	IN THE	COURT OF COMM	ION PLEAS DIVISION COUNTY, OH	IO
		Case No.		
Plaintiff/Petitioner 1		Judge		
vs./an	d	Magistrate		
Defendant/Petitioner 2/Re	spondent			
Instructions: Check loca filed and served with an responsibilities, parenting to inform the Court of any state. If more space is n	ny Complaint, time, custody, c parenting proc	Petition or Motion reg or visitation. Each party eeding concerning the o	arding the allocation on has a continuing duty whi	f parental rights and ile this case is pending
PA	RENTING PR Affidavit of	OCEEDING AFFIDA	VIT (R.C. 3127.23(A))	-
jeopardized by the disc	IILD(REN) WOU MATION. YOU FOR YOUR RE 7.23(D), I allegated closure of identi	JLD BE JEOPARDIZED ACKNOWLEDGE THATEQUEST. The that my health, safet frying information to my	BY THE DISCLOSURE	OF YOUR ADDRESS ONDUCT A HEARING my child(ren) would be herefore, I request that
	Minor child(re	n) is/are subject to thi	s case as follows:	
Insert the information requ residences for all places wh				es. You must list the
a. Child's name		Place of birth	Date of birth	Sex M F
Date of residence	Address Confidential	Person child lived wi	th (name and address)	Relationship
to present				

to				
to				
b. Child's name		Place of birth	Date of birth	Sex M F
Check this how if the	information be	l elow is the same as in	Section 1(a) Skin to t	he next guestion
	Address		` ' '	
Date of residence	Confidential	Person child lived with	n (name and address)	Relationship
to present				
to prosont				
to				
	_			
to				
to				
c. Child's name		Place of birth	Date of birth	Sex M F
Chaptethia have if the	information t	alourio the same as is	Coation 4/c) Oldin (= 1	ha nave aussetisis
	Address	elow is the same as in		
Date of residence	Confidential	Person child lived with	n (name and address)	Relationship
	2230			
to present				
to present				
to				
to				
to				

d. Additional children are listed on Attachment 1(d). (Provide requested information for additional children on an attachment labeled 1(d).)

2.	Par	I HAVE NOT pa		/ one box) ss, or in any capacity in any otl on (parenting time), with any chi			
				in any capacity in any other ca enting time), with any child sub			
		Explain:					
	a.	Name of each cl	nild:				
	b.	Type of case:					
	c.	Court and State:					
	d.	Date and court order or judgment (if any):					
3.	Info	I HAVE NO INFo		hat could affect the current case ion orders; dependency, negle			
		including any ca	ses relating to custody; do ions; or adoptions concern	ON concerning cases that comestic violence or protection of ing a child subject to this case, or	orders; dependency, neglect		
	a.	Name of each c	hild:				
b. Type of case:							
	C.	Court and State					
	d.	Date and court	order or judgment (if any):				
offer viole any d	all of the ses: a nce of offense	ne criminal convict any criminal offen fense that is a vic e involving a victin	se involving acts that res lation of R.C. 2919.25; an	for you and the members of you ulted in a child being abused y sexually oriented offense as called member at the time of the e.	or neglected; any domestic defined in R.C. 2950.01; and		
		NAME	CASE NUMBER	COURT/COUNTY/STATE	CHARGE		
5.	Per:	I DO NOT KNO		y one box) a party to this case who has phact to any child subject to this ca			
				ED PERSON(S) not a party to tation rights with respect to any			

	a. Name/Address of Person	
		☐ claims custody rights ☐ claims visitation rights
	Name of each child:	
		:
	has physical custody	☐ claims custody rights ☐ claims visitation rights
	Name of each child:	
	c. Name/Address of Person	Ľ
	☐ has physical custody	☐ claims custody rights ☐ claims visitation rights
	Name of each child:	
ter		
	(D	OATH OR AFFIRMATION o not sign until Notary Public is present)
	·	• , ,
	t_name) my knowledge and belief, the fa	, swear or affirm that I have read this Affidavit and, to the acts and information stated in this Affidavit are true, accurate, and complete
		h, I may be subject to penalties for perjury.
		Your Signature
СТАТ	E OF	1
JIAI		
_) SS
COU	NTY OF	_)
Sworr	n to or affirmed before me by	thisday of,
		Signature of Notary Public
		Ç
		Printed Name of Notary Public
		Commission Evaluation Date:
		Commission Expiration Date:
		(Affix seal here)