



CUYAHOGA COUNTY COURT OF COMMON PLEAS  
DIVISION OF DOMESTIC RELATIONS

**DIVORCE FILING CHECKLIST**

**If you have questions,  
Call the Help Center at (216) 443-8880**

**Documents Needed For Filing:**

- Case Designation Sheet
- Instructions for Service
- Complaint for Divorce
- Affidavit of Military Service (must be notarized)
- Filing Fee: \$200.00 (without children)

**How to File: [E-Filing](#), [Mail](#) or [Drop-Off](#)**

**PLEASE READ THE ENTIRE NOTICE MAILED TO YOU  
FOLLOW THE INSTRUCTIONS ON THE NOTICE**

**WHAT TO DO AFTER YOU FILE:**

- **All:** Check online docket for completion of service. If service is UNCLAIMED or REFUSED, then call the Help Center for further assistance.
- If your case is UNCONTESTED, you must CALL to the Help Center 2 weeks before your final hearing to have your Final Judgment Entry Pre-Approved.

**Download  
the Court's App:  
CourtConnect**



Register for E-Filing  
[HERE](#)  
to see your case info online

COURT OF COMMON PLEAS  
CUYAHOGA COUNTY  
DIVISION OF DOMESTIC RELATIONS  
CASE DESIGNATION FORM

PLEASE TYPE

Case No.  
Judge

Please list any Pending, closed or previously filed and dismissed Domestic Relations' Case(s) between the parties, list case number and judge: \_\_\_\_\_

I certify that to the best of my knowledge the within case is not related to any now pending or previously filed, except as noted above.

ANNULMENT (1830)  
APPLICATION TO ESTABLISH FAMILY CASE (1895)  
APPLICATION TO ADOPT ADMINISTRATIVE ORDER (1897)  
DISSOLUTION - CHILDREN (1840)  
DISSOLUTION - NO CHILDREN (1841)  
DIVORCE - CHILDREN (1810)  
DIVORCE - NO CHILDREN (1811)

DOMESTIC VIOLENCE (1850)  
DATING VIOLENCE (1851)  
LEGAL SEPARATION - CHILDREN (1821)  
LEGAL SEPARATION - NO CHILDREN (1822)  
UCCJEA - PARENTING REGISTRATION (1890)  
UIFSA - PATERNITY ESTABLISHMENT (1561)  
UIFSA - SUPPORT ESTABLISHMENT (1563)  
UIFSA - SUPPORT REGISTRATION (1562)

Service: Certified Mail Waiver Personal Publication FedEx

Plaintiff's Length of Residence In: Cuyahoga County \_\_\_\_\_ Ohio \_\_\_\_\_

PARTY 1			PARTY 2		
FULL NAME:			FULL NAME:		
ALIAS NAME:			ALIAS NAME:		
DATE OF BIRTH:			DATE OF BIRTH:		
NUMBER OF THIS MARRIAGE:			NUMBER OF THIS MARRIAGE:		
ADDRESS:			ADDRESS:		
CITY:	STATE:	ZIP:	CITY:	STATE:	ZIP:
HOME PHONE:	CELL PHONE:		HOME PHONE:	CELL PHONE:	
EMAIL:			EMAIL:		

DATE OF MARRIAGE: \_\_\_\_\_ PLACE OF MARRIAGE: \_\_\_\_\_

CHILDREN'S NAMES:	M	F	DATE OF BIRTH:	AGE

Attorney of Record (Print or Type) \_\_\_\_\_

Signature \_\_\_\_\_

Ohio Supreme Court Registration Number \_\_\_\_\_

Email Address \_\_\_\_\_

Address: \_\_\_\_\_

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

Office Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Witness: \_\_\_\_\_ Address: \_\_\_\_\_

(COURT USE ONLY)

SET FOR HEARING \_\_\_\_ / \_\_\_\_ / \_\_\_\_

DATE OF FINAL JOURNAL ENTRY \_\_\_\_\_

MISCELLANEOUS NOTES:



CUYAHOGA COUNTY COURT OF COMMON PLEAS  
DIVISION OF DOMESTIC RELATIONS

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THE STATE OF OHIO  
Cuyahoga County

IN THE COURT OF COMMON PLEAS  
**INSTRUCTIONS FOR SERVICE**

\_\_\_\_\_  
v.  
\_\_\_\_\_

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

Judge \_\_\_\_\_

Method of Service

CERTIFIED MAIL

ORDINARY MAIL

REGISTERED MAIL

PERSONAL (Please specify type)

RESIDENCE (Please specify type)

CUYAHOGA COUNTY SHERIFF

CUYAHOGA COUNTY SHERIFF

OUT OF COUNTY SHERIFF \_\_\_\_\_

OUT OF COUNTY SHERIFF \_\_\_\_\_

PROCESS SERVER \_\_\_\_\_

PROCESS SERVER \_\_\_\_\_

Name and Address of Party to Serve:

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Filing Party/ Attorney of Record

**COURT OF COMMON PLEAS  
DIVISION OF DOMESTIC RELATIONS  
CUYAHOGA COUNTY, OHIO**

PLAINTIFF	:	CASE NO. _____
ADDRESS	:	
CITY, STATE, ZIP CODE	:	
NUMBER OF THIS MARRIAGE _____	:	
vs	:	JUDGE _____
DEFENDANT	:	
ADDRESS	:	<b>COMPLAINT FOR DIVORCE</b>
CITY, STATE, ZIP CODE	:	
NUMBER OF THIS MARRIAGE _____	:	

1. Plaintiff has been a resident of the State of Ohio for at least six (6) months and a resident of Cuyahoga County for more than ninety (90) days immediately prior to filing this Complaint.

2. Plaintiff and Defendant were married on \_\_\_\_\_, in \_\_\_\_\_, \_\_\_\_\_.

3. There is/are \_\_\_\_\_ child(ren) born as issue of this marriage, whose name(s) and date(s) of birth is/are as follows:

_____	(DOB _____)	_____	(DOB _____)
_____	(DOB _____)	_____	(DOB _____)
_____	(DOB _____)	_____	(DOB _____)

and the wife  is  is not pregnant.

4. Plaintiff seeks a divorce on the following ground(s):

- Plaintiff and Defendant have lived separate and apart without interruption and without cohabitation for at least one year.
- Plaintiff and Defendant are incompatible.
- Defendant has been guilty of the following:
  - Gross Neglect of Duty
  - Extreme Cruelty
  - Adultery
  - Bigamy
  - Habitual Drunkenness
  - Willful Absence of one year or more
  - Imprisonment at the time of filing the Complaint
  - Fraudulent Marriage Contract

5. Plaintiff and Defendant:  do not own any real property  
 own real property located at:  
\_\_\_\_\_  
\_\_\_\_\_

6. Plaintiff and Defendant have acquired certain personal property during the marriage.  
 This property has been divided.  
 The following property has not been divided  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Plaintiff and Defendant  have no debts  
 have the following debts:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Military Service:  
 Neither Plaintiff nor Defendant is an active duty service member of the United States Military.  
 Plaintiff and/or  Defendant is an active duty service member of the United States Military.

**WHEREFORE**, Plaintiff asks that **he/she** be granted a divorce from the Defendant, and that **he/she** be granted the following relief:

- Allocation of parental rights and responsibilities or  shared parenting
- Child support including medical support;
- Spousal support;
- Ownership of the real property located at \_\_\_\_\_;
- An equitable division of personal property and/or debts;
- Restoration of maiden name \_\_\_\_\_;

and that **he/she** be awarded such other relief as the Court finds fair, just and equitable, including that the cost of this action be paid by Defendant.

The Plaintiff asks to appear remotely and that the court conduct any uncontested trial via live two-way video and audio conference technology. Plaintiff also asks that any corroborating witness be allowed to participate remotely.

Respectfully Submitted,

\_\_\_\_\_  
PLAINTIFF

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
CITY, STATE, ZIP CODE

\_\_\_\_\_  
MOBILE TELEPHONE NUMBER

\_\_\_\_\_  
EMAIL ADDRESS

**WAIVER OF LEGAL COUNSEL**

I understand that I have the right to be represented by an attorney in this proceeding. I have decided not to have an attorney assist me. By signing this Waiver, I confirm that I am waiving my right to legal representation for the purpose of this legal action.

I am aware that my spouse's attorney, if my spouse is represented by an attorney, does not represent me, or my interests.

I am aware that I could hire an attorney to advise and/or represent me but I am choosing to proceed without counsel.

I am freely and voluntarily choosing to sign the documents associated with this legal action with a full understanding of these documents and that I am choosing to proceed without counsel.

This waiver is being made voluntarily, with my full understanding and the same is of my own free will. It is my decision to proceed without counsel.

\_\_\_\_\_ Date

\_\_\_\_\_ PLAINTIFF (print name)

\_\_\_\_\_ SIGNATURE