INSTRUCTIONS FOR SERVICE CUYAHOGA COUNTY JUVENILE COURT

THE STATE OF OHIO **CUYAHOGA COUNTY** In RE: ____ Judge: Pending Court Date (if applicable): TYPE OF SERVICE TO BE ISSUED: (A method of service must be chosen in this section) Certified mail is a required method of service for all first time filings.) Certified Mail Personal Service Ordinary Mail Residential Service Publication (attach affidavit) NAME: ________
ADDRESS: ______ NAME:______ADDRESS:______ NAME: ______ ADDRESS: _____ PLEASE BE ADVISED THAT IF YOU INCLUDE MULTIPLE ADDRESSES FOR THE SAME PERSON, THE ADDRESS WILL NOT BE UPDATED IN OUR SYSTEM. YOU MUST COMPLETE A CHANGE OF ADDRESS FORM, WHICH CAN BE FOUND IN THE CLERK'S OFFICE OR ON THE COURT'S WEBSITE: www.juvenile.cuyahogacounty.us. PLEASE IDENTIFY THE COMPLAINT OR MOTION THAT YOU WISH TO HAVE SERVED IN THE SPACE BELOW OR ATTACH A COPY TO THIS FORM. ADDITIONAL INSTRUCTIONS: ATTORNEY OR PETITIONER (SIGNATURE) YOUR PHONE NUMBER ATTORNEY OR PETITIONER (PRINT NAME) DATE

Rev: 9/11/2015

Print Person's name that you are representing