IN THE COURT OF COMMON PLEAS
_____ DIVISION
_____ COUNTY, OHIO

_____ Case No. _____
Plaintiff

Judge _____

vs.

Magistrate _____

_____
Defendant

WARNING: This form is not a substitute for the benefit of the advice of legal counsel. It is highly recommended that you consult an attorney.
Instructions: Check local court rules to determine when this form must be filed. This form is used to request temporary orders in your divorce or legal separation case. After a party serves a Motion and Affidavit, the other party has 14 days to file a Counter Affidavit and serve it on the party who filed the Motion. The Court may require additional forms to accompany this document. You must check the requirements of the county in which you file. **If more space is needed, add additional pages.**

MOTION AND AFFIDAVIT OR COUNTER AFFIDAVIT FOR TEMPORARY ORDERS WITHOUT ORAL HEARING

Check one box below to show whether you are filing a (A) Motion and Affidavit or (B) Counter Affidavit.

☐ **(A) Motion and Affidavit**

_____ (name), the Movant, files this Motion and Affidavit under Civ.R. 75(N) and/or under R.C. 3109.043 to request the temporary orders checked here.

Check only those that apply.

_____ Residential parenting rights (custody)
_____ Parenting time (companionship or visitation)
_____ Child support
_____ Spousal support (if married)
_____ Payment of debts and/or expenses

THE OTHER PARTY HAS FOURTEEN (14) DAYS FROM THE DATE ON WHICH THIS MOTION IS SERVED TO FILE A COUNTER AFFIDAVIT AND SERVE IT UPON THE PARTY WHO FILED THE MOTION. (*See below*)

☐ **(B) Counter Affidavit**

Movant files this Counter Affidavit in response to a Motion and Affidavit.

Complete the following information, whether filing Motion and Affidavit or Counter Affidavit.
(*Check all that apply)*

1. ☐ The parties are living separately.
Date of separation is _____.

☐ The parties are living together.

☐ The parties have no minor children. (*Skip to number 6*)

☐ The parties have (a) minor child(ren) who was/were born from or adopted during this relationship. (*List child(ren) here*)

Name	**Date of birth**	**Living with**

☐ In addition to the above child(ren),

Movant has _____ other biological or adopted minor child(ren).

Other party has _____ other biological or adopted minor child(ren).

There is/are _____ adult(s) in Movant's household.

2. Movant's child(ren) attend(s) school in:

☐ _____ public school district

☐ Other: (*Explain*) _____

☐ All children do not attend school in the same district. (*Explain*)

_____

_____

3. ☐ Movant requests to be named the temporary residential parent and/or legal custodian of the child(ren): (*Specify child(ren) if request is not for all child(ren)*)

_____

_____

☐ Movant does not object to the other parent or party being named the temporary residential parent and/or legal custodian of the child(ren): (*Specify child(ren) if request is not for all child(ren)*)

_____

_____

4. ☐ Movant has reached an agreement regarding parenting time (companionship or visitation) with the other parent or party as follows:

_____

_____

_____

☐ Movant wishes to exercise the following parenting time (companionship or visitation):

_____

_____

_____

☐ Movant wishes for the other parent or party to exercise the following parenting time (companionship or visitation):

_____

_____

_____

☐ Movant requests that the other parent or party's parenting time (companionship or visitation) be supervised: (*Explain the reason for request*.)

_____

_____

_____

Name of an appropriate supervisor _____

5. ☐ A Court or agency has made a child support order concerning the child(ren).

Name of Court/Agency _____

Date of Order _____

SETS No. _____

6. Movant requests the Court to order the other parent or party to pay:

☐ $_____ child support per month

☐ $_____ spousal support per month (only if married)

☐ $_____ attorney fees, expert fees, Court costs

☐ The following debts and/or expenses:

_____

_____

☐ Other: _____

_____

_____

7. ☐ Movant is willing to attend mediation.

☐ Movant is not willing to attend mediation.

8. ☐ Movant requests the following Court services. (*See local rules of Court for available services.)*

_____

_____

State specific reasons why Court services are required.

_____

_____

_____
Attorney or Self Represented Party Signature

_____
Printed Name

_____
Address

_____
City, State, Zip

_____
Phone Number

_____
Fax Number

_____
E-mail

_____
Supreme Court Reg No. (if any)

OATH OR AFFIRMATION

I, (print name)_____, swear or affirm that I have read this Affidavit and, to the best of my knowledge and belief, the facts and information stated in this Affidavit are true, accurate, and complete. I understand that if I do not tell the truth, I may be subject to penalties for perjury.

_____
Signature

STATE OF _____)
) SS
COUNTY OF _____)

Sworn to or affirmed before me by _____this _____day of _____, _____.

NOTICE OF HEARING

(*Check with local Court to obtain a hearing date and time and for scheduling procedure*)

You are hereby given notice that this Motion for Temporary Orders will come before the Court for consideration on Affidavits only, without oral testimony, before Judge/Magistrate _____, at _____ a.m./p.m. on _____, 20_____.

CERTIFICATE OF SERVICE

(*Check the boxes that apply*)

I delivered a copy of the: ☐ Motion and Affidavit or ☐ Counter Affidavit

On: (Date) _____ , 20 _____

To: (Print name of other party's attorney or, if there is no attorney, print name of the party)

_____

At: (Print address or fax number) _____

_____

By:

- ☐ As instructed in the Request for Service (Uniform Domestic Relations Form 31/Uniform Juvenile Form 10) filed with the Clerk of Courts
- ☐ Regular U.S. Mail
- ☐ Fax
- ☐ Hand Delivery
- ☐ Other: _____

_____

Signature