

If both parents agree to changes in the parenting plan before filing the motion or before coming to court for the hearing on the motion, the following Agreed Judgment Entry for Modification of Parental Rights and Responsibilities can be completed and presented to the Court when you come.

The form requires a great deal of detail, especially in the child support sections. Unrepresented parents may wish to consult with an attorney to be certain that all applicable sections of the Agreed Judgment Entry, and all ancillary forms are completed.

[Rule 17](#) and [Rule 18](#) of this Court's Local Rules (found on this Website), and the topic [Allocation of Parental Rights and Responsibilities](#) in the General Information section of this Website should be reviewed before completing the Agreed Judgment Entry.

**COURT OF COMMON PLEAS
DIVISION OF DOMESTIC RELATIONS
CUYAHOGA COUNTY, OHIO**

PLAINTIFF/PETITIONER-01 : CASE NO. DR _____

vs. : JUDGE _____

DEFENDANT/PETITIONER-02/RESPONDENT : MAGISTRATE _____

: **AGREED JUDGMENT ENTRY**
(MODIFICATION OF ALLOCATION OF PARENTAL
RIGHTS AND RESPONSIBILITIES)

:

This matter came on for hearing on _____ before Magistrate _____, to whom this matter was referred by the Honorable _____, Judge of the Domestic Relations Division of the Court of Common Pleas upon the _____'s Motion to Modify the Allocation of Parental Rights and Responsibilities (#_____) filed _____ and _____

Present were:

- ☐ _____, Plaintiff/Defendant-01/Petitioner
- ☐ _____, Defendant/Defendant-02/Respondent
- ☐ _____, Attorney for Plaintiff/Defendant-01/Petitioner
- ☐ _____, Attorney for Defendant/Defendant-02/Respondent
- ☐ Assistant County Prosecuting Attorney _____ on behalf of the Cuyahoga Job and Family Services – Office of Child Support Services (CJFS-OCSS).

The Court finds that all unrepresented parties have been advised of the right to counsel in this proceeding and have voluntarily and knowingly waived said right. The Court further finds that the parties have resolved their differences by agreement, the terms of which are ☐set forth herein ☐attached hereto and incorporated herein by reference as Exhibit _____. The Court finds that said agreement is fair, just and equitable. The Court further finds that the parties waive any rights under Ohio Civil Rule 53.

☐The Court finds that a pleading or motion requesting shared parenting was filed by:

- ☐ at least one parent
- ☐ both parents jointly and a plan for shared parenting was filed at least 30 days prior to hearing which plan the Court determines to be in the best interest of the child(ren).

☐The Court finds that the parents waive the requirement of a written request for shared parenting and plan for shared parenting filed at least 30 days before hearing. The Court finds that the parents agree to shared parenting and have jointly submitted a plan on the date of hearing which plan the Court finds is in the best interest of the child(ren).

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED that this Judgment Entry shall constitute an **ORDER FOR SHARED PARENTING** and the parties shall share the rights and

responsibilities for the care of the children in accordance with the attached approved shared parenting plan, which is adopted and incorporated herein by reference.

-OR-

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED that parental rights and responsibilities are allocated primarily to _____ who is hereby designated the residential parent and legal custodian of the following minor child(ren):

Name of Child(ren)

Date(s) of Birth

_____	_____
_____	_____
_____	_____

IT IS FURTHER ORDERED, ADJUDGED AND DECREED that the parent who is not the residential parent, _____, shall have parenting time:

- ☐ in accordance with the attached schedule
☐ in accordance Standard Parenting Time Guidelines attached as Exhibit ____ and incorporated by reference.

IT IS FURTHER ORDERED, ADJUDGED AND DECREED that the residential parent(s) shall file a notice of intent to relocate if he/she intends to move to a residence other than the one specified in this order. Pursuant to the determination made under R.C. 3109.051(G)(2) and subject to further order of the Court, the parent who is not the residential parent ☐shall ☐shall not be sent a copy of any notice of relocation filed with the Court.

CHILD(REN)'S HEALTH CARE

Uncovered Healthcare Expenses

Pursuant to R.C. 3119.30(A), both parents are liable for the health care of the child(ren) who is/are not covered by private health insurance or cash medical support as calculated in accordance with R.C. 3119.022 or 3119.023.

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED that the child support obligor pay _____% and the child support obligee pay _____% of the annual costs of the health care needs of the child(ren) that exceed the amount of cash medical support ordered to be paid, if any, when private health insurance coverage is not available or is not being provided in accordance with this order, OR of the uninsured health care costs or co-payment or deductible cost required under the health insurance policy, contract or plan that covers the child(ren) when private health insurance coverage is being provided in accordance with this order.

The following individual shall be reimbursed by the health plan administrator(s) for covered out-of-pocket medical, optical, hospital, dental or prescription expenses paid for the child(ren) subject to this order:

Name of party	_____
Address	_____

Telephone number	_____

Private Health Insurance
(Check one of the following two boxes)

☐ The Court finds that neither party has accessible Private Health Insurance available at a reasonable cost to cover the minor children.

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED that the child support obligor and the child support obligee shall immediately inform the CJFS-OCSS if private health insurance coverage for the child(ren) becomes available to either of them. The CJFS-OCSS shall determine if the private health insurance is available at a reasonable cost and if coverage is reasonable, order the child support obligor or the child support obligee to obtain private health insurance.

-OR-

☐ The Court finds that ☐Plaintiff has ☐Defendant has ☐both parties have accessible private health insurance available to cover the child(ren) through a group policy, contract or plan.

(If the above box is checked, check one of the following two boxes)

☐ The Court further finds that the contributing cost (cost of adding the child(ren) to existing coverage **or** difference between self-only and family coverage) of the private health insurance available to ☐Plaintiff and/or the ☐Defendant **does not exceed** that party's Health Insurance Maximum.

(Check box if applicable)

☐ The Court further finds that it is not in the best interest of the child(ren) for the parties to obtain or maintain the private health insurance coverage that does not exceed the parties' respective health insurance maximum because _____.

-OR-

☐ The Court further finds that the contributing cost (cost of adding the child(ren) to existing coverage **or** difference between self-only and family coverage) of the private health insurance available to ☐Plaintiff and/or the ☐Defendant **exceeds** that party's Health Insurance Maximum.

The Court further finds that: (If the above box is checked one of the following boxes must be checked)

☐ both parents agree that ☐Plaintiff ☐Defendant ☐both parents shall obtain or maintain private health insurance that exceeds the Health Insurance Maximum for that parent.

☐ ☐Plaintiff ☐Defendant has requested to obtain or maintain private health insurance that exceeds the Health Insurance Maximum for that parent.

☐ it is in the best interest of the child(ren) for ☐Plaintiff ☐Defendant to obtain or maintain private health insurance the contributing cost of which exceeds that party's Health Insurance Maximum because _____.

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED that ☐both Mother and Father are ☐Mother is ☐Father is hereby designated as the health insurance obligor(s), until further order of Court.

CHILD SUPPORT AND CASH MEDICAL SUPPORT

For purposes of this order ☐Plaintiff ☐Defendant is the child support obligor (pays support) and ☐Plaintiff ☐Defendant is the child support obligee (receives support).

This order for child support and cash medical support is effective _____.

The worksheet used to compute child support and cash medical support under R.C. 3119.022 or 3119.023 is attached hereto as Exhibit _____.

Child Support Deviation

☐ The Court finds that the actual **annual** child support obligation, as determined by the applicable worksheet, is \$_____ when private health insurance **IS** being provided (*Line 23c, Child Support Computation Worksheet – Sole Residential Parent or Shared Parenting Order or Line 22g, Child Support Computation Worksheet-Split Parental Rights and Responsibilities*) and \$_____ when private health insurance **IS NOT** being provided (*Line 26c, Child Support Computation Worksheet – Sole Residential Parent or Shared Parenting Order or Line 24g, Child Support Computation Worksheet-Split Parental Rights and Responsibilities*). Pursuant to R.C. 3119.22, the actual annual obligation would be unjust and inappropriate and would not be in the best interest of the minor child(ren) for the following reason(s):_____.

The child support order, stated below, deviates from the actual annual obligation.

Monthly Child/Cash Medical Support Obligation

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED that the child support obligor shall pay child support and/or cash medical support to the child support obligee, and/or his/her assignee(s), for the minor child(ren) named above in the following sums, plus 2% processing charge:

- when private health insurance **IS** being provided by a party in accordance with this order:
\$_____ per month (\$_____ per month per child) as child support
- when private health insurance **IS NOT** being provided by a party in accordance with this order:
\$_____ per month (\$_____ per month per child) as child support plus
\$_____ per month (\$_____ per month per child) as cash medical support

If private health insurance coverage is being provided and becomes unavailable or is terminated, the child support obligor shall begin paying cash medical support commencing the first day of the month immediately following the month in which private health insurance coverage became unavailable or is terminated, and shall cease paying cash medical support on the last day of the month immediately preceding the month in which private health insurance coverage begins or resumes. Cash medical support shall be paid in addition to child support.

Duration and Termination of Child/Cash Medical Support

The duty of support shall continue until further order of Court or until the above-named child(ren) reach(es) age 18 or so long as the child(ren) continuously attend(s), on a full-time basis, any recognized and accredited high school, however, no later than age 19, or as otherwise provided in R.C. 3119.86.

The residential parent and legal custodian of the child(ren) shall immediately notify, and the obligor under a child support order may notify, the CJFS-OCSS of any reason for which the child support order should terminate, including but not limited to the child(ren)'s death, marriage, emancipation (age 18 or high school completion/termination), enlistment in the Armed Services, deportation or change of legal custody. A willful failure to notify the CJFS-OCSS is contempt of court.

Support Arrearage

(Check one of the following two boxes)

☐ The Court finds that there are no spousal support, child support or cash medical support arrearages, and no arrearage owed for uncovered health care expenses.

-OR-

☐ The Court finds that as of _____ the arrearage is \$ _____. This sum includes all spousal support, child support and cash medical support arrearages, and arrearage owed for uncovered health care expenses under the above-referenced administrative order and/or temporary orders, if any.

(If an arrearage finding is made, check one of the following two boxes)

☐ **IT IS THEREFORE ORDERED, ADJUDGED AND DECREED** that the support obligor shall pay an additional \$ _____ per month toward the existing arrearage.

-OR-

☐ **IT IS THEREFORE ORDERED, ADJUDGED AND DECREED** that judgment is rendered in the amount of \$ _____ as and for support arrears in favor of ☐Plaintiff ☐Defendant and against ☐Plaintiff ☐Defendant upon which execution may issue.

Monthly Payment of Support

The support obligor shall pay \$ _____ per month, plus 2% processing charge, because Private Health Insurance ☐is ☐is not ordered to be provided at this time. This amount includes all applicable child support, spousal support, cash medical support and payment toward arrearage.

All support under this order shall be withheld or deducted from the income or assets of the support obligor pursuant to a withholding or deduction notice or appropriate order issued in accordance with Chapters 3119., 3121., 3123., and 3125. of the Ohio Revised Code or a withdrawal directive issued pursuant to sections 3123.24 to 3123.38 of the Ohio Revised Code. and shall be forwarded to the obligee in accordance with Chapters 3119., 3121., 3123., and 3125. of the Ohio Revised Code

Payments shall be made in the manner ordered by the Court. If payments are to be made other than on a monthly basis, the required monthly administration by the CJFS-OCSS does not affect the frequency or the amount of the support payments to be made under the order.

All support shall be paid through Ohio Child Support Payment Central (OCSPC), P.O. Box 182372, Columbus, Ohio 43218-2372. Any payments not made through OCSPC shall not be considered as payment of support. Checks or money orders shall be made payable to "OCSPC". Cash payments to OCSPC may be made at the Cuyahoga County Treasury, Cashier's Department, Cuyahoga County Administrative Headquarters, 2079 East 9th Street – 1st Floor, Cleveland, Ohio 44115. All payments shall include the following: Obligor's name, Social Security Number, SETS case number and Domestic Relations Court case number. **If there is to be a withholding/deduction order, the support obligor shall make payments directly to OCSPC until the income source/financial institution begins withholding/deducting in the appropriate amount.**

Method to Secure Support Payments

(Check one of the following three boxes)

☐ The support obligor receives income from an income source or has nonexempt funds on deposit in an account at a financial institution.

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED that a withholding or deduction notice shall issue to:

INCOME SOURCE/
FINANCIAL INSTITUTION
ADDRESS

If withholding from a financial account, the support obligor shall immediately notify the CJFS-OCSS of the number and description of the account from which support shall be deducted, and the name, branch, business address and routing number of the financial institution if not set forth above.

IT IS FURTHER ORDERED, ADJUDGED AND DECREED that the support obligor immediately notify the CJFS-OCSS, in writing, of any change in employment (including self-employment), receipt of additional income/monies or termination of benefits. The support obligor shall include a description of the nature of the employment and the name, business address and telephone number of any employer. The support obligor shall immediately notify the CJFS-OCSS of any change in the status of an account from which support is being deducted or the opening of a new account with any financial institution.

☐ The support obligor has no attachable income source and has the ability to post a cash bond.

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED that the support obligor post a cash bond in the amount of \$_____ with the Clerk of the Common Pleas Court.

IT IS FURTHER ORDERED, ADJUDGED AND DECREED that the support obligor shall immediately notify the CJFS-OCSS, in writing, if the support obligor begins to receive income from a payor. The notice shall include a description of the nature of any new employment, and the name, business address and telephone number of any new employer.

When the support obligor begins to receive income from a payor, he/she may request that the Court cancel its bond order and instead issue a notice requiring the withholding of an amount from income for support in accordance with R.C. 3121.03(A).

When the support obligor begins to receive income from a payor, the Court will collect on the bond if the Court determines that payments due under this support order have not been made and that the amount that has not been paid is at least equal to the support owed for one month under this support order. The Court shall issue a notice requiring the withholding of an amount from the support obligor's income for support in accordance with R.C. 3121.03(A).

☐ The support obligor has no attachable income and has no assets to post a bond.

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED that the support obligor shall seek employment, if able to engage in employment, and shall immediately notify the Cuyahoga Job and Family Services – Office of Child Support Services (CJFS-OCSS), in writing, upon commencement or change of employment (including self-employment), receipt of additional income/monies, obtaining ownership of asset of value of \$500.00 or more, receipt or termination of benefits or the opening of an account at a financial institution. The support obligor shall include a description of the nature of the employment and the name, business address and telephone number of any employer. The support obligor shall immediately notify the CJFS-OCSS of any change in the status of an account from which support is being deducted or the opening of a new account with any financial institution.

FEDERAL INCOME TAX EXEMPTION

IT IS FURTHER ORDERED, ADJUDGED AND DECREED that in consideration of and pursuant to R.C. 3119.82, the following person(s) shall claim the child(ren) who is/are the subject of this order as (a) dependent(s) for federal income tax purposes:

- ☐ Mother
☐ Father
☐ Both Mother and Father according to the following terms: _____
-
-

IT IS FURTHER ORDERED, ADJUDGED AND DECREED that the parties shall take whatever action is necessary, pursuant to section 152 of the "Internal Revenue Code of 1986," 100 Stat. 2085, 26 U.S.C. 1, as amended, to enable the parent who has been awarded the right to claim the exemption(s) to claim the child(ren) as (a) dependent(s) for federal income tax purposes in accordance with this order. Failure of a party to comply with the order may be considered contempt of Court.

NOTICES AND GENERAL INFORMATION

The health insurance obligor(s) shall provide private health insurance and shall designate the child(ren) subject to this order as (a) covered dependent(s) under the private health insurance policy, contract or plan.

The parent(s) ordered to provide private health insurance for the child(ren), pursuant to R.C. 3119.30, shall no later than thirty (30) days after the issuance of the order supply the other parent with information regarding the benefits, limitations and exclusions of the health insurance coverage, copies of any insurance forms necessary to receive reimbursement, payment or other benefits under the health insurance coverage and a copy of any necessary insurance cards.

The health plan administrator(s) of the health insurance obligor(s) may continue making payments for medical, optical, hospital, dental or prescription services directly to any health care provider in accordance with the applicable private health insurance policy, contract or plan.

The employer(s) of the health insurance obligor(s) is/are required to release to the other parent, any person subject to an order issued under R.C. 3109.19, or the CJFS-OCSS, on written request, any necessary information on the private health insurance coverage, including the name and address of the health plan administrator and any policy, contract or plan number, and to otherwise comply with R.C. 3119.32 and any order or notice issued under this section.

If the person(s) required to obtain private health insurance coverage for the child(ren) subject to this child support order obtain(s) new employment, the CJFS-OCSS shall comply with the requirements of R.C. 3119.34, which may result in the issuance of a notice requiring the new employer to take whatever action is necessary to enroll the child(ren) in private health insurance coverage provided by the new employer.

The child support obligor and the child support obligee shall comply with the request of the CJFS-OCSS in advance of an administrative review of a support order to provide the following: copy of federal income tax return from the previous year, copy of all pay stubs within the preceding six (6) months, copy of all other records evidencing the receipt of any other salary, wages or compensation within the preceding six (6) months and, if the child support obligor is a member of the uniformed services and on active military duty, a copy of the child support obligor's Internal Revenue Service Form W-2, "Wage and Tax Statement," and a copy of a statement detailing the child support obligor's earnings and leave with the uniformed services. The child support obligor and the child support obligee shall also

provide a list of available group health insurance and health care policies, contracts and plans and their costs, the current health insurance or health care policy, contract or plan under which the child support obligee and/or obligor is/are enrolled and their costs, including any Tricare program offered by the United States Department of Defense available to the child support obligee, and any other information necessary to properly review the child support order.

Upon receipt of notice by the CJFS-OCSS that private health insurance coverage is not available at a reasonable cost, cash medical support shall be paid in the amount as determined by the child support computation worksheet in R.C. 3119.022 or 3119.023, as applicable. The CJFS-OCSS may change the financial obligations of the parties to pay child support in accordance with the terms of the Court order and cash medical support without a hearing or additional notice to the parties.

EACH PARTY TO THIS SUPPORT ORDER MUST NOTIFY THE CHILD SUPPORT ENFORCEMENT AGENCY IN WRITING OF HIS OR HER CURRENT MAILING ADDRESS, CURRENT RESIDENCE ADDRESS, CURRENT RESIDENCE TELEPHONE NUMBER, CURRENT DRIVER'S LICENSE NUMBER AND OF ANY CHANGES IN THAT INFORMATION. EACH PARTY MUST NOTIFY THE AGENCY OF ALL CHANGES UNTIL FURTHER NOTICE FROM THE COURT OR AGENCY, WHICHEVER ISSUED THE SUPPORT ORDER. IF YOU ARE THE OBLIGOR UNDER A CHILD SUPPORT ORDER AND YOU FAIL TO MAKE THE REQUIRED NOTIFICATIONS, YOU MAY BE FINED UP TO \$50 FOR A FIRST OFFENSE, \$100 FOR A SECOND OFFENSE AND \$500 FOR EACH SUBSEQUENT OFFENSE. IF YOU ARE AN OBLIGOR OR OBLIGEE UNDER ANY SUPPORT ORDER ISSUED BY A COURT AND YOU WILLFULLY FAIL TO GIVE THE REQUIRED NOTICES, YOU MAY BE FOUND IN CONTEMPT OF COURT AND BE SUBJECTED TO FINES UP TO \$1,000 AND IMPRISONMENT FOR NOT MORE THAN 90 DAYS.

IF YOU ARE AN OBLIGOR AND YOU FAIL TO GIVE THE REQUIRED NOTICES, YOU MAY NOT RECEIVE NOTICE OF THE FOLLOWING ENFORCEMENT ACTIONS AGAINST YOU: IMPOSITION OF LIENS AGAINST YOUR PROPERTY; LOSS OF YOUR PROFESSIONAL OR OCCUPATIONAL LICENSE, DRIVER'S LICENSE OR RECREATIONAL LICENSE; WITHHOLDING FROM YOUR INCOME; ACCESS RESTRICTION AND DEDUCTION FROM YOUR ACCOUNTS IN FINANCIAL INSTITUTIONS, AND ANY OTHER ACTION PERMITTED BY LAW TO OBTAIN MONEY FROM YOU TO SATISFY YOUR SUPPORT OBLIGATION.

Failure to comply with this support order can result in a contempt action; and, as provided in R.C. 2705.05, the penalty for which may be imprisonment for not more than thirty (30) days in jail and/or fine of not more than \$250.00 for a first offense, not more than sixty (60) days in jail and/or fine of not more than \$500.00 for a second offense, and not more than ninety (90) days in jail and/or not more than \$1,000.00 fine for a third or subsequent offense.

The following information is provided in accordance with R.C. 3105.72 and 3121.30:

SUPPORT OBLIGEE (receives support):

Name _____
Social Security Number xxx-xx-_____

SUPPORT OBLIGOR (pays support):

Name _____
Social Security Number xxx-xx-_____
Date of Birth _____

Failure to comply with this support order can result in a contempt action; and, as provided in R.C. 2705.05, the penalty for which may be imprisonment for not more than thirty (30) days in jail and/or fine of not more than \$250.00 for a first offense, not more than sixty (60) days in jail and/or fine of not more than \$500.00 for a second offense, and not more than ninety (90) days in jail and/or not more than \$1,000.00 fine for a third or subsequent offense.

Any orders not modified herein shall remain in full force and effect.

Costs adjudged against:

- ☐ Plaintiff/Petitioner-01
☐ Defendant/Petitioner-02/ Respondent
☐ Both parties equally

IT IS SO ORDERED.

JUDGE

APPROVED:

Plaintiff/Petitioner-01

Defendant/Petitioner-02/Respondent

Attorney for Plaintiff/Petitioner-01

Attorney for Defendant/Petitioner-02/Respondent

Assistant County Prosecuting Attorney for CJFS-OCSS/UIFSA Petitioner

MAGISTRATE

ACKNOWLEDGMENT AND WAIVER OF EACH PARTY APPEARING WITHOUT COUNSEL

I have been informed that I have the right to be represented by an attorney at this hearing. I have decided not to have a lawyer assist me. By signing this Waiver, I confirm that I am waiving my right to legal representation at this hearing.

Check applicable box(es)

- ☐ I am aware that my spouse/former spouse is represented by an attorney.
- ☐ I am aware that the Assistant Prosecuting Attorney represents only the interests of the State of Ohio and the Cuyahoga County Support Enforcement Agency.
- ☐ I am aware that the Guardian ad Litem (GAL) represents our minor child(ren).

I have freely and voluntarily signed the attached Agreed Judgment entry and any attached documents with a full understanding of these documents.

This waiver is being made voluntarily, with my full understanding and the same is of my own free will. It is my decision to proceed without counsel.

Date

Print Name

Signature

I have been informed that I have the right to be represented by an attorney at this hearing. I have decided not to have a lawyer assist me. By signing this Waiver, I confirm that I am waiving my right to legal representation at this hearing.

Check applicable box(es)

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- ☐ I am aware that the Assistant Prosecuting Attorney represents only the interests of the State of Ohio and the Cuyahoga County Support Enforcement Agency.
- ☐ I am aware that the Guardian ad Litem (GAL) represents our minor child(ren).

I have freely and voluntarily signed the attached Agreed Judgment entry and any attached documents with a full understanding of these documents.

This waiver is being made voluntarily, with my full understanding and the same is of my own free will. It is my decision to proceed without counsel.

Date

Print Name

Signature