COURT OF COMMON PLEAS JUVENILE DIVISION CUYAHOGA COUNTY, OHIO

In the Matter of: _______(Child's name)

Case Number:_____

Pending Court Date (if applicable):_____

Judge:_____

INSTRUCTIONS FOR SERVICE

Pursuant to Juvenile Rule 16 and Civil Rule 4.1, for all first requests for service, the Clerk of Court will serve a copy of your filing to the parties listed by certified mail, unless an alternate service method is selected from the options provided. Service requests by other methods, or additional service requests on parties, may incur further fees. Upon subsequent requests for service the Clerk of Court will only serve by the method selected below.

Choose <u>ONE</u> service type per name and address:

Certified Mail (Check box if primary address)			
Personal Service	(C;+;;)	(Stata)	(7in Codo)
	(City)	(State)	(Zip Code)
Publication (affidavit required)			
Certified Mail (Check box if primary address)	Name:		
Ordinary Mail			
Personal Service			
Residential Service	(City)	(State)	(Zip Code)
Publication (affidavit required)			
	N		
Certified Mail (Check box if primary address)			
Ordinary Mail	Address:		
Personal Service	(2)		
Residential Service	(City)	(State)	(Zip Code)
Publication (affidavit required)			
Certified Mail (Check box if primary address)	Name:		
Ordinary Mail			
Personal Service			
Residential Service	(City)	(State)	(Zip Code)
Publication (affidavit required)			

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: https://juvenile.cuyahogacounty.gov/

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

Petitioner Name-Printed			Attorney Name-Printed			
Signature		Date	Signature		Date	
Address		Address				
City	State	Zip Code	City	State	Zip Code	
Phone Number		Phone Number				
E-mail address		E-mail address				