

In The Court of Common Pleas, Lucas County, Ohio
Juvenile Division

Case Number: _____

IN THE MATTER OF:

MOTION TO SHOW CAUSE

Petitioner's Name _____
DOB _____ Last 4 Digits of SS # _____
Street Address _____
City, State, Zip _____

Respondent's Name _____
DOB _____ Last 4 Digits of SS # _____
Street Address _____
City, State, Zip _____

Instructions: This form is used to bring the other party to Court to defend his or her failure to follow a previously issued court order. A Personal Identifier must be filed with this motion. If this is filed because of failure to pay child support, an Arrearage Statement from the Lucas County Child Support Enforcement Agency (LCCEA) MUST be attached to this Motion.

Now comes the Petitioner and states that on _____ an Order was entered in the above cause which provides as follows: _____

Petitioner states that the Respondent has violated said Order in that: _____

Wherefore Petitioner moves that the Respondent be cited to appear before this Court to show cause as to why she/he should not be punished for Contempt of Court.

Petitioner's Signature _____

Date _____

CERTIFICATE OF SERVICE

TO THE CLERK: I certify that I have served a copy of the foregoing Motion upon the following persons at the following addresses by regular mail:

Name: _____

Address: _____

Phone: _____

Petitioner's Signature

Date

In The Court of Common Pleas, Lucas County, Ohio
Juvenile Division

Case Number: _____

PERSONAL IDENTIFIER INFORMATION FORM

1. _____	Child's Full Name
DOB	Last 4 Digits of SS #
3. _____	Child's Full Name
DOB	Last 4 Digits of SS #
5. _____	Child's Full Name
DOB	Last 4 Digits of SS #

2.	Child's Full Name	
	DOB	Last 4 Digits of SS #
4.	Child's Full Name	
	DOB	Last 4 Digits of SS #
6.	Child's Full Name	
	DOB	Last 4 Digits of SS #

Notice: Effective July 1, 2009, documents filed in, or submitted to this Court **SHOULD NOT** contain "PERSONAL IDENTIFIERS".

THE FOLLOWING INFORMATION WILL BE MAINTAINED SEPARATELY FROM THE CASE FILE DOCUMENTS.

1. CHILD PROTECTION CASES

A child's name in an Abuse, Neglect or Dependency case is confidential. The child's actual identity will be referenced ON THIS FORM ONLY. Please indicate below how each child listed above will be identified on pleadings. Use only initials, a generic abbreviation or "child" (i.e., John Smith Jr. could be JS Jr., or Child 1, Child 2, etc.)

Child 1 Named Above Identifier _____
Child 3 Named Above Identifier _____
Child 5 Named Above Identifier _____

Child 2 Named Above Identifier _____
Child 4 Named Above Identifier _____
Child 6 Named Above Identifier _____

2. ALL OTHER CASE TYPES

Full Social Security Numbers (except for the last 4 digits), Phone Numbers and Email Addresses are considered confidential. This information should NOT be shown on pleadings and should be recorded below ON THIS FORM ONLY.

1. Party Name: _____
Last 4 Digits of SS #: _____
Home Phone #:

Cell Phone #: _____
Cell Phone Carrier*: _____
Email Address: _____

2. Party Name: _____
Last 4 Digits of SS #: _____
Home Phone #:

Cell Phone #: _____
Cell Phone Carrier*: _____
Email Address: _____

3. Party Name: _____
Last 4 Digits of SS #: _____
Home Phone #: _____

Cell Phone #: _____
Cell Phone Carrier*: _____
Email Address: _____

4. Party Name: _____
Last 4 Digits of SS #: _____
Home Phone #: _____

Cell Phone #: _____
Cell Phone Carrier*: _____
Email Address: _____

3. If DOMESTIC VIOLENCE is indicated, the Victim's Address, Phone Numbers and Email Address should NOT be included on pleadings, record this information below ON THIS FORM ONLY.

Victim's Name: _____
Address: _____
Home Phone #: _____

Cell Phone #: _____
Cell Phone Carrier*: _____
Email Address: _____

* Please provide the name of the company you receive cell phone service through (i.e., Verizon, T-Mobile, AT&T, etc.)