

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

IN THE MATTER OF:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Minor child(ren)

JC# \_\_\_\_\_

JC# \_\_\_\_\_

JC# \_\_\_\_\_

\_\_\_\_\_  
Name

SETS \_\_\_\_\_

\_\_\_\_\_  
Street Address

Judge \_\_\_\_\_

\_\_\_\_\_  
City, State, and zip code

Magistrate \_\_\_\_\_

Petitioner

vs. / and

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, and zip code

Respondent

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, and zip code

Respondent

<p><b>Instructions:</b> One original per child. Consult with local rules to determine what else may be required with this filing. To obtain visitation with the child(ren). A Parenting Proceeding Affidavit and an Instructions for Service are attached. <b>WARNING:</b> This for is not a substitution for the benefit of the advice of legal counsel. It is highly recommended that you consult an attorney.</p>
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**COMPLAINT FOR VISITATION TO A NON-PARENT**

1. I, (name) \_\_\_\_\_ (relationship to child) \_\_\_\_\_  
request this Court grant me visitation with the following minor child(ren):

**Name of Child**

**Date of Birth**

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

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

2. I request that the Court grant me a visitation order because:

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

3. I believe that the changes I am requesting are in the child(ren)'s best interests.

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

\_\_\_\_\_  
Telephone number at which the Court may reach you  
or at which messages 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: