

**IN THE COMMON PLEAS COURT OF MONTGOMERY COUNTY, OHIO
JUVENILE DIVISION**

IN RE:

JC# _____
JC# _____
JC# _____

Minor Child(ren)

SETS# _____

Name

JUDGE _____

MAGISTRATE _____

Street Address

City, State, Zip Code

Petitioner

vs. / and

Name

Street Address

City, State, Zip Code

Respondent

Instructions: One original per child. Consult with local rules to determine what else may be required with this filing. This form is used to be legally recognized as the parent of the child, be named as the residential parent, or obtain visitation with the child(ren). The Parenting Proceeding Affidavit and the Affidavit of Income and Expenses are attached.

**MOTION FOR ALLOCATION OF PARENTAL RIGHTS
AND RESPONSIBILITIES (CUSTODY)**

1. I, _____ (name), am the Plaintiff and the
(select one) Father Mother _____ (other) of the following
child(ren):

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

2. Defendant, _____ (name), is the
 Father Mother _____ (other) of the following child(ren).
3. The child has resided in _____ County, Ohio since _____
(date residence established) as set out in the Parenting Proceeding Affidavit.
4. The father-child relationship (select one) has has not been established. If it has been
established, a copy of the order establishing the father-child relationship or a copy of the child's
birth certificate is attached.
5. No court has issued an order about this child.
 The following Court has issued an order about the child(ren) _____
6. I request that the Court (check all that apply):
- Name the Plaintiff Defendant (select one) as the residential parent and legal custodian of
the child(ren).
 - Grant reasonable parenting time (visitation) to the Mother Father (select one).
 - Order the appropriate amount of child support for the child, allocate the income tax
dependency exemption, and determine who should provide health insurance coverage for the
child.
 - Other (specify): _____

7. The reason for this motion is: _____

Your signature

Telephone number at which the Court may
reach you or at which message may be left for you

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:
