

INSTRUCTIONS FOR FILING A MOTION

****PLEASE NOTE YOU MUST MAKE YOUR OWN COPIES BEFORE YOU FILE
YOUR PAPERWORK AT THE CLERK'S OFFICE****

All Motions must include the following:

1. Motion Packet (**filled out completely and one (1) copy made**).
2. Pages 2 and 6 notarized
3. \$25.00 filing fee (check or money order made out to Juvenile Court)
4. **COPY** of Proof of Paternity for Each Child (Established Agency, Marriage License **OR** the Paternity Acknowledgement registry number that can be obtained by calling **1-888-810-6446**).
5. **COPY** of each child's birth certificate.
6. **COPY** of each child's social security card or letter of refusal.
7. **Custody intake sheet** (completed in the waiting room upon arrival)
8. **Service Sheets** (If the address of any of the necessary parties is unknown, Service by Publication is required at a cost of **\$30.00 per Publication**)

*****Motion filings will be considered incomplete and not accepted if any of the above mentioned is not included. *****

Return this packet to Custody Intake for review with the following:

1. Original motion packet (**notarized**) with **copies** of the motion, birth certificate(s), social security information, proof of paternity, and filing fee.
2. **Make one (1) copy of this packet and the original and bring back to the Intake Department for review before filing. You will be sent to Clerk's office to file.**

TO:

CUSTODY INTAKE
1910 CARNEGIE AVENUE
CLEVELAND, OHIO 44115
(216) 443-3149

- **Walk in hours are 9 am-1 pm to 2-4 pm. No Appointment needed.**

***When filing any paperwork at the Clerk's office it's important for you to have a copy that can be date stamped upon filing. If you don't make yourself a copy as requested above you will not have any proof of filing for your records. It is not the responsibility of the Intake office or the Clerk's office to make you a copy.**

Revised: 02/2009

In the matter of: (child/ren's name/s)
 _____ d.o.b. _____)
 _____ d.o.b. _____)
 _____ d.o.b. _____)
 _____ d.o.b. _____)
 _____, **Petitioner**)
 _____)
 _____)
 _____)
 _____, **Legal Custodian**)
 _____)
 _____)
 _____)
 _____, **Party**)
 _____)
 _____)
 _____)

_____, **Party**

_____, **Party**

MEMORANDUM IN SUPPORT OF MOTION

A court may modify a prior decree allocating parental rights and responsibilities issued under O.R.C. section 3109.07 (A) if a change has occurred in the circumstances of the *child*, the *residential parent*, or *either* of the *parents subject to a shared parenting*. O.R.C. sec 3109.4 (E)(1).

A court may also modify or terminate an order granting legal custody of a child issued under O.R.C. sections 2151.353, if it finds a change has occurred in the circumstances of the *child*, or the *legal custodian*, and that modification or termination of the order necessary to serve the best interest of the child. O.R.C. section 2151.42(B).

There has been a change of circumstances for the appropriate party. The changed circumstances and the reason for the modification in the best interest of the child are set forth in the affidavit below and are incorporated herein as if fully rewritten.

It is in the child's best interest for this motion to be granted with the relief sought.

Signature

Print Name

Street Address

City, State, Zip Code

Phone Number

Affidavit

1. I am the _____ (relationship) of the child(ren).
2. That the child (ren) last known or present address in Cuyahoga County is/was:

3. A change has occurred for _____ as follows:

4. I am seeking _____ because

Signature

Witnessed by and sworn to before me, a notary public for the State of Ohio, on this _____ day of _____, 20____.

(SEAL)

NOTARY PUBLIC

**IN THE COURT OF COMMON PLEAS
JUVENILE COURT
CUYAHOGA COUNTY, OHIO**

AFFIDAVIT:UCCJEA
(UNIFORM CHILD CUSTODY
JURISDICTION ENFORCEMENT ACT)

In the Matter of:

_____ **Case Number/s:** _____

Child/ren of:

Mother

Father

I, *(full legal name)*

_____, being sworn according to law, certify that these proceedings involve the custody of a child, or children and the following statements are true:

1. ☐ I am requesting the court to not disclose my address or that of the child/ren. My address is confidential pursuant to ORC 3127.23D and should be placed under seal in that the health safety, or liberty of myself and/or the child/ren would be jeopardized by the disclosure of the identifying information.

2. **(Number):** _____ **Minor child/ren is/are subject to this proceeding as follows:** (Insert the information requested below. The residence information must be given for the last **FIVE** years.)

a. Child's name:	Place of birth:	Date of birth	Sex
Period of residence to present	Address <input type="checkbox"/> Confidential	Person child lived with (name and address)	Relationship
From :			
TO PRESENT			
TO			
TO			
TO			

a. Child's name:	Place of birth:	Date of birth	Sex
Period of residence to present	Address <input type="checkbox"/> Confidential	Person child lived with (name and address)	Relationship
From :			
TO PRESENT			
TO			
TO			
TO			

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a. Child's name:	Place of birth:	Date of birth	Sex
Period of residence to present	Address <input type="checkbox"/> Confidential	Person child lived with (name and address)	Relationship
From :			
TO PRESENT			
TO			
TO			
TO			

a. Child's name:	Place of birth:	Date of birth	Sex
Period of residence to present	Address <input type="checkbox"/> Confidential	Person child lived with (name and address)	Relationship
From :			
TO PRESENT			
TO			
TO			
TO			

a. Child's name:	Place of birth:	Date of birth	Sex
Period of residence to present	Address <input type="checkbox"/> Confidential	Person child lived with (name and address)	Relationship
From :			
TO PRESENT			
TO			
TO			
TO			

e. ☐ Additional children are listed on Attachment 2e. (Provide requested information for additional children on the attachment)

3. Participation in custody proceeding(s) (check only one)

☐ **I HAVE NOT** participated as a party, witness, or in any capacity in any other litigation, in this or any other state, concerning the custody of or visitation (parenting time) with any child subject to this proceeding.

☐ **I HAVE** participated as a party, witness, or in any capacity in any other litigation, in this or any other state, concerning the custody of or visitation (parenting time) with any child subject to this proceeding. Explain:

- a. Name of each child _____
- b. Type of proceeding _____
- c. Court and State _____
- d. Date of Court order or judgment (if any) _____

4. Information about custody proceeding/s: (check only one)

☐ **I HAVE NO INFORMATION** of any proceedings that could affect the current proceeding, including any proceeding related to custody, domestic violence or protection orders, dependency, neglect or abuse allegations, or that a parent or any member of their household has been convicted of a sexually oriented offense or adoptions concerning any child subject to these proceedings.

☐ **I HAVE THE FOLLOWING INFORMATION** concerning proceedings that could affect the current proceeding, including any proceedings relating to custody, domestic violence or protections orders, dependency, neglect or abuse allegations or that a parent or any member of their household has been convicted of a sexually oriented offense or adoptions concerning any child subject to this proceeding, other than set out in item 3. Explain:

- a. Name of each child _____
- b. Name of parent or member of household _____
- b. Type of proceeding _____
- c. Court and State _____
- d. Date of court order or judgment (if any) _____

5. Persons not a party to this proceeding: (check only one)

☐ **I DO NOT KNOW OF ANY PERSON** not a party to this proceeding who has physical custody or claims to have custody or visitation rights with respect to any child subject to this proceeding.

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

a. Name and address of person _____

☐ has physical custody ☐ claims custody rights ☐ claims visitation rights

Name of each child _____

b. Name and address of person _____

☐ has physical custody ☐ claims custody rights ☐ claims visitation rights

Name of each child _____

c. Name and address of person _____

☐ has physical custody ☐ claims custody rights ☐ claims visitation rights

Name of each child _____

6. Knowledge of prior child support proceeding: (check only one)

☐ The child/ren described in this affidavit is/are not subject to existing child support order/s in this or any state or territory.

☐ The child/ren described in this affidavit IS/ARE subject to the following existing child support order/s.

- a. Name of each child _____
- b. Type of proceeding _____
- c. Court and Address _____
- d. Date of court order or judgment (if any): _____
- e. Amount of child support paid and by whom: _____

7. I acknowledge that I have a continuing duty to advise this Court of any custody, visitation, child support, or guardianship proceeding (including a dissolution of marriage, child abuse, neglect, or dependency) concerning the child/ren in this state or other state about which information is obtained during this proceeding.

I certify that a copy of this document was (check only one) ☐ mailed ☐ faxed and mailed ☐ hand delivered to the person/s listed below on (date) _____.

Other party or his/her attorney:

Name: _____ Address: _____

City, State, Zip: _____ Phone # _____

I understand that I am swearing or affirming under oath to the truthfulness of the statement made in this affidavit and that the punishment for knowingly making a false statement includes fine and/or imprisonment.

Signature of Party Date

Printed Name Address, City, State, and Zip

Phone Number

SWORN TO ME THIS _____ DAY OF _____, 200__.

NOTARY PUBLIC/DEPUTY CLERK

Seal above here