

**IN THE COURT OF COMMON PLEAS  
Juvenile Division  
ROSS COUNTY, OHIO**

IN THE MATTER OF:

A Minor	:	
Plaintiff	:	Case No. _____
Street Address	:	
City, State and Zip Code	:	Judge <u>J. JEFFREY BENSON</u>
	:	
vs.	:	Magistrate _____
	:	
Defendant	:	
Street Address	:	
City, State and Zip Code	:	

**Instructions:** This form is used to be legally recognized as the parent of the child, be named as the residential parent, or obtain visitation with the child(ren). The Parenting Proceeding Affidavit (Uniform Domestic Relations Form - Affidavit 3) and the Affidavit of Income and Expenses (Uniform Domestic Relations Form - Affidavit 1) must be filed with this Complaint.

**COMPLAINT FOR PARENTAGE,  
ALLOCATION OF PARENTAL RIGHTS AND RESPONSIBILITIES (CUSTODY), AND  
PARENTING TIME (COMPANIONSHIP AND VISITATION)**

1. I, \_\_\_\_\_ (name), am the Plaintiff and parent of the following child(ren):

Name of Child	Date of Birth
_____	_____
_____	_____
_____	_____

2. Defendant, \_\_\_\_\_ is the biological  Father  Mother (select one) of the child(ren).

3. The child(ren) has/have resided in \_\_\_\_\_ County, Ohio since \_\_\_\_\_ (date residence established) as set out in the Parenting Proceeding Affidavit (Uniform Domestic

4. The parent-child relationship  has  has not (select one) been established. If it has been established, a copy of the order establishing the parent-child relationship is attached. A copy of the child(ren)'s birth certificate is also attached.

5.  No court has issued an order about the following child(ren):

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The following Court has issued an order about the following child(ren):

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6. I request that the Court (check all that apply):

Name \_\_\_\_\_ (parent's name) as the parent of the child(ren) \_\_\_\_\_

\_\_\_\_\_ (child(ren)'s name).

Correct the child(ren)'s birth certificate to indicate the child(ren)'s parent.

Order genetic testing and determine the father of the child(ren).

Name the  Plaintiff  Defendant (select one) as the residential parent and legal custodian of the child(ren).

Grant reasonable parenting time (visitation) to the parent.

Change the child(ren)'s name to \_\_\_\_\_

Adopt the proposed Shared Parenting Plan for the child(ren) which is attached.

Order the appropriate amount of child support for the child(ren), allocate the income tax dependency exemption for the child(ren), and determine who should provide health insurance coverage for the child(ren).

Other (specify): \_\_\_\_\_

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\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Telephone number at which the Court may reach you  
or at which messages may be left for you