

**INSTRUCTIONS FOR SERVICE**  
**CUYAHOGA COUNTY JUVENILE COURT**

THE STATE OF OHIO  
CUYAHOGA COUNTY

In RE: \_\_\_\_\_

Case: \_\_\_\_\_

Judge: \_\_\_\_\_

Pending Court Date (if applicable): \_\_\_\_\_

---

**TYPE OF SERVICE TO BE ISSUED: (A method of service must be chosen in this section) Certified mail is a required method of service for all first time filings.)**

Certified Mail

Ordinary Mail

Personal Service

Residential Service

Publication (attach affidavit)

---

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

**PLEASE BE ADVISED THAT IF YOU INCLUDE MULTIPLE ADDRESSES FOR THE SAME PERSON, THE ADDRESS WILL NOT BE UPDATED IN OUR SYSTEM. YOU MUST COMPLETE A CHANGE OF ADDRESS FORM, WHICH CAN BE FOUND IN THE CLERK'S OFFICE OR ON THE COURT'S WEBSITE:  
[www.juvenile.cuyahogacounty.us](http://www.juvenile.cuyahogacounty.us).**

**PLEASE IDENTIFY THE COMPLAINT OR MOTION THAT YOU WISH TO HAVE SERVED IN THE SPACE BELOW OR ATTACH A COPY TO THIS FORM.**

**ADDITIONAL INSTRUCTIONS:**

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

\_\_\_\_\_  
ATTORNEY OR PETITIONER (SIGNATURE)

\_\_\_\_\_  
YOUR PHONE NUMBER

\_\_\_\_\_  
ATTORNEY OR PETITIONER (PRINT NAME)

\_\_\_\_\_  
DATE

**Print Person's name that you are representing**

\_\_\_\_\_