

You must file these added forms if you are filing one of the following actions in the **Adams County Court of Common Pleas Juvenile Division**:

- **COMPLAINT FOR PARENTAGE, ALLOCATION OF PARENTAL RIGHTS, OR PARENTING TIME (parents)**
- **COMPLAINT FOR CUSTODY (Non-parent)**
- **DEFENDING A COMPLAINT FOR PARENTAGE**
- **MOTION FOR CHANGE OF PARENTAL RIGHTS AND RESPONSIBILITIES (custody)**
- **DEFENDING A MOTION FOR CHANGE OF PARENTAL RIGHTS AND RESPONSIBILITIES**

AC-001	Notice of Appearance	Tells the Court your contact information
AC-002	Waiver of Counsel	Tells the Court you will be representing yourself
AC-007	Authorization for Background check <i>*Required for each household resident over the age of 18. The Sheriff may charge a fee for this service.</i>	Allows the Court to receive information about your civil and criminal history and other public records. FBI and BCI checks must be completed.
	Certified Copy of the child's birth certificate	The Court will make a copy and return the original to you.
AC-202	Child Support Enforcement Account Information Sheet	Provides the CSEA with information
AC-203	Notice of Helping Children Cope with Family Separation Seminar	Information on the required parenting seminar.
AC-204	Helping Children with Family Separation Registration Packet	This packet is updated on the Court's website each year so to ensure you receive the most updated registration information, you must print off a copy from: <a href="https://sites.google.com/view/adamscountycommonpleas/home/domestic/divorce-with-children">https://sites.google.com/view/adamscountycommonpleas/home/domestic/divorce-with-children</a> You can find the packet under "#Parenting Seminar Required"

AC-205	Motion for Shared Parenting *Parents only	Asks the Court to order shared parenting for you and the other parent to care of the children

**INSTRUCTIONS:**

- All forms must either be typed or printed in ink. You must fill out the forms before taking them to the court. The Court staff will not help you complete the forms.
- Once you have completed the main packet and these added forms, you will take all the forms (and copies) to the Clerk's office to file.

COURT OF COMMON PLEAS,  
ADAMS COUNTY, OHIO

☐ In Re: ☐ ESTATE/ADOPTION OF

\_\_\_\_\_,  
☐ PLAINTIFF ☐ PETITIONER

VS.

\_\_\_\_\_,  
☐ DEFENDANT ☐ PETITIONER 2 ☐ RESPONDENT

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

JUDGE: BRETT M. SPENCER

MAGISTRATE: DAVID M. HUNTER

NOTICE OF APPEARANCE

This case is in ☐ Juvenile Division ☐ Domestic Relations Division  
☐ Civil/Criminal Division ☐ Probate Division

Select One

- ☐ I am representing myself (*pro se*) and respectfully request notification of all Court orders and Court appearances in this matter. Form AC-002 also required
- ☐ I am an attorney representing a client

Client/Party Information (Attorneys must provide this information for the client)

\_\_\_\_\_  
First Name Middle Name Last Name

\_\_\_\_\_  
Street Address / Unit Number

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

\_\_\_\_\_  
Cell Phone Home Phone Email Address

The Attorney listed below has been retained by the party above and respectfully requests notification of all Court orders and Court appearances in this matter.

\_\_\_\_\_  
Name Firm Name Supreme Court Number

\_\_\_\_\_  
Street Address / Unit Number

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

\_\_\_\_\_  
Office Phone Fax Number Email Address

Please ensure that your writing is legible. The Court will use this information to contact you during your case. Unless otherwise requested, the Clerk will send notices and documents to Attorneys by email.

\_\_\_\_\_  
Attorney/Party Signature

COURT OF COMMON PLEAS,  
ADAMS COUNTY, OHIO

☐ In Re: ☐ ESTATE/ADOPTION OF

\_\_\_\_\_,  
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VS.

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

JUDGE: BRETT M. SPENCER

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WAIVER OF COUNSEL

I am representing myself in the above captioned case and am acting as my own attorney in this matter. Although I may have obtained forms from the court's website or from court personnel, I understand that I have not been given legal advice. I also understand that in representing myself I am required to follow the applicable Ohio Rules of Civil Procedure, Ohio Rules of Evidence, statutory laws and Local Rules of Court. Furthermore, I have not relied on assistance from the court or its personnel in determining what to file or what to present as evidence in my case. I understand that if I am concerned about my rights or responsibilities in this matter, I must seek legal advice from an attorney, not from the court. I understand that any Attorney representing another party does not represent my legal interests.

\_\_\_\_\_  
Party Signature

\_\_\_\_\_  
Party Name PRINTED LEGIBLY

**COURT OF COMMON PLEAS, ADAMS COUNTY, OHIO**

**BRETT M. SPENCER, JUDGE**

CASE NO.

**AUTHORIZATION FOR RELEASE OF INFORMATION**

**(INFORMATION FOR COURT USE ONLY)**

**CONFIDENTIAL – NOT A PUBLIC RECORD**

I, \_\_\_\_\_ of  
(address)

(city)

(state)

(zip)

do hereby authorize: Adams County Common Pleas Court to obtain from Ohio Courts Network (OCN) and any other law enforcement information system and any court system, current and previous residences, civil and criminal history records, driving records, birth records, public records or any criminal justice agency records that I may have in any federal, state, county, and municipal jurisdictions.

Date of Birth	
Social Security Number	
Drivers License Number/State Issued	
A.K.A.	

Signature

Witness

**CHILD SUPPORT ENFORCEMENT  
ACCOUNT INFORMATION SHEET**

Phone: 937-544-5155 Fax: 937-544-5406 Toll-Free: 800-840-5711

**In order for Child Support Enforcement to set up a child support and/or medical insurance account, the following information must be completed. For spousal support only and no minor children, do not fill in any information after Defendant/Petitioner telephone number.**

JUDGE \_\_\_\_\_ MAGISTRATE \_\_\_\_\_  
DATE: \_\_\_\_\_ CASE NO. \_\_\_\_\_

**PLAINTIFF/PETITIONER:** \_\_\_\_\_  
CURRENT ADDRESS: \_\_\_\_\_  
PHONE #: \_\_\_\_\_ CELL PHONE #: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_  
SOCIAL SECURITY NUMBER: \_\_\_\_\_ E MAIL ADDRESS: \_\_\_\_\_  
NAME AND ADDRESS OF EMPLOYER: \_\_\_\_\_  
TELEPHONE NUMBER.: \_\_\_\_\_

**DEFENDANT/PETITIONER:** \_\_\_\_\_  
CURRENT ADDRESS: \_\_\_\_\_  
PHONE #: \_\_\_\_\_ CELL PHONE #: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_  
SOCIAL SECURITY NUMBER: \_\_\_\_\_ E MAIL ADDRESS: \_\_\_\_\_  
NAME AND ADDRESS OF EMPLOYER: \_\_\_\_\_  
TELEPHONE NUMBER.: \_\_\_\_\_

**MINOR CHILDREN:**

_____	DOB: _____	SSN: _____
_____	DOB: _____	SSN: _____
_____	DOB: _____	SSN: _____
_____	DOB: _____	SSN: _____

**NAME OF PERSON ORDERED TO PROVIDE MEDICAL INSURANCE:** \_\_\_\_\_

<b>INSURANCE COMPANY</b>	<b>CLAIMS SENT TO: (if different)</b>
Name: _____	_____
Address: _____	_____
City/State/Zip: _____	_____
Policy Number: _____	Group Number: _____

Is insurance provided by Non Participating Participant (NPP)? (Example: Step Parent) \_\_ Yes ☒ No

IF Yes: Name of Party: \_\_\_\_\_

SS#: \_\_\_\_\_ DOB: \_\_\_\_\_

Employer Name and Address: \_\_\_\_\_

COURT OF COMMON PLEAS,  
DOMESTIC RELATIONS DIVISION  
ADAMS COUNTY, OHIO

\_\_\_\_\_,  
☐ PLAINTIFF ☐ PETITIONER 1

vs.

\_\_\_\_\_,  
☐ DEFENDANT ☐ PETITIONER 2

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

JUDGE: BRETT M. SPENCER

MAGISTRATE: DAVID M. HUNTER

NOTICE OF HELPING CHILDREN COPE  
WITH FAMILY SEPARATION SEMINAR

TO: ☐ PLAINTIFF ☐ PETITIONER 1 ☐ DEFENDANT ☐ PETITIONER 2

\_\_\_\_\_  
Name of Person Ordered to Attend

- In compliance with the Rules of this Court, you are hereby required to attend a Helping Children Cope with Family Separation Seminar on \_\_\_\_\_ at \_\_\_\_\_ AM/PM
- This seminar is to be held at: \_\_\_\_\_
- The duration of the seminar is approximately: 2 ½ hours

**Children, significant others, relatives and friends are NOT to attend the seminar.**

Special assistance is available for disabled individuals. Please notify Lifespan Solutions of any special needs. For those individuals not conversant in English, please notify in advance for special instructions.

If you have any further questions, please call: Lifespan Solutions at 513-324-3999  
Monday through Friday between 8:00 A.M. and 4:00 P.M.

**YOU MUST BRING THIS NOTICE TO THE SEMINAR.**

*Helping Children  
Cope With  
Family Separation*

**Adams County, Ohio  
2022  
ONLINE SCHEDULE**

**REGISTRATION PACKET  
January thru December 2022**

*A Cooperative Process: The Adams County Domestic Relations  
Court, The Adams County Juvenile Court, and Lifespan  
Solutions, Cincinnati, Ohio*



## **Your Decision and its Impact on Your Children**

The decision to separate and/or to divorce usually follows much thought and careful consideration. This program is designed to help you and your children work through difficult transitions related to your divorce and related changes in your family structure and circumstances. Like any other life-changing event, divorce can result in emotional growth, or can be a negative experience leaving lasting issues. While you may not have chosen this experience for yourself and your children, you do have a choice in the way you handle it. Family separation can be very difficult, but you and your children can move forward in healthy and positive ways.

## **An Important Message from the Courts**

*"All children are impacted by their parents' divorce or family separation. While some adjust more quickly than others, many suffer the emotional fallout and carry the hurt into their own adult years and relationships. The **Helping Children Cope with Family Separation** program is intended to enable you, the parents, to play an active role in lessening the negative effects and/or trauma imposed upon your children as a consequence of your separation. Therefore, **attendance is mandatory, and a necessary step in scheduling your domestic hearings and in determining your ongoing status in relation to your children.**"*

Brett M. Spencer, Judge, Adams County Courts  
David Hunter, Magistrate, Adams County Juvenile Court

## **Why This Is So Important**

As many as fifty percent of all marriages are presently ending in divorce. Many of these couples have one or more children who must cope with the breakup of their home. Approximately one-third of divorced parents remain bitter and conflicted several years following their divorce. Unfortunately, much of this bitterness and emotional pain is often played out in the life and experiences of the children. Other families experience a significant change in visitation, custody, or family structure that impacts the daily lives of their children. The goal of **Helping Children Cope with Family Separation** is to help parents understand that the best gift they can give their children — and themselves — is to co-parent their children in a positive, healthy manner.

***Helping Children Cope with Family Separation*** is, in part, based on the ***Helping Children Cope with Divorce*** program developed by Beech Acres, Inc., Cincinnati, Ohio.

***For more information or if you have questions call A. Eugene Smiley at 513-324-3999. If you have to leave a message your call will be returned within 24 hours.***

**Adams County Meeting Location**

**Class usually meets in person but due to COVID-19 will be meet ONLINE (6:30-9 :00pm) per the attached schedule**

**Procedure:**

- Download the free ZOOM app to your phone or computer.
- You will receive a ZOOM link to enter class; and class handout – by email.
- You can choose the class you wish to attend from the dates listed.

**A second overflow class will be provided when scheduled class reaches capacity.**

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**Registration Form – next page**

# REGISTRATION FORM

**Call 513-324-3999 to register  
for online class**

*You can pay registration by credit/debit card when you register by phone - or mail this registration form with money order for \$50.00 to Lifespan Solutions, 7672*

*Montgomery Road, #153, Cincinnati, Ohio, 45236 two weeks before date of class.*

## Mail-in Registration

(Mail-in registration not necessary if one completes registration by phone)

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

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

Court Case # \_\_\_\_\_ Brn Cty Court \_\_\_\_\_ Adams Cty Court \_\_\_\_\_

Email address \_\_\_\_\_

\_\_\_\_\_ Thurs January 13, 2022

\_\_\_\_\_ Thurs July 7, 2022

\_\_\_\_\_ Thurs February 3, 2022

\_\_\_\_\_ Thurs August 4, 2022

\_\_\_\_\_ Thurs March 3, 2022

\_\_\_\_\_ Thurs September 1, 2022

\_\_\_\_\_ Thurs April 7, 2022

\_\_\_\_\_ Thurs October 13, 2022

\_\_\_\_\_ WED May 4, 2022

\_\_\_\_\_ Thurs November 3, 2022

\_\_\_\_\_ Thurs June 2, 2022

\_\_\_\_\_ Thurs December 1, 2022

COURT OF COMMON PLEAS,  
DOMESTIC RELATIONS DIVISION  
ADAMS COUNTY, OHIO

\_\_\_\_\_,  
☐ PLAINTIFF ☐ PETITIONER 1

VS.

\_\_\_\_\_,  
☐ DEFENDANT ☐ PETITIONER 2

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

JUDGE: BRETT M. SPENCER

MAGISTRATE: DAVID M. HUNTER

MOTION FOR ☐ GAL ☐ SHARED  
PARENTING ☐ PARENTING  
INVESTIGATION

The following Children are the subject of this motion:

**Name of Child**

**Date of Birth**

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

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

☐ MOTION FOR SHARED PARENTING (See Local Rule 215(A))

☐ EXISTING ORDERS: I request that this Court change the allocation of parental rights and responsibilities (custody) Order filed on \_\_\_\_\_ (filed date) and order shared parenting regarding the child(ren) listed above.

\_\_\_\_\_ (name) is currently designated as the residential  
parent and/or legal custodian of the children and resides in the \_\_\_\_\_ School  
District. I understand that a Change in Circumstance may be required.

The circumstances have changed since the Court issued the existing order. The change in  
circumstances and any other reason for the requested change are as follows:

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

I believe that the changes I am requesting are in the child(ren)'s best interests because.

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

☐ NEW CASE / PRE-DECREE: I request that the Court order shared parenting of the minor child(ren) listed above.

I believe that Shared Parenting is in the child(ren)'s best interests because.

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☐ MOTION TO APPOINT GUARDIAN AD LITEM (GAL) See Local Rule 224

I am requesting that the Court appoint a Guardian ad Litem in this case. I acknowledge that I have read and understand the local rule and that I may be required to provide the entire Initial GAL deposit unless the other party agrees otherwise.

☐ MOTION FOR PARENTING INVESTIGATION See Local Rule 215(C)

I am requesting that the Court conduct a parenting investigation in this case. I acknowledge that I have read and understand the local rule and that I must provide the Fee at the time of filing.

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Your Signature

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Printed Name

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