

**In the Court of Common Pleas, Lucas County, Ohio
Juvenile Division**

In the matter of:

Case #: _____

Name

DOB Last 4 Digits of SS #

Address

City, State, Zip

Phone #

Name

DOB Last 4 Digits of SS #

Address

City, State, Zip

Phone #

Motion for Change of Court Appointed Counsel

Now comes _____, and requests this Court to remove
_____, as Court Appointed Counsel for
_____, and appoint different counsel for the following reason(s):

Respectfully Submitted,

Signature

Please Print Name

Address

Phone #

Sworn and subscribed in my presence on this _____ day of _____, in the year _____.

Deputy Clerk's Signature

NOTICE

This Motion is scheduled for hearing on _____, before Judge / Magistrate

**PLEASE REPORT TO THE INFORMATION DESK AT THE LUCAS COUNTY JUVENILE COURT, JUVENILE
JUSTICE CENTER, 1801 SPIELBUSCH AVENUE, TOLEDO, OHIO 43604 AT LEAST 15 MINUTES PRIOR TO YOUR
SCHEDULED HEARING TIME.
PROPER ATTIRE REQUIRED - NO SHORTS PERMITTED.**