

*Fairfield County Court of Common Pleas  
Domestic Relations Division*

---

**ESTABLISH VISITATION / PARENTING TIME**

**CHECKLIST OF FORMS TO BE COMPLETED**

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

1. Complaint or Motion to Establish Visitation / Parenting Time
2. Request for Service
3. Notice of Hearing (DO NOT COMPLETE –provide this form to the Domestic Relations Court Assignment Commissioner for completion)
4. UCCJEA Affidavit

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 prepaying the Court costs. You will be billed for costs by the Clerk of Courts.)

Estimated cost for filing a Complaint to Establish Visitation / Parenting Time is approximately \$250.00.

Estimated cost for filing a Motion to Establish Visitation / Parenting Time is approximately \$150.00.

All of the above documents are available online at [www.co.fairfield.oh.us/dr](http://www.co.fairfield.oh.us/dr) under *Court Forms*

IN THE COURT OF COMMON PLEAS OF FAIRFIELD COUNTY, OHIO  
DOMESTIC RELATIONS DIVISION

\_\_\_\_\_) )  
Plaintiff/Petitioner

\_\_\_\_\_) )  
Address

\_\_\_\_\_) )  
City State Zip

CASE NO. \_\_\_\_\_

-vs/and- )

JUDGE LAURA B. SMITH

\_\_\_\_\_) )  
Defendant/Respondent/Petitioner

\_\_\_\_\_) )  
Address

\_\_\_\_\_) )  
City State Zip

COMPLAINT OR MOTION TO  
ESTABLISH VISITATION / PARENTING  
TIME

Now comes \_\_\_\_\_ who asks this Court for an Order to  
establish visitation rights / parenting time for the minor child(ren), \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_ ,

for the following reasons: \_\_\_\_\_

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

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

A hearing is requested to enable me to establish these facts as true.

Respectfully submitted,

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Telephone

IN THE COURT OF COMMON PLEAS OF FAIRFIELD COUNTY, OHIO  
DOMESTIC RELATIONS DIVISION

\_\_\_\_\_) )  
Plaintiff/Petitioner, ) CASE NO. \_\_\_\_\_  
-vs/and- ) JUDGE LAURA B. SMITH  
\_\_\_\_\_) )  
Defendant/Respondent/Petitioner. )

**REQUEST FOR SERVICE**

TO THE CLERK OF SAID COURT:

Please serve a copy of the Complaint or Motion to Establish Visitation / Parenting Time, Notice of Hearing, and all ancillary documents upon \_\_\_\_\_ by:

- certified mail, return receipt requested
- personal service by \_\_\_\_\_ County Sheriff

at the following address(es):

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

\_\_\_\_\_  
Movant Signature

IN THE COURT OF COMMON PLEAS OF FAIRFIELD COUNTY, OHIO  
DOMESTIC RELATIONS DIVISION

\_\_\_\_\_) )  
Plaintiff/Petitioner, ) CASE NO. \_\_\_\_\_  
-vs/and- ) JUDGE LAURA B. SMITH  
\_\_\_\_\_) ) NOTICE OF HEARING  
Defendant/Respondent/Petitioner. )

Take notice that a PRETRIAL HEARING in the above-captioned Complaint or Motion to Establish Visitation / Parenting Time has been scheduled for the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_ at \_\_\_\_\_ AM / PM before JUDGE LAURA B. SMITH / MAGISTRATE \_\_\_\_\_ at the Hall of Justice, Fourth Floor, 224 East Main Street, Lancaster, Ohio.

\_\_\_\_\_  
Assignment Commissioner  
(740) 652-7440

**IN THE COURT OF COMMON PLEAS OF FAIRFIELD COUNTY, OHIO  
DOMESTIC RELATIONS DIVISION**

	)	
Plaintiff/Petitioner,	)	CASE NO. _____
VS/AND	)	JUDGE LAURA B. SMITH
	)	<b>INFORMATION FOR CHILD CUSTODY PROCEEDING (ORC § 3127.23)</b>
Defendant/Respondent.	)	

**NOTE:** By law, an affidavit **must** be filed and served with the first pleading filed by each party in every child custody proceeding (allocation of parental rights, legal custody, parenting time, or visitation). Each party has a continuing duty while this case is pending to inform the Court of any child custody proceeding concerning the child(ren) in any other court in this or any other state. **If more space is needed, attach an additional page.**

My full name is \_\_\_\_\_ and I state, under oath, that the following information is true:

1. State the name and date of birth for each child who is in issue in this case, the address(es) where each child lived during the past five years, the dates the child lived at each address, and the name of all adults who lived with the child at each address.

Child's Name:			Date of Birth:
Period of residence for past five (5) years		Address	Adult(s) who lived at this address
	to	Present	
	to		
	to		
	to		
	to		

Child's Name:			Date of Birth:
Period of residence for past five (5) years		Address	Adult(s) who lived at this address
	to	Present	
	to		
	to		
	to		
	to		

<b>Child's Name:</b>			<b>Date of Birth:</b>
<b>Period of residence for past five (5) years</b>		<b>Address</b>	<b>Adult(s) who lived at this address</b>
	to Present		
	to		
	to		
	to		
	to		

<b>Child's Name:</b>			<b>Date of Birth:</b>
<b>Period of residence for past five (5) years</b>		<b>Address</b>	<b>Adult(s) who lived at this address</b>
	to Present		
	to		
	to		
	to		
	to		

2. The names and **current** addresses on all adults listed in #1 are:

<b>Adult's Name</b>	<b>Current Address</b>

3. Have you participated as a party, a witness, or in any other capacity in any other proceeding concerning the allocation of parental rights and responsibilities for this child(ren), including any proceeding concerning parenting time rights, visitation, or the designation of residential parent and legal custodian?

Yes       No

If "Yes", state the name and address of the court, the case number, and the date of the proceeding.

---



---

4. Do you know of any other proceeding that could affect the current proceeding, including a proceeding for enforcement of a child custody determination, a proceeding relating to domestic violence or protection orders, a proceeding to adjudicate the child as an abused, neglected, or dependent child, a proceeding seeking termination of parental rights, or a proceeding for adoption?

Yes       No

If "Yes", state the name and address of the court or agency, the case number, and the nature of the proceeding.

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

5. Do you know of any person who is not a party to this proceeding and who has physical custody of the child(ren), claims to be the residential parent and legal custodian of the child(ren), or claims to have parenting time or visitation rights with respect to the child(ren)?

Yes       No

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

6. Do you know of any child support order for the child(ren) that has been issued by any court or agency?

Yes       No

If "Yes", state the name and address of the court or agency that issued the order and the case number.

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

7. I understand that I must inform the Court if I learn of any other child custody proceeding concerning the child(ren) that could affect the current proceeding.

**OATH OF AFFIANT**

**I hereby swear or affirm that the answers above are true, complete, and accurate to the best of my knowledge. I understand that falsification of this document may result in a contempt of court finding against me which could result in a jail sentence and fine, and that falsification of this document may also subject me to criminal penalties for perjury under Ohio Revised Code § 2921.11.**

\_\_\_\_\_  
AFFIANT

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC



**IN THE COURT OF COMMON PLEAS OF FAIRFIELD COUNTY, OHIO  
DOMESTIC RELATIONS DIVISION**

\_\_\_\_\_  
Plaintiff/Petitioner

vs / and

Case No.: \_\_\_\_\_

\_\_\_\_\_  
Defendant/Petitioner

**FINANCIAL AFFIDAVIT / MOTION FOR TEMPORARY  
ORDERS**

\_\_\_\_\_, Affiant(s), being duly sworn, say(s) I am requesting the following:

**PART A - FINANCIAL DISCLOSURE ONLY**

Yes (If yes, skip Part B)

**OR**

**TEMPORARY RELIEF REQUESTED**

I am requesting the following:

- Residential Parent Allocation       Spousal Support       Debt Allocation  
 Companionship Only       Child Support  
 Legal Fees and Expenses - Amount requested: \_\_\_\_\_  
 Other (please specify): \_\_\_\_\_

**PART B - NOTICE OF HEARING**

This matter shall come on for a **NON-ORAL HEARING** on affidavits only (parties and counsel need not appear)

on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_  
at \_\_\_\_\_ am / pm before Magistrate / Judge \_\_\_\_\_.

**PART C - CASE INFORMATION**

	HUSBAND / FATHER	WIFE / MOTHER
Full Name		
Street Address		
City / State / Zip		
Telephone		
Last 4 digits of Social Security #		
Date of Birth / Current Age		

**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/Relationship: 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.)		
<b>TOTAL GROSS ANNUAL INCOME</b>		

\* ATTACH VERIFICATION OF CURRENT INCOME (PAYSTUBS, W-2, TAX RETURN, ETC.)

	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):		
<b>TOTAL ANNUAL DEDUCTIONS</b>		
<b>TOTAL GROSS ANNUAL INCOME MINUS TOTAL ANNUAL DEDUCTIONS = TOTAL NET ANNUAL INCOME</b>		

**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

**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 / FATHER'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
1. 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)		
9. Child Support for other children (not withheld from income)		
10. Spousal Support Paid to Former Spouse		
11. Other (please specify):		
<b>TOTAL MONTHLY EXPENSES</b>		

**PART J - DEBTS**

List all 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 <sup>nd</sup> 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 \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Affiant

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

IN THE COURT OF COMMON PLEAS OF FAIRFIELD COUNTY, OHIO  
DOMESTIC RELATIONS DIVISION

\_\_\_\_\_) )  
Plaintiff/Petitioner, ) CASE NO. \_\_\_\_\_  
-vs/and- ) JUDGE LAURA B. SMITH  
\_\_\_\_\_) )  
Defendant/Respondent/Petitioner. )

**AFFIDAVIT OF INDIGENCY**

STATE OF OHIO,  
COUNTY OF FAIRFIELD, 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 an attorney to represent me. If sufficient funds do become available to me in the future, I am willing to pay the costs at that time.
3. I therefore request that I be allowed to proceed in this matter without prepayment of costs.

\_\_\_\_\_  
Movant Signature

SWORN TO AND SUBSCRIBED BEFORE ME, a Notary Public, this \_\_\_\_\_  
day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public