

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

Case Number: _____

IN THE MATTER OF:**PRAECIPE FOR SERVICE**_____
Petitioner's Name_____
DOB Last 4 Digits of SS #_____
Address City, State, Zip_____
Telephone #_____
Respondent's Name_____
DOB Last 4 Digits of SS #_____
Address City, State, Zip_____
Telephone #

NOTE: You will not be given a hearing date unless this form is filled out completely and full addresses are furnished.

TO THE CLERK:

Please serve a copy of _____ filed _____ upon
the following persons by:

☐ Certified Mail ☐ Personal Service

Mother's Name_____
Address City, State, Zip_____
Telephone #_____
Father's Name_____
Address City, State, Zip_____
Telephone #_____
Legal Custodian's Name_____
Address City, State, Zip_____
Telephone #_____
Other's Name Relationship_____
Address City, State, Zip_____
Telephone #_____
Petitioner's Signature Date