and testimony. You need to make sure that all facts supporting your case are properly presented. The judge also needs to follow the laws that apply. Sometimes the law dictates which facts the judge may and may not consider. You need to make sure that you present the facts that the law requires or permits.

## Legal Advice

It is always a good idea to consult with an attorney and be represented by an attorney in court.

- The law is complex. Attorneys are trained professionals who understand the law and how it relates to your case.
  - Even matters that initially look simple may raise complicated issues.
  - Your interests will be best protected by a legal professional.
- Attorneys can be expensive, but consider this:**
- What might you lose if your case goes badly? Paying for an attorney may be a good investment.
  - Meet with several attorneys to discuss your case and their fees—don't let one consultation make up your mind.
  - You may qualify for legal aid or help from legal clinics or other programs—be sure to investigate the resources in your community.
- Ohio courts and judges will provide a fair hearing for your case whether or not you are represented by an attorney, and it is your right to represent yourself if you so choose.
- When you bring a case to court without the help of an attorney, you are taking on a complex task that is normally done by highly trained professionals. You may do yourself a disservice.

For help with finding an attorney, you might turn to your local bar association. Your local bar association is:

## Asking Court Staff

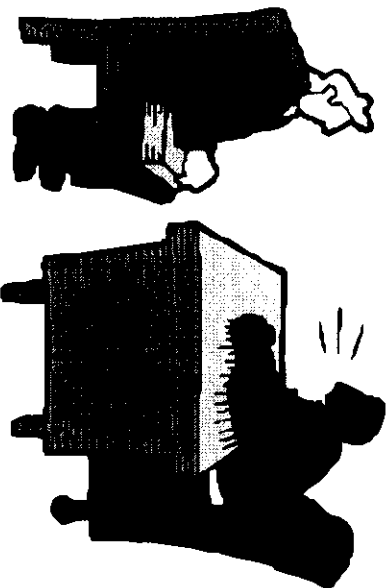
Court staff may not give legal advice. You may have questions that court staff are not permitted to answer.

- Court staff may not**
  - ✗ provide you with legal research;
  - ✗ tell you what sorts of claims to file or what to put on forms;
  - ✗ tell you what to say in court;
  - ✗ give an opinion about how a judge is likely to decide your case;
  - ✗ give you information that they would not give to the opposing party;
  - ✗ tell you about a judge's decision before it is issued by the judge.
- Court staff may**
  - ✓ answer questions about how the court works;
  - ✓ explain terms used in the court process;
  - ✓ give you information from your case file;
  - ✓ provide you with court forms and sample filings and documents.

Court staff are there to help those who use the court. They can usually tell you *how* to do things, but may not advise you about *what* you ought to do. Please be courteous to staff and respect the limits on what they may do for you.



# How to Handle Witnesses When You Are Representing Yourself



## When Should I Bring a Witness to Court?

It is always a good idea to bring a witness with you simply to tell the Court that you are an honest person or to confirm that what you are telling the Court is true.

In most cases that come before the Court, both sides are telling a different version of the same story. The Court knows that each side may be telling the version that best serves his or her own interests. The testimony of a witness (someone not involved in the case directly) will make your side of the story more believable.

In some types of cases, you are required by law to bring a witness. For example, in divorce cases, many Courts require a that you bring a witness to testify that you are a person known to have good character in your community (that you are an honest and good person).



## What If My Witnesses Can't Come to the Hearing?

Your witness must come to the hearing! A handwritten note from a person will not be accepted by the Court—the witness must show up at the hearing and testify live. Live testimony is required so that the other side has an opportunity to ask questions of your witness as well.

To make sure your witnesses will show up, make sure you call them the week of the hearing and again the day before the hearing to remind them.



## Who Should I Bring as a Witness?

→ People who know you and your reputation in the community.

→ People who know about the situation that brought you to the Court from things they have seen or heard. Only use witnesses after you have talked to them and are sure that they will tell the Court what is helpful to your case.

While it is okay to have a friend or family member be a witness for you, it is always best to have someone who does not favor one side over the other. With family members and friends, the Court may assume that the person is testifying for you simply because they like you and want you to win.



## How Do I Prepare My Witnesses?

→ Think about what is the most valuable thing each witness could say on your behalf.

→ Write down a few questions that will help the witness get the idea across.

→ Practice with your witness ahead of time, so you know what answers will be given.





## What Should I Do With My Witnesses at the Court Hearing?

- Start by asking the witness their name and address.
- If your witness is a professional, you should ask what their job is, what their educational degrees are, and how long they have been doing their job.
- Then ask specific questions about what information they have about your case.

**With your own witness, it is not okay to ask "leading questions."** Leading questions give the witness the answer you want them to say.

You must keep your questions open-ended. *Open-ended questions are Who, What, Where, When, How, and Why questions.*

### Examples to use:

- How would you describe my husband's condition when he dropped the children off at your house?
- What did my husband do when he would pick the children up from day care?

~ ~ ~

## What About the Other Side's Witnesses?

The other side will question them first. The judge will give you an opportunity to "cross examine" them (that is, ask them your own questions). You do not have to ask any questions if you think the witness will only repeat what was already said.

**When asking questions of the other side's witnesses, you are allowed to ask leading questions. Leading questions have Yes or No answers.**

### Examples to use:

- Was my husband ever drunk when he dropped the children off at your house?
- Didn't my husband yell and swear at the children when he came to pick them up from day care?

~ ~ ~

## Rules To Follow When Questioning Witnesses

- Keep your questions short.
- Never ask a question when you do not know what the answer will be—the answer could hurt your case more than help it.
- If you don't get the answer you were expecting from a witness, do not argue with them or accuse them of lying. It makes you look bad before the judge. Remember . . . politeness at all times!
- If a witness refuses to answer a question, ask the judge to make the person answer.

~ ~ ~

## Samples of Questions to Ask My Witnesses

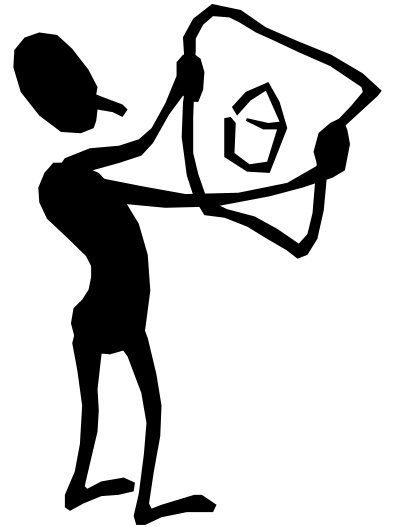
- What is your name?
- What is your address?
- How long have you known me?
- During the time that you have known me, have you become familiar with my reputation in the community?
- Do I have a reputation for good character and honesty in the community?
- From what you know about me, am I someone the Court can rely upon to tell the truth?
- You have heard what I have said in Court. To the best of your knowledge, do you know it to be true?
- Please explain how you know this to be true.

### Prepared by:

NAPIL Equal Justice Fellow  
Ohio State Legal Services Association  
September 2000

# Representing Yourself in Court?

How to Use Photographs,  
Letters, Business Records,  
and Other Evidence to Help  
Prove Your Case



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## What is Evidence?

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Evidence is anything you use to prove your claim. Evidence can be a photograph, a letter, documents or records from a business, and a variety of other things. All evidence that is properly admitted will be considered by the judge.

*Your case probably will be decided by a judge. If there is a jury, it will look at admitted exhibits during its deliberations.*

For example:

- **In a request for change of custody**, the child's school records could be introduced as evidence that the child's grades have dropped or he/she has missed a significant amount of school while living with the other parent.
- **In a domestic violence or stalking civil protection order case**, a photograph of any injury you suffered or a threatening letter written by your abuser may help your case.
- **In a divorce case**, a copy of tax return documents or documents showing who has title to a car may be introduced as evidence.

## Why Use Evidence?

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- ① Evidence is more **believable and trustworthy** than what a person says. For example, in a domestic violence case, if you say that your ex-boyfriend has left you threatening messages but he testifies that this is an absolute lie, the judge may not know whom to believe. However, if you submit a tape recording of one of these messages the judge will be more likely to believe you.
- ② Evidence may make something **easier to understand**. “A picture is worth a thousand words.” Some things are hard to explain in words, while a drawing or photograph is descriptive and clear.

## How Do I Present Evidence to the Court?

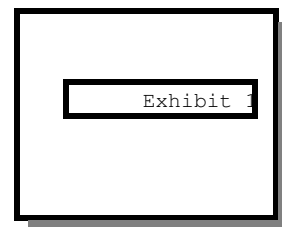
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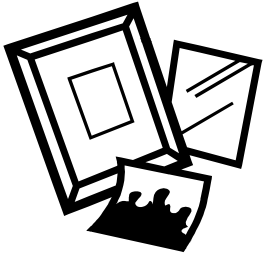
Each court is different, but in most courts, you can't just walk into court with a photograph or document and show it to the judge or jury. There are many things you must do before the court will even look at the evidence you have. Further, there are many different types of evidence, and the rules for using each type of evidence are different. Once you follow these rules, your evidence will be “admitted”.

### Steps to Follow to Admit Evidence

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- Before you ever go to court, think about the evidence you want to use to prove your case. Mark each piece of evidence with an exhibit number (attach a sticker labeled “Exhibit 1,” “Exhibit 2,” etc.)
- Bring these marked Exhibits with you to court. When you want to show the court one of the exhibits, do the following things:
  - ① Show the exhibit to the other party or the other party's attorney.
  - ② Then “lay the foundation” for the evidence. To do this, you must show that the evidence is relevant to your case and authentic (not a forgery). Depending upon what you want the court to consider, follow the rules listed in this pamphlet for “laying the foundation” - explaining why and how the exhibit is connected to your case.
  - ③ Either you or your witness must testify about the exhibit.
  - ④ Ask the court to admit the exhibit into evidence. The other party or attorney may object to the exhibit for some reason. Try to answer these objections as best you can. If you can't, let the judge decide.
  - ⑤ If there are no objections from the other party, or the judge has ruled in your favor, ask the court to “admit the Exhibit into evidence.”





## Laying the Foundation for Photographs

1. Explain why a photo is connected to your case. For example:  
“This photo shows the injury I suffered after my ex-boyfriend punched and kicked me.”
2. Explain how you know about what is in the photo. For example:  
“I had my sister take this photograph within 2 hours after the incident occurred and went to get the film developed myself the following day.”
3. Explain that the photo is timely. For example:  
“At the bottom right-hand corner of the photo is the date on which it was taken. As you can see, the photo was taken on the same day that the incident occurred, which is also the same day the police arrested my ex-boyfriend.”
4. Explain that the photo “fairly and accurately” shows what is depicted in the photo as it appeared on the date relevant to your case. For example:  
“This photo is a fair and accurate depiction of how my face and side looked two hours after the incident and for the next two weeks.”

### **TIP**

When using photographs, it is best to use color photos and enlarge them, if possible.

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## **Foundation for Letters**

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1. Explain why the letter is connected to your case. For example:  
“This is the letter that I received from my ex-boyfriend shortly before he beat me up.”
2. Explain when and how you got the letter. For example:  
“This letter was shoved under the door to my apartment some time before 6 p.m. on Wednesday, January 2, 2001. I found it on the floor when I came home from work that day.”
3. Prove that the signature is that of a party to the case. Ways to prove this:
  - **Explain to the court: that you are familiar with the other party’s signature, how you came to know that person’s signature, and that it is your opinion that the signature on the letter is the other party’s signature.**



- **Call a witness who is familiar with the party’s signature, and ask the witness:**  
“Do you know the other party in this case? Are you familiar with the party’s signature? How?”

Then show them the letter and ask “Is this the other party’s signature?”

- **Call the person who signed the letter.**  
Show the witness the document, and ask the witness if that is his or her signature. (Only do this if you think they will admit to it).

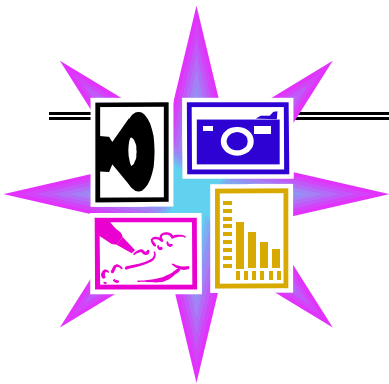
4. Explain that the letter is in the same condition now as when you received it. (“The letter was kept in a safe place and nothing has been changed since I received it.”)

### **TIPS**

Do not read anything from the letter until the court has admitted it into evidence.

If the other party objects to the letter saying that it is hearsay, respond by saying: “The letter shows the letter writer’s state of mind.”

## **Laying the Foundation for Documents and Records From Businesses**



1. Explain how the document or record is related to your case.
2. Call a witness from the business/agency that produced the record, ask the witness what his or her responsibilities are at the business/agency and how he or she is involved in record keeping.

3. Show the witness the record and ask him/her if it is a record from the business/agency.

4. Ask the witness:
  - Was the record made by a person with knowledge of the acts or events appearing on it.
  - Was the record made at or near the time of the acts or events appearing on it.
  - Is it the regular practice of the business/agency to make such a record, and
  - Was the record kept in the course of a regularly conducted business activity.

### **TIP**

If the record is certified (a statement is attached to the record stating that it is in fact a record from a public agency or it has an agency seal on it) you do not need to do anything before you show it to the judge. Just let the judge know it is certified.

In addition to the forms in this packet, you may find additional forms and informational pamphlets to help you on the internet at the following website:

[www.ohiolegalservices.org](http://www.ohiolegalservices.org)

Click on “For the Public”

Locate and click on the legal area that you would like to review – use the “search this site” box if you are not sure which area to review

You can also search this website to learn how to access the local legal services program for your area