## IN THE COURT OF COMMON PLEAS DIVISION COUNTY, OHIO Case No. 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

	(name), the Movant, files this Motion and
Affidavit under Civ.R. 75(N) and	d/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
	OURTEEN (14) DAYS FROM THE DATE ON WHICH THIS MOTION IS ER AFFIDAVIT AND SERVE IT UPON THE PARTY WHO FILED THE
(B) Counter Affidavit	
	vit in response to a Motion and Affidavit.

Supreme Court of Ohio
Uniform Domestic Relations Form – Affidavit 5
MOTION AND AFFIDAVIT OR COUNTER AFFIDAVIT FOR
TEMPORARY ORDERS WITHOUT ORAL HEARING
Approved under Ohio Civil Rule 84
Amended: September 21, 2020

## 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	<u></u> .	
		The parties are living together.		
		The parties have no minor children. (S	kip to number 6)	
		The parties have (a) minor child(ren) w (List child(ren) here)	ho was/were born from	or adopted during this relationship.
		Name	Date of birth	Living with
		Lead Production that the sale and Production		
		In addition to the above child(ren),	athan bialasiaa	
				l or adopted minor child(ren).
		There is/are		l or adopted minor child(ren).
		There is/are	addit(\$) iii iviov	vant s nousenoid.
2.	Movai	nt's child(ren) attend(s) school in:		
			public school distric	t
		Other: (Explain)		
	Ш	All children do not attend school in the	same district. (Explain)	
3.		Movant requests to be named the to child(ren): (Specify child(ren) if requests		
		Movant does not object to the other pa and/or legal custodian of the child(ren)		
4.		Movant has reached an agreement regother parent or party as follows:	garding parenting time (	(companionship or visitation) with the

		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: ( <i>Explain the reason for request</i> .)
		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.
ô.	Mova	nt 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 ser	vices 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)
		AFFIRMATION Notary Public is present)
	st of my knowledge and belief, the fact	, swear or affirm that I have read this Affidavit s and information stated in this Affidavit are true, accurate, and I may be subject to penalties for perjury.
		Signature
STATE OF _	)	· ·
	) ss )	
Sworn to or	affirmed before me by	thisday of
		Signature of Notary Public
		Printed Name of Notary Public
		Commission Expiration Date:
		(Affix seal here)

Supreme Court of Ohio
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## **NOTICE OF HEARING**

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

at	<del> </del>	a.m./p.m. on	, 20
		<del></del>	ICATE OF SERVICE the boxes that apply)
I delive	ered a c	opy of the:	rit or ☐ Counter Affidavit
On:	(Date	e)	, 20
To:	(Prin	t name of other party's attorney o	r, if there is no attorney, print name of the party)
At:	(Prin	t address or fax number)	
At: By:	(Prin		Service (Uniform Domestic Relations Form 31/Uniform
		As instructed in the Request for	Service (Uniform Domestic Relations Form 31/Uniform
		As instructed in the Request for Juvenile Form 10) filed with the	Service (Uniform Domestic Relations Form 31/Uniform
		As instructed in the Request for Juvenile Form 10) filed with the Regular U.S. Mail	Service (Uniform Domestic Relations Form 31/Uniform