CONTEMPT

CHECKLIST OF FORMS TO BE COMPLETED

Forms to be completed by the requesting party, unless otherwise specified:

- 1. Motion and Affidavit for Contempt
- 2. Request for Service
- 3. Order to Appear and Show Cause (DO NOT COMPLETE –provide this form to the Domestic Relations Court Assignment Commissioner for completion)

OPTIONAL: Financial Affidavit and Affidavit of Indigency (Complete these forms only if you claim that you are indigent and are requesting to file your Motion without <u>prepaying</u> the Court costs. You will be billed for costs by the Clerk of Courts.)

Estimated cost for filing a Motion for Contempt is approximately \$150.00.

All of the above documents are available online at www.co.fairfield.oh.us/dr under Court Forms

		,)	
Plaintiff/Petition	oner)	
Address)	
City	State	Zip)	CASE NO
City	State	2.1 p)	
	-vs/and-	,)	JUDGE LAURA B. SMITH
Defendant/Res	spondent/Petitioner)	
)	MOTION AND AFFIDAVIT FOR CONTEMPT
Address		,)	
City	State	Zip)	
STATE OF O	HIO,			
COUNTY OF	FAIRFIELD, SS:			
Now comes _				who asks this Court to hold
				in contempt of this Court for
disobeying an	order previously gr	anted by thi	is Cou	art. The factual basis for this request is:

I would like a hearing before this Court to	prove these facts to be true. I swear or affirm that the
foregoing facts are true to the best of my kr	nowledge or belief.
	Respectfully submitted,
	Signature
	Digilatore
	Printed Name
	Address
	Address
	City/State/Zip
	Telephone
SWORN TO AND SUBSCRIBED REFOR	E ME, a Notary Public, this day of
	Notary Public

)		
Plaintiff/Petitioner,)	CASE NO	
-vs/and-)	JUDGE LAURA B. SMITH	
)		
Defendant/Respondent/Petitioner.)		
TO THE CLERK OF SAID COURT:	T F(OR SERVICE	
Please serve a copy of the Motion and Affi			
and all ancillary documents upon			by:
☐ certified mail, return receipt			
personal service by		County Sheriff	
at the following address(es):			

Movant Signature

)					
Plaintiff/Petitioner,)	CASE NO)			-
-vs/and-)	JUDGE L	AURA B.	SMITH		
)	ORDER T				
Defendant/Respondent/Petition	ner.)					
This case comes before		Court requesti	on a ing ar	Motion n Orde	filed r fii	by nding
	i1	n contempt of	this Court	for failing to	o comply	with
this Court's prior order(s).						
IT IS THEREFORE O	·	ADJUDG	ŕ		REED in the H	that Iall of
Justice, Fourth Floor, 224 East Mai	n Street, L	ancaster, Oh	nio on the	e	da	ay of
	, 20	at		AM /	PM to	show
cause why he/she should not be punish	ed for failur	re to comply v	with the pr	ior order(s)	of this C	Court.
		Judge/Ma	gistrate			

Plaintiff/Petitioner						
vs / and			Case No	D.:		
Defendant/Petitioner			FINANC ORDER:		MOTION FOR TEMPORAR	₹Y
			, Affiant(s), being o	duly sworn, say(s)	I am requesting the follo	owing:
PART A - FINANCIAL DISCLOSU	RE ONLY					
☐ Yes (If	yes, skip Part B)					
OR						
TEMPORARY RELIEF I	REQUESTED					
I am requesting the fo	ollowing:					
□ Reside	ntial Parent Allocation		Spousal Support		Debt Allocation	
☐ Compa	nionship Only		Child Support			
☐ Legal I	Fees and Expenses - Amoun	t requested:				
□ Other	(please specify):					
PART B - NOTICE OF	H E A R I N G					
This matter shall o	come on for a NON-O	RAL HEAR	RING on affidavits	only (parties	and counsel need	not appear)
	on the					11 /
at	am / p					
at	aiii / þ	nii belore	: Magistrate / Juc			
PART C - CASE INFORMATION	HUSE	BAND / FATH	IER		WIFE / MOTHER	
Full Name						
Street Address						
City / State / Zip						
Telephone						
Last 4 digits of Social Security	#					
Date of Birth / Current Age						

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PART C - CASE INFORMATION continued

Date Married:		Date Separated:			
Number of Children from this Marriage/Relationship:		Child(ren)'s Age(s):			
Child(ren)'s Address:		With Whom Child(ren) Resides:			
Number of Dependents from Previous Marriage/Rela	ationship:	Husband/Father		Wife/Mother	_
PART D - ANNUAL INCOME		HUSBAND / FATHER		WIFE / MOTHER	
Employer / Source of Income					
Employer Street Address					
City / State / Zip					
Telephone					
Gross annual income * (excluding overtime and bonuses)					
Gross annual overtime or bonuses					
Gross annual unemployment benefits					
Gross annual worker's compensation					
Gross annual interest or dividends					
Child support received for other children					
Spousal support received from prior marriage					
Other: (pensions, annuities, etc.)					
TOTAL GROSS ANNUAL INCOME					
* ATTACH VERIFICATION OF CURRENT INCOME (PAYSTUBS,	•			

	DEDUCTIONS FROM INCOME			
	HUSBAND / FATHER	WIFE / MOTHER		
Income Tax Actually Paid Federal / State / Local				
FICA				
Mandatory Retirement Plan				
Union Dues				
Health Insurance Coverage				
Child Support Withheld from Income				
Spousal Support Withheld from Income				
Other (please specify):				
TOTAL ANNUAL DEDUCTIONS				
TOTAL GROSS ANNUAL INCOME MINUS TOTAL ANNUAL DEDUCTIONS = TOTAL NET ANNUAL INCOME				

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PART E - FINANCIAL DISCLOSURE

List all cash and funds on deposit in any and all accounts in any bank, savings and loan, credit union or other financial institution. Account may include one or more of the following: checking, certificate of deposit, investments, savings, individual retirement, pension, retirement plan, deferred compensation, stocks, stock option, etc. NOTE - You are required to disclose all funds in which you have an interest, regardless of the name in which the funds are held. Include cash over \$250.00.

Financial Institution	Address	Account Number	Names on Account	Balance

PART F - REAL ESTATE INTERESTS

Address	Present Fair Market Value	Titled To	Mortgage Balance	Equity

PART G - VEHICLES AND OTHER CERTIFICATE OF TITLE PROPERTY

Include automobiles, trucks, motorcycles, boats, motors, motor homes, mobile homes, trailers, etc.

Type of Asset including Model and Year	Present Fair Market Value	Titled To	Debt Balance	Equity

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PART H - DEPENDENT INFORMATION

List each biological or adoptive minor child, not the subject of this action, living with either party.

Do not include the child(ren) involved in this action and do not include step-children.

HUSBAND'S / FAT	HER'S HOUSEHOLD	WIFE'S / MOTHER	'S HOUSEHOLD
Child's Name	Child's Date of Birth	Child's Name	Child's Date of Birth

PART I - EXPENSES

State your actual expenses per month:	HUSBAND / FATHER	WIFE / MOTHER
Rent (not mortgage payment)		
2. Utilities a. Gas		
b. Electric		
c. Phone		
d. Other (please specify)		
3 Insurance a. Auto		
b. Life		
c. Health (not withheld from income)		
4. Uninsured Medical / Dental		
5. Clothing		
6. Groceries/Household Supplies		
7. Transportation a. Fuel		
b. Maintenance/Repairs		
8. Work-Related Child Care (attach verification)		
Child Support for other children (not withheld from income)		
10. Spousal Support Paid to Former Spouse		
11. Other (please specify):		
TOTAL MONTHLY EXPENSES		

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PART J - DEBTS

List <u>all</u> debts owed by each party, whether alleged to be marital or separate debt. Do not include anything listed in Part I as expenses.

Secured Creditors	List Debtor: Husband / Wife / Joint	Person in Possession, Use or Occupancy	Principal Balance	Monthly Installment	
Mortgage					
2 nd Mortgage					
Auto					
Auto					
Other					
Other					
Unsecured Creditors	List Debtor: Husband / Wife / Joint	Person in Possession, Use or Occupancy	Principal Balance	Monthly Installment	
Affiant Sworn to and subscribed before me this day of, 2i					
		Sworn to and subscribed	Affiant before me this da	ay of, 20_	
Notary Public					

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)			
Plaintiff/Petitioner,) CASE NO			
-vs/and-)	JUDGE LAURA B. SMITH		
)			
	Defen	dant/Respondent/Petitioner.)			
		<u>AFFIDAVI</u>	T OF	<u>INDIGENCY</u>		
STAT	E OF C	оніо,				
COUN	TY OF	FFAIRFIELD, SS:				
	1.	I am the		in the above-captioned case.		
	2.	I do not have the funds or assets to pay the costs of the deposit or to pay for ar				
		attorney to represent me. If s	sufficie	ent funds do become available to me in the future,		
		I am willing to pay the costs	s at tha	t time.		
	3.	I therefore request that I be allowed to proceed in this matter without prepayment of				
		costs.				
			Mov	ant Signature		
	SWOI	RN TO AND SUBSCRIBED I	BEFOF	RE ME, a Notary Public, this		
day of				•		
			— Nota	ry Public		