

IN THE COURT OF COMMON PLEAS  
COUNTY, OHIO

\_\_\_\_\_  
**Petitioner**  
**CONFIDENTIAL** : Case No. \_\_\_\_\_

\_\_\_\_\_  
 Address (Safe mailing address) : Judge/Magistrate \_\_\_\_\_

\_\_\_\_\_  
 City, State, Zip Code :

v. : **MOTION FOR CONTEMPT OF A DOMESTIC  
 VIOLENCE OR DATING VIOLENCE CIVIL  
 PROTECTION ORDER (R.C. 3113.31)**

\_\_\_\_\_  
**Respondent** :

\_\_\_\_\_  
 Address :

\_\_\_\_\_  
 City, State, Zip Code :

**IF YOU ARE ASKING FOR YOUR ADDRESS TO BE KEPT CONFIDENTIAL, PLEASE GIVE ANOTHER MAILING ADDRESS WHERE YOU CAN SAFELY RECEIVE MAIL. IF YOU ARE A PARTICIPANT IN THE SECRETARY OF STATE'S ADDRESS CONFIDENTIALITY PROGRAM, PLEASE USE THE P.O. BOX ADDRESS GIVEN TO YOU. THIS FORM IS A PUBLIC RECORD.**

Petitioner  Respondent moves this Court to find \_\_\_\_\_  
in contempt of court for violating one or more of the provisions of the  Domestic Violence Civil  
Protection Order  Dating Violence Civil Protection Order issued on \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
for the reasons below.

- 1. Respondent violated the Civil Protection Order by  
 (check all that apply):
  - Abusing me or another protected person
  - Harming me or attempting to harm me or another protected person
  - Threatening me or another protected person
  - Following me or another protected person
  - Stalking me or another protected person
  - Harassing me or another protected person
  - Forcing sexual relations upon \_\_\_\_\_ me or another protected person
  - Committing a sexually oriented offense against me or another protected person
- 2. Respondent failed to vacate the residence at \_\_\_\_\_
- 3. Respondent interfered with my exclusive possession of the residence located at \_\_\_\_\_

Furthermore, Respondent did the following (check all that apply):

- Cancelled utilities
  - Cancelled insurance
  - Interrupted telecommunication (telephone, internet, or cable) services
  - Interrupted mail delivery
  - Interrupted delivery of any other documents or items
4. Respondent failed to surrender keys or garage door openers to the residence for which the Civil Protection Order Grants Petitioner exclusive use.
5. Respondent entered or interfered with the residence, school, business, place of employment, day care center, or child care provider of the protected persons.
6. Respondent violated the stay away provision of the Civil Protection Order.
7. Respondent violated the no contact provision of the Civil Protection Order by (check all that apply):
- Posting photographs, videos, or other images of me or another protected person on social media
  - Referring to me or another protected persons on social media
  - Electronically surveilling me or another protected person
8. Respondent failed to surrender the keys to the motor vehicle for which the Civil Protection Order grants Petitioner exclusive use.
9. Respondent removed, damaged, hid, or disposed of personal property, companion animals, or pets in violation of the Civil Protection Order.
10. Respondent impeded Petitioner from removing Petitioner's companion animal or pet in violation of the Civil Protection Order.
11. Respondent caused or encouraged another person to do acts prohibited by the Civil Protection Order.
12. Respondent violated the Civil Protection Order by possessing, using, carrying, obtaining, or failing to turn over a deadly weapon, including firearms, and ammunition.
13. Petitioner Respondent violated the temporary allocation of parental rights and responsibilities (custody).
14. Petitioner Respondent violated the visitation order.
15. Respondent violated the child or spousal support provision in the Civil Protection Order.
16. Respondent used or possessed alcohol or illegal drugs in violation of the Civil Protection Order.
17. Petitioner Respondent failed to attend the ordered counseling program in violation of the Civil Protection Order.
18. Respondent interfered with the wireless service transfer, prevented the functionality of a device on the network, or incurred further contractual or financial obligations related to the wireless service transferred in violation of the Civil Protection Order.
19. Other violations of the Civil Protection Order or additional explanation (**if you need more space, attach an additional page**):

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

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I swear or affirm that the answers above are true, complete, and accurate to the best of my knowledge. I understand that making false statements in this document may result in a contempt of court finding against me which could result in a jail sentence and fine, and may also subject me to criminal penalties for perjury under R.C. 2921.11.

\_\_\_\_\_  
**SIGNATURE OF PETITIONER/RESPONDENT      DATE**

\_\_\_\_\_  
IF YOU DO NOT HAVE AN ATTORNEY FOR THIS CASE, PLEASE LEAVE THIS INFORMATION BELOW BLANK

\_\_\_\_\_  
Signature of Attorney for Petitioner

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Attorney Registration Number

\_\_\_\_\_  
Telephone

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

**IN THE COURT OF COMMON PLEAS**  
\_\_\_\_\_ **COUNTY, OHIO**

\_\_\_\_\_  
**Petitioner** : Case No. \_\_\_\_\_

**v.** : Judge/Magistrate \_\_\_\_\_

\_\_\_\_\_  
**Respondent** :

**REQUEST FOR SERVICE**

TO THE CLERK OF COURT:

Pursuant to Civ.R. 65.1(C)(4), please serve Respondent a copy of the Motion and any other accompanying documents to the address below and as follows:

- Personal service
- Other (specify) \_\_\_\_\_
- Certified Mail, Return Receipt Requested

- Other (address): \_\_\_\_\_
- Personal service
- Other (specify) \_\_\_\_\_
- Certified Mail, Return Receipt Requested

SPECIAL INSTRUCTIONS TO SHERIFF:

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

\_\_\_\_\_  
**SIGNATURE OF ATTORNEY OR PETITIONER**

**RETURN OF SERVICE**

Respondent was served on \_\_\_\_\_ .

\_\_\_\_\_  
Officer and Badge Number

\_\_\_\_\_  
Law Enforcement Agency

\_\_\_\_\_  
Date

**CLERK'S CERTIFICATE OF MAILING**

Service of Process was sent by \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ .

Attest: \_\_\_\_\_ Deputy Clerk

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

**NOTICE OF HEARING**

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

VS

\_\_\_\_\_  
DEFENDANT

YOU ARE HEREBY NOTIFIED THAT THE \_\_\_\_\_  
\_\_\_\_\_ WILL COME ON FOR  
HEARING ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_  
AT \_\_\_\_\_ .M. AT THE PORTAGE COUNTY DOMESTIC  
RELATIONS COURT, 203 W MAIN ST, RAVENNA OH,  
44266.

\_\_\_\_\_

Portage County Clerk of Courts

Domestic Relations Division

Common Pleas Court

Confidential address

For Petitioner only

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

OUT OF COUNTY SHERIFF SERVICE

IN ORDER FOR SERVICE TO BE PERFECTED BY ANY OTHER COUNTY,  
BESIDES PORTAGE, WE WILL NEED THE FOLLOWING INFORMATION.

WHAT COUNTY SHERIFF? \_\_\_\_\_

ADDRESS? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PHONE? \_\_\_\_\_

AREA CODE

NUMBER

FAX? \_\_\_\_\_

AREA CODE

NUMBER

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

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

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

**PLAINTIFF/PETITIONER 1**

vs.

**JUDGE PAULA C. GIULITTO**

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

**DEFENDANT/PETITIONER 2**

**NOTICE OF FILING**

\* \* \*

Notice is hereby given that on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,  
\_\_\_\_\_ filed the following document(s):  
\_\_\_\_\_  
\_\_\_\_\_.

In accordance with Rule of Superintendence 44 (C)(2)(h), said document(s) is/are filed in the Court's Family File. Notice of Filing of said document, without attachment of the actual document, is hereby submitted.

Respectfully submitted,

\_\_\_\_\_  
(name - sign on line and print name under line)

Supreme Court Registration: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

**PROOF OF SERVICE**

A copy of the foregoing Notice of Filing was sent by regular U.S. Mail to \_\_\_\_\_, at \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(name - sign on line and print name under line)

IN THE \_\_\_\_\_ COURT  
 \_\_\_\_\_ COUNTY, OHIO

\_\_\_\_\_  
**Petitioner** : **Case No.** \_\_\_\_\_  
 :  
 : **Judge:** \_\_\_\_\_  
 v. :  
 : **INFORMATION FOR PARENTING**  
 : **PROCEEDING AFFIDAVIT (R.C. 3127.23)**  
 \_\_\_\_\_ :  
**Respondent** : **(Filed with Form 10.01-D: Petition for**  
 : **Domestic Violence Civil Protection Order)**

Use this form if you are requesting a parenting (custody or visitation) order in your Domestic Violence Civil Protection Order Petition (Form 10.01-D). If another court is already addressing or has addressed custody issues involving the children, custody and visitation issues may be handled in that case. By law, this form **must** be filed and served with the first pleading filed by each party in every parenting (custody or visitation) proceeding in this Court including a Petition for a Domestic Violence Civil Protection Order. **If you need more space, attach an additional page.**

I (full legal name) \_\_\_\_\_,  
 state under oath or affirmation that these cases involve the custody of a child or children and the following statements are true:

1.  Pursuant to R.C. 3127.23(D), I am requesting that the Court not disclose my current address or that of the children. My address is confidential and should be placed under seal because my health, safety, or liberty or that of the children would be jeopardized by the disclosure of the identifying information.
2. \_\_\_\_\_ (number) **Minor children are subject to this case as follows:**

(NOTE: Provide residence information for the last FIVE years.)

<b>a. Child's Name:</b>		<b>Date of Birth:</b>	
<b>Period of Residence</b>		<b>Address (Do not list your address if confidential)</b>	<b>Person with whom Child Lived and Relationship to Child</b>

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

to present	<input type="checkbox"/> Address Confidential <input type="checkbox"/> Secretary of State Address Confidentiality Program		
to	<input type="checkbox"/> Address Confidential <input type="checkbox"/> Secretary of State Address Confidentiality Program		
to	<input type="checkbox"/> Address Confidential <input type="checkbox"/> Secretary of State Address Confidentiality Program		
to	<input type="checkbox"/> Address Confidential <input type="checkbox"/> Secretary of State Address Confidentiality Program		

**b. Child's Name:**

**Date of Birth:**

Check this box if the information requested below is the same as above.

Period of Residence		Address (Do not list your address if confidential)	Person with whom Child Lived and Relationship to Child
to present	<input type="checkbox"/> Address Confidential <input type="checkbox"/> Secretary of State Address Confidentiality Program		
to	<input type="checkbox"/> Address Confidential <input type="checkbox"/> Secretary of State Address Confidentiality Program		

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

to	<input type="checkbox"/> Address Confidential  <input type="checkbox"/> Secretary of State Address Confidentiality Program		
to	<input type="checkbox"/> Address Confidential  <input type="checkbox"/> Secretary of State Address Confidentiality Program		

<b>c. Child's Name:</b>	<b>Date of Birth:</b>
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Check this box if the information requested below is the same as above.

Period of Residence		Address (Do not list your address if confidential)	Person with whom Child Lived and Relationship to Child
to present	<input type="checkbox"/> Address Confidential		
to	<input type="checkbox"/> Address Confidential  <input type="checkbox"/> Secretary of State Address Confidentiality Program		
to	<input type="checkbox"/> Address Confidential  <input type="checkbox"/> Secretary of State Address Confidentiality Program		
to	<input type="checkbox"/> Address Confidential  <input type="checkbox"/> Secretary of State Address Confidentiality Program		

**d.** List additional children on a page titled **Attachment 2(d)**. (Provide the following information for each additional child: name, date of birth, person with whom the child lived and child's relationship to the person, address, unless confidential, and dates when the child lived in that place with that person.)

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

**3. Participation in custody case(s): (check only one)**

- I **HAVE NOT** participated as a party, witness, or in any capacity in any other case, in this or any other state, concerning the custody of or visitation (parenting time) with any child subject to this case.
- I **HAVE** participated as a party, witness, or in any capacity in any other case, in this or any other state, concerning the custody of or visitation (parenting time) with any child subject to this case. Explain:

\_\_\_\_\_

- a. Name of each child \_\_\_\_\_
- b. Type of case \_\_\_\_\_
- c. Court and State \_\_\_\_\_
- d. Date of court order or judgment (if any): \_\_\_\_\_

**4. Information about custody case(s): (check only one)**

- I **HAVE NO INFORMATION** of any cases that could affect the current case, any cases relating to custody, domestic violence or protection orders, dependency, neglect or abuse allegations, or adoptions concerning any child subject to this case.
- I **HAVE THE FOLLOWING INFORMATION** concerning cases that could affect the current case, including any cases relating to custody, domestic violence or protection orders, dependency, neglect or abuse allegations, or adoptions concerning any child subject to this case, other than listed in Paragraph 3. Explain:

\_\_\_\_\_

- a. Name of each child \_\_\_\_\_
- b. Type of case \_\_\_\_\_
- c. Court and State \_\_\_\_\_
- d. Date of court order or judgment (if any): \_\_\_\_\_

5. List all of the criminal convictions including guilty pleas for you and the members of your household for the following offenses: any criminal offense involving acts that resulted in a child being abused or neglected; any offense that is a violation of R.C. 2919.25; any sexually oriented offense as defined in R.C. 2950.01; and any offense involving a victim who was a family or household member at the time of the offense and caused physical harm to the victim during the commission of the offense.

NAME	CASE NUMBER	COURT/STATE/ COUNTY	TYPE OF CASE	RESULT OF CASE

**6. Persons not a party to this case:**

- I **DO NOT KNOW OF ANY PERSON** who is not a party to this case and who has physical custody or claims to have custody or visitation rights with respect to any child subject to this case.

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

**I KNOW THAT THE FOLLOWING NAMED PERSON(S)** not a party to this case has/have physical custody or claim(s) to have custody or visitation rights with respect to any child subject to this case:

a. Name and address of person \_\_\_\_\_  
has  physical custody  claims custody rights  claims visitation rights.  
Name of each child \_\_\_\_\_

b. Name and address of person \_\_\_\_\_  
 has physical custody  claims custody rights  claims visitation rights.  
Name of each child \_\_\_\_\_

c. Name and address of person \_\_\_\_\_  
has  physical custody  claims custody rights  claims visitation rights.  
Name of each child \_\_\_\_\_

7. **I have a continuing duty to inform this Court of any child custody, visitation, parenting time, divorce, dissolution of marriage, separation, neglect, abuse, dependency, guardianship, parentage, termination of parental rights, or domestic violence case concerning the children in this state or in any other state that could affect the current case.**

**OATH OR AFFIRMATION**

I swear or affirm that the answers above are true, complete, and accurate to the best of my knowledge. I understand that making false statements in this document may result in a contempt of court finding against me which could result in a jail sentence and fine, and may also subject me to criminal penalties for perjury under R.C. 2921.11.

**DO NOT SIGN THE FORM UNLESS YOU ARE IN FRONT OF THE PERSON WHO WILL NOTARIZE THE PARENTING PROCEEDING AFFIDAVIT FOR YOU.**

\_\_\_\_\_  
Signature of Petitioner

Sworn to and subscribed before me on this \_\_\_\_\_ day of \_\_\_\_\_

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