

**NOTICE OF RELOCATION**  
**Checklist of Forms to be Completed**

Forms to be completed by you:

- Domestic Case Designation Form
- Notice of Relocation
- Precipe for Service

**COURT OF COMMON PLEAS  
HOCKING COUNTY, OHIO**

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CASE NO. \_\_\_\_\_

\_\_\_\_\_  
Petitioner,

JUDGE \_\_\_\_\_

vs.

**DOMESTIC CASE  
DESIGNATION FORM**

\_\_\_\_\_  
Respondent.

Has this case been previously filed and dismissed? Check one:  Yes  No

If yes, list Case Number: \_\_\_\_\_

Judge: \_\_\_\_\_

List all related pending case(s), including case number and judge:  
\_\_\_\_\_  
\_\_\_\_\_

DOMESTIC CATEGORIES

Place (X) in ONE category only:

- A.  Termination of Marriage w/children (Divorce)
- B.  Termination of Marriage w/o children (Divorce)
- C.  Dissolution of Marriage w/ children
- D.  Dissolution of Marriage w/o children
- E.  Change of Custody
- F.  Visitation Enforcement/Modification
- G.  Support Enforcement/Modification
- H.  Domestic Violence
- I.  U.I.F.S.A.
- J.  Parentage

K.  Other (i.e., Foreign Support Enforcement, Warrants, Spousal Support Enforcement)

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Signature of Petitioner

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Address

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Telephone

**COURT OF COMMON PLEAS  
HOCKING COUNTY, OHIO**

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CASE NO. \_\_\_\_\_

\_\_\_\_\_  
Petitioner,

JUDGE \_\_\_\_\_

vs.

**NOTICE OF INTENT  
TO RELOCATE**

\_\_\_\_\_  
Respondent.

The  Petitioner  Respondent in this case hereby gives notice of his/her intent to relocate.

Former Address

\_\_\_\_\_  
\_\_\_\_\_

New Address

\_\_\_\_\_  
\_\_\_\_\_

Date of Move

\_\_\_\_\_

Respectfully submitted,

\_\_\_\_\_  
Signature

**COURT OF COMMON PLEAS  
HOCKING COUNTY, OHIO**

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Petitioner,	CASE NO.
vs.	JUDGE

**PRECIPE FOR SERVICE**

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Respondent.

Please have the sheriff of Hocking County serve upon the Respondent a certified copy of the following documents:

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Please use  certified mailed  personal service.

1. A physical description of the Respondent is:

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2. The Respondent  does  does not carry a weapon.

3. At present, the Respondent can be found:

At his/her residence:

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Times normally available at this address:

At his/her place of employment:

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Times normally available at this address:

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Other:

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Times normally available at this address:

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Signature

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Address

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Phone Number