IN THE COURT OF COMMON PLEAS JUVENILE DIVISION AUGLAIZE COUNTY, OHIO

		Case No.	
Plain	tiff	 Judge	MARK E. SPEES
	VS.	Magistrate	
Defe	ndant		
WA	RNING: This form is not a	substitute for the ben	efit of the advice of legal counsel.
***		mended that you cons	
temp party addi	porary orders in your divorce or legal y has 14 days to file a Counter Affida	separation case. After a pay vit and serve it on the party went. You must check the r	nust be filed. This form is used to reques rty serves a Motion and Affidavit, the other who filed the Motion. The Court may require equirements of the county in which you file
		ID AFFIDAVIT OR COUNTI FOR TEMPORARY ORDER WITHOUT ORAL HEARIN	RS
Che	ck one box below to show whether y (A) Motion and Affidavit	ou are filing a (A) Motion an	d Affidavit or (B) Counter Affidavit.
		(nam	e), the Movant, files this Motion and
	Affidavit under Civ.R. 75(N) and/or	under R.C. 3109.043 to req	uest the temporary orders checked here.
	Check only those that apply.	Parenting time Child support Spousal support Payment of del	enting rights (custody) (companionship or visitation) t (if married) ts and/or expenses
			HE DATE ON WHICH THIS MOTION IS T UPON THE PARTY WHO FILED THE
	(B) Counter Affidavit		
	Movant files this Counter Affidavit i	n response to a Motion and	Affidavit.

Supreme Court of Ohio
Uniform Domestic Relations Form – Affidavit 5
MOTION AND AFFIDAVIT OR COUNTER AFFIDAVIT FOR
TEMPORARY ORDERS WITHOUT ORAL HEARING
Approved under Ohio Civil Rule 84
Amended: June 1, 2021

Complete the following information, whether filing Motion and Affidavit or Counter Affidavit. (Check all that apply)

1.		The parties are living separately. Date of separation is	•			
	ᆜ	The parties are living together.				
		The parties have no minor children. (SA				
		The parties have (a) minor child(ren) w (List child(ren) here)	ho was/were born froi	m or adopted during this relationship.		
		Name	Date of birth	Living with		
		In addition to the above child(ren),				
			-	al or adopted minor child(ren).		
				al or adopted minor child(ren).		
		There is/are	adult(s) in Mo	ovant's household.		
2.	Movar	nt's child(ren) attend(s) school in:	nublic school distri	ict		
		Other: (Explain)	public concor distri			
		All children do not attend school in the same district. (<i>Explain</i>)				
		7 iii official de flot altoria concor in the	Camo dictrict. (Expian			
3.		Movant requests to be named the temporary residential parent and/or legal custodian of the child(ren): (Specify child(ren) if request is not for all child(ren))				
		Movant does not object to the other parent or party being named the temporary residential parent and/or legal custodian of the child(ren): (Specify child(ren) if request is not for all child(ren))				
4. Movant has reached an agreement regarding parenting tim other parent or party as follows:		(companionship or visitation) with the				

		Movant wishes to exercise the following parenting time (companionship or visitation):	
		Movant wishes for the other parent or party to exercise the following parenting time (companionship or visitation):	
		Movant requests that the other parent or party's parenting time (companionship or visitation) be supervised: (<i>Explain the reason for request</i> .)	
		Name of an appropriate supervisor	
5.		A Court or agency has made a child support order concerning the child(ren). Name of Court/Agency	
		Date of Order SETS No.	
3 .	Mova	nt requests the Court to order the other parent or party to pay:	
		\$ child support per month	
		\$ spousal support per month (only if married)	
		\$ attorney fees, expert fees, Court costs The following debts and/or expenses:	
7.	Movant requests the Court order the following other relief:		
2		Movant is willing to attend mediation.	
3.		Movant is not willing to attend mediation.	

9.	Movant requests the following Court services. (See local rules of Court for available services.) State specific reasons why Court services are required.		
	Attorney or Self Represented Party Signature		
		Printed Name	
		Address	
		City, State, Zip Phone Number	
		Fax Number	
		E-mail	
Supreme Court Reg No. (Supreme Court Reg No. (if any)	
	OATH OR AFFIRMATION (Do not sign until Notary Public is present) name), swear or affirm that I have read this Affi he best of my knowledge and belief, the facts and information stated in this Affidavit are true, accurate e. I understand that if I do not tell the truth, I may be subject to penalties for perjury.		
		Signature	
STATE OF _)) ss)		
Sworn to or	affirmed before me by	thisday of,	
		Signature of Notary Public	
		Printed Name of Notary Public	
		Commission Expiration Date:	
		(Affix seal here)	

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NOTICE OF HEARING

(Check with local Court to obtain a hearing date and time and for scheduling procedure)

		by given notice that this Motion for Temporary Orde	
on Affid	avits c	only, without oral testimony, before Judge/Magistra	te
at		a.m./p.m. on	20
		CERTIFICATE OF SERVI (Check the boxes that app	
I deliver	ed a c	copy of the:	ffidavit
On:	(Date	e) , 20	·
To:	(Print name of other party's attorney or, if there is no attorney, print name of the party)		
At:	(Print address or fax number)		
Ву:		As instructed in the Request for Service (Uniform Juvenile Form 10) filed with the Clerk of Courts	Domestic Relations Form 31/Uniform
		Regular U.S. Mail	
		Fax	
		Hand Delivery	
		Other:	
		Signa	ıture