

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

Date _____

CASE NO. _____

Plaintiff/Petitioner

Defendant/Respondent

The undersigned hereby certifies that: Date motion filed: _____

Time required for hearing: _____ minutes _____ hours _____ days

Counsel and/or party requesting hearing: _____

ATTORNEY FOR PLAINTIFF

ATTORNEY FOR DEFENDANT

NAME AND ADDRESS OF UNREPRESENTED PARTIES

PLAINTIFF

DEFENDANT

The following is a final hearing: _____ yes _____ no

TYPE OF ACTION:

Dissolution with children _____
Dissolution without children _____
Divorce uncontested _____
Divorce contested _____
Pre Trial _____
Pre Trial with litigants _____
Report _____

Post Decree Motion for:
reallocation of parental rights _____
modification of parenting schedule _____
modify/enforce child support _____
modify/enforce health care provisions _____
modification of tax dependency _____
attorney fees and costs _____

THIS HEARING IS SCHEDULED BEFORE:

Judge Michael Voris _____

Visiting Judge _____

Magistrates:

Finney _____

Gates _____

Johnson _____

Dean _____

ASSIGNED DATE: _____, 20____, AT _____ a.m./p.m.