

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

IN RE:

Minor child(ren)

Name

Street Address

City, State, and zip code

Petitioner

vs. / and

Name

Street Address

City, State, and zip code

Respondent

COMPLAINT FOR SHARED PARENTING

AND MEMORANDUM IN SUPPORT

-
1. I, (your name) _____, am the **MOTHER** **FATHER** of the child(ren) listed below.
 2. The Defendant is the **MOTHER** **FATHER** of the of the child(ren) listed below.
 3. The father-child relationship has has not (select one) 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.

Name of Child

Date of Birth

_____	_____
_____	_____
_____	_____

4. The parties (**select one**):

_____ have discussed shared parenting and have jointly agreed to the terms of the attached Proposed Shared Parenting Plan.

_____ have discussed shared parenting, but have not come to a full agreement. The attached Proposed Shared Parenting Plan is solely my proposal. I understand the other party may submit his / her own Proposed Shared Parenting Plan for the Court to consider pursuant to R.C. 3109.04.

_____ have not agreed to shared parenting. I understand that R.C. 3109.04 requires that in order for shared parenting to be granted, the parties must be able to work together to make decisions jointly. I understand that failure to agree on shared parenting may result in my motion being denied.

5. There is is not currently a child support order in place involving the child(ren).

6. If shared parenting is granted, I am asking the court to initiate, reallocate, or adjust child support if appropriate.

7. (Optional) In the alternative, if the Court will not grant my motion for shared parenting, I respectfully ask the Court to:

8. Other: _____

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

Email address

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: