

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

PLAINTIFF

ADDRESS

CITY, STATE, ZIP CODE

CASE NO. DF: _____

JUDGE _____

vs.

**APPLICATION TO REVIEW OR ADOPT
ADMINISTRATIVE ORDER FOR CHILD
SUPPORT AND MEDICAL SUPPORT
(Administrative Support Order)**

DEFENDANT

ADDRESS

CITY, STATE, ZIP CODE

Now comes _____, Plaintiff, pursuant R.C. 2151.233, and moves this Honorable Court to establish a family case to adopt or review an administrative support order.

This request addresses the following minor children:

Name of Child	Date of Birth	SETS Number	P-Order
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

These children were born of or legally adopted by Plaintiff and Defendant and:

The parties are currently married; or

The parties were previously married and have at least one child of that marriage and the marriage was terminated by the Cuyahoga County Domestic Relations Court in the following case:

Case Name: _____
Case Number: _____
Termination of Marriage Date: _____

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.

(Select one of the following two options)

This Application is for the purpose of:

Option 1- Initial Administrative Order

Bringing a court action for the payment of support and provision for health care under R.C. 2151.231, pursuant to O.A.C. 5101:12-45.3(D). The Administrative Order for Child Support and Medical Support was issued on _____ (date of issuance). Plaintiff hereby objects to the Administrative Order. This action has been brought within 14 days after the Administrative Order for Child Support and Medical Support was issued.

(Check if applicable)

A stay of the Administrative Order for Child Support and Medical Support during the pendency of the objection is requested. The reasons Plaintiff requests the stay are set forth in the attached affidavit.

Option 2 – Administrative Order Adoption

Adopting an Administrative Order for Child Support and Medical Support for modification or enforcement. The Administrative Order for Child Support and Medical Support(s) was/were issued on _____ (date(s) of issuance). A separate motion requesting modification or enforcement will be filed.

The administrative order(s) referenced in this Application is/are attached as Exhibit A.

The filing party's reasons for bringing forth this Application are more fully explained in the attached affidavit.

The filing party acknowledges that the requests made in this Application subject the parties to the case to the establishment of a custody order if one has not been established already.

Respectfully submitted,

PRINT NAME

SIGNATURE

ADDRESS

CITY, STATE, ZIP CODE

MOBILE TELEPHONE NUMBER

EMAIL ADDRESS

STATE OF OHIO

)
)
)

SS: AFFIDAVIT IN SUPPORT

I, _____, Plaintiff having been first duly sworn according to law, hereby state and affirm that:

1. I am related to the children subject this application as follows:

2. I am requesting this Honorable Court to: _____

3. I am requesting this because: _____

I, also, state and affirm that:

4. _____

5. _____

6. _____

FURTHER, AFFIANT SAYETH NAUGHT.

Affiant Signature

Sworn to and subscribed before me this _____ day of _____, 20 ____.

NOTARY PUBLIC

