

DR 716
Eff. 1/1/2015
Rev. 3/28/2019

**IN THE COURT OF COMMON PLEAS
DIVISION OF DOMESTIC RELATIONS
BUTLER COUNTY, OHIO**

_____ : Case No _____
Plaintiff/1st Petitioner/Petitioner

_____ :
Address

_____ :
Telephone

_____ :
Magistrate _____

_____ :
DOB

vs./-and- :
_____ :

_____ :
Defendant/2nd Petitioner/Respondent

_____ :
Address

_____ :
Telephone

_____ :
DOB

**AGREED ENTRY (NO HEARING
REQUIRED)**
 FINAL APPEALABLE ORDER
 NON FINAL APPEALABLE ORDER

- This is an agreed entry regarding modification of child support and the agreed amount is in compliance with Ohio child support guidelines. **No hearing is required.**
- This is an agreed entry regarding modification of health insurance responsibilities for the below listed children and the parties have also calculated child support pursuant to ORC 3119.01-3119.02, 3319.29-3319.32. The parties agree that the amount is in compliance with the Ohio Child Support Guidelines. **No hearing is required.**
- This is an agreed entry modifying the prior shared parenting plan to change the parent designated as residential parent for school purposes only. **No hearing is required.**
- This is an agreed entry establishing temporary spousal support. **No hearing is required.**
- This is an agreed entry establishing temporary property issues. **No hearing is required.**

The following are the children of the parties:

Name _____ D.O.B: _____

Name _____ D.O.B: _____

Name _____ D.O.B: _____

Name _____ D.O.B: _____

This AGREED ENTRY applies to:

- All of the above children or
- Only these children: _____

THE PARTIES AGREE AS FOLLOWS (Please check all that apply):

Shared Parenting:

The parties have shared parenting of their child(ren) and _____ (name of parent) shall be designated the residential parent for school purposes.

Spousal Support:

Plaintiff/Defendant shall pay spousal support as follows:

- The temporary spousal support order shall be: \$ _____ monthly, to be paid in the following manner:
\$ _____ per _____ on spousal support. The support should be made payable in increments that coincide with obligor’s pay periods.

Child Support:

- The support order does not change **OR**
- The support order is hereby amended pursuant to O.R.C. (Ohio Revised Code) 3119.021 as follows (worksheet is attached):

_____ is the child support **OBLIGOR** (person ordered to pay)
 _____ is the child support **OBLIGEE** (person ordered to receive)
There are _____ minor children subject to the order.

Based upon Obligor’s adjusted annual gross income of \$_____, and Obligee’s adjusted annual gross income of \$_____, an order of child support, in accordance with the Basic Child Support Schedule and guidelines is payable as follows:

The obligor shall pay \$_____ per month (\$_____ per month, per child) to the obligee, and/or his/her assignee(s). Of that amount, \$_____ is child support, \$_____ is cash medical support, and \$_____ is the statutory processing charge.

Said order is effective _____ and the order of support shall be paid through CSEA or OCSPC.

(Choose one)

Insurance is available.

Plaintiff/Petitioner 1 has Defendant/Petitioner 2 has Both parents have health insurance available for the minor child(ren).

The available private health insurance for the minor child(ren) is accessible because:
(Check one of the following three boxes)

Primary care services are within 30 miles of the child(ren)'s residence.

The Court permits primary care services farther than 30 miles of the child(ren)'s residence because residents in the geographic area customarily travel farther distances.

Primary care services are accessible by public transportation because public transportation is the obligee's only source of transportation.

If private health insurance coverage is being provided and becomes unavailable or is terminated, the Child Support Obligor SHALL IMMEDIATELY NOTIFY CSEA AT 513-887-3362.

or

Insurance is not available. The cash medical order may be assigned and payable to the State if the child(ren) do not receive State or Federal medical assistance.

If private health insurance is not being provided and becomes available to either the obligor or obligee, they SHALL immediately notify the CSEA, at 513-887-3362, that private health insurance coverage for the children has become available to either of them, along with the full name and address of the health insurance company, and the plan type, policy number, group number and effective date of the health insurance. The CSEA shall determine pursuant to ORC 3119.30 (B) (4) if the private health insurance is available at a reasonable cost, and if coverage is reasonable, division (B) (2) or (3) of ORC 3119.30 shall apply.

Support Arrears Order shall be:

The prior order regarding the payment of arrears shall remain the same (\$_____ per _____); **OR**

Obligor shall pay the arrears at a rate of 20% of the current order (\$_____ per _____); **OR**

Obligor shall pay the sum of \$ _____ per _____ on support arrears.

Arrears are \$_____ due obligee, \$_____ due State of Ohio, and CSEA processing charge arrears of \$ _____ as of _____, plus 2% CSEA processing fee for a **total deduction** of \$ _____ per effective _____.

Arrears are preserved; waived; **OR** offset against new support order.

Arrears are \$ _____ as of _____; **OR**

Arrears are current as of _____.

Health Insurance Coverage (check one):

- Mother/Father shall provide the primary health insurance for the parties' minor child(ren).
- Mother/Father shall provide the primary health insurance for the parties' minor child(ren). Mother/Father shall provide the secondary health insurance for the parties' minor child(ren) whenever it is available through their employment at a reasonable cost.
- Each parent shall provide health insurance for the child(ren) whenever it is available through their employment at a reasonable cost.

The parties shall divide all uncovered health care expenses as follows: Father shall pay _____% and Mother shall pay _____%.

NOTE: THE FOLLOWING LANGUAGE APPLIES TO ALL PARENTING ORDERS:

IT IS FURTHER ORDERED the duty of support shall continue beyond the age of majority as long as the child continuously attends on a full-time basis any recognized and accredited high school. A child support order shall not remain in effect after the child reaches nineteen years of age unless the order provides that the duty of support continues under circumstances described in O.R.C. 3119.86(A)(1)(a) or (b).

IT IS FURTHER ORDERED all support under this order shall be withheld or deducted from the income or assets of the Obligor pursuant to a withholding or deduction notice or appropriate Court order issued in accordance with sections 3121.02 to 3121.07 of the O.R.C. or a withdrawal directive issued pursuant to section 3123.37 of the O.R.C. and shall be forwarded to the Obligee in accordance with section 3121.50 of the O.R.C.

IT IS FURTHER ORDERED until such time as a withholding or deduction order is in effect, the Obligor shall discharge his or her obligation by making payments directly to the CSEA or the division of child support in the Ohio Department of Job and Family Services, as appropriate.”

IT IS FURTHER ORDERED the Obligor is restrained from making said payments directly to the Obligee, and the Obligee is enjoined from accepting direct payments from the Obligor. Any payments of support not made through the CSEA or the division of child support in the Ohio Department of Job and Family Services, as appropriate, shall be deemed a gift.

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 \$50.00 FOR A FIRST OFFENSE, \$100.00 FOR A SECOND OFFENSE, AND \$500.00 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 \$1,000.00 AND IMPRISONMENT FOR NOT MORE THAN NINETY (90) DAYS.

IF YOU ARE AN OBLIGOR OR OBLIGEE AND YOU FAIL TO GIVE THE REQUIRED NOTICES TO THE CHILD SUPPORT ENFORCEMENT AGENCY, YOU MAY NOT RECEIVE NOTICE OF THE CHANGES AND REQUESTS TO CHANGE THE CHILD SUPPORT AMOUNT, HEALTH CARE PROVISIONS, OR TERMINATION OF THE CHILD SUPPORT ORDER. 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, DRIVERS 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.

IT IS FURTHER ORDERED that the Obligor and Obligee immediately notify the CSEA in writing of any change in the Obligor's income source and of the availability of any other sources of income that can be the subject of a withholding or deduction order. This duty to notify the CSEA shall continue until further notice from the Court. A failure to provide such notification may make the Obligor liable for retroactive support that would otherwise have been ordered."

IT IS FURTHER ORDERED that the Obligor and Obligee shall immediately notify the CSEA, in writing, of any change in the status of the minor children of the parties which would terminate or modify the duty of the Obligor to pay child support.

To make payments through the Butler County CSEA:

Make cash or credit card payments *only* at the following location: Butler County Child Support Enforcement Agency, Government Services Center, 315 High Street, 7th Floor, Hamilton, Ohio 45011.

Acceptable methods of payment are as follows: Visa, MasterCard, ATM, and Cash payments may be made locally in person only. **Do not send cash by mail. Personal checks will not be accepted by the Butler County CSEA.**"

To make payments to the Ohio Child Support Payment Central (OCSPC):

The Obligor shall send payments to the following location: Ohio Child Support Payment Central, P.O. Box 182372, Columbus, Ohio 43218.

The employer shall send payments to the following location: Ohio Child Support Payment Central, P.O. Box 182394, Columbus, Ohio 43218.

Acceptable methods of payment to OCSPC are as follows: certified check, cashier's check, personal check, or money order.

The agreed entry shall specifically identify the deduction order to be issued. If the obligor is receiving income from a payor as defined in section 3121.01(E) of the Revised Code:

(PLEASE CHECK THE APPROPRIATE BOX)

- an income withholding notice shall issue. If the obligor's income is not subject to withholding,
- a bank account deduction notice shall issue. If the obligor has no income, but is able to post bond,
- an order to post bond shall issue. If the obligor is unemployed and has no funds from which support can be paid,
- an order to seek work shall issue and the obligor shall pay the current statutory minimum support order (currently \$50.00 per month for all children subject to the order).

If private health insurance is not being provided and becomes available to either the obligor or obligee, they SHALL immediately notify the CSEA, at 513-887-3362, that private health insurance coverage for the children has become available to either of them, along with the full name and address of the health insurance company, and the plan type, policy number, group number and effective date of the health insurance, as well as all information regarding benefits, limitations, and exclusions of the coverage, copies of any insurance forms necessary to receive reimbursement, payment, or other benefits under to coverage, and a copy of any necessary insurance cards. The CSEA shall determine pursuant to ORC 3119.29(G) if the private health insurance is available at a reasonable cost, and if coverage is reasonable, ORC 3119.30 shall apply.

IT IS FURTHER ORDERED that both the obligor and obligee are liable for health care of the children who are not covered by private health insurance or cash medical support;

IT IS FURTHER ORDERED that _____ (name)
_____ (address) _____ (telephone number) shall be reimbursed for out-of-pocket medical, optical, hospital, dental, or prescription expenses for each child;

IT IS FURTHER ORDERED that the health plan administrator may continue making payment for medical, optical, hospital, dental, or prescription services directly to any health care provider in accordance with the plan;

IT IS FURTHER ORDERED that any person required to provide health insurance coverage for children shall designate the child(ren) as covered dependents under any private health insurance policy, contract, or plan.

IT IS FURTHER ORDERED: (Choose one of the following)

- If one of the parties has health insurance:**
 - “ _____ shall provide the primary health insurance for the parties' minor child(ren), and shall do so pursuant ORC 3119.43 within thirty days of this order.
 - _____ shall obtain secondary health insurance for the parties' minor child(ren) when it becomes available through employment at a reasonable cost as defined by ORC 3119.29. Upon obtaining health insurance, _____, shall within thirty (30) days, inform both the other party and CSEA , at 513-887-3362, of the full name and address of health insurance company, plan type, policy number, and effective date of the health insurance.

□ **If both of the parties have health insurance:**

“ _____ shall provide the primary health insurance for the parties’ minor child(ren), and shall do so pursuant ORC 3119.43 within thirty days of this order. _____ shall provide secondary health insurance for the parties’ minor child(ren) when it becomes available through employment at a reasonable cost as defined by ORC 3119.29.

The parties shall divide all co-pays, deductible costs required under the health insurance policy and all other uncovered health care expenses over the cash medical amount (\$ _____) as follows, _____ shall pay _____% and _____ shall pay _____%.

The parties shall provide each other with a copy of all health care bills for the minor child(ren) on a quarterly basis and a summary of all amounts paid by either party. The summary shall include an offset against all cash medical support received.

The documentation of health care expenses shall be provided on the last day of the months of March, June, September, and December. Payment/reimbursement for all health care expenses shall be made within thirty (30) days.

Absent extraordinary circumstances, motions for payment of health care bills must be made within one (1) year of the date the bills were incurred.

The parties shall use all health and dental care providers within the health and dental care plan, unless the parties have entered into a written agreement. Any party who uses a health or dental care provider outside of the health and dental care plan shall solely pay said debt. The only exceptions to this provision are a medical emergency or a health and dental care provider under the plan does not exist in their area. Medical emergency is defined as a life threatening illness or serious injury.”

IT IS FURTHER ORDERED that the parties must comply with any obligations concerning health insurance coverage imposed under section ORC sections 3119 et seq. of the Revised Code no later than thirty (30) days after the applicable order is issued.

IT IS FURTHER ORDERED that any party ordered to provide health insurance or a cash medical order, shall immediately notify the CSEA of any changes in status of the availability of health insurance.

IT IS FURTHER ORDERED that any person who fails to provide health insurance as ordered may be punished for contempt of Court and shall be solely responsible for the payment of all health care expenses incurred on the child(ren)’s behalf as a result of the failure to provide insurance. If the obligor is found in contempt for failing to provide health insurance coverage and the obligor has previously been found in contempt, the Court shall consider the obligor’s failure to comply with the order as a change of circumstances for the purpose of modification of the amount of support due under the child support order that is the basis of the order issued under Revised Code 3119 et seq.

IT IS FURTHER ORDERED that the employer of the person required to obtain private health insurance coverage through that employer is required to release to the other parent, any person subject to an order issued under section 3109.19 of the Revised Code, or the child support enforcement agency 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 this section and any order or notice issued under this section.

IT IS FURTHER ORDERED that if the person required to obtain private health care insurance coverage for the children subject to this child support order obtains new employment, the agency shall comply with the requirements of section 3119.34 of the Revised Code, which may result in the issuance of a notice requiring the new employer to take whatever action is necessary to enroll the children in private health care insurance coverage provided by the new employer, when insurance is not being provided by any other source.

Division of Dependent(s) and Alternating Remaining Dependent(s)

Mother shall claim the following dependent(s) _____

_____ for all federal, state, and local income tax purposes and Father shall claim the following dependent(s) _____ for all federal, state, and local income tax purposes. When only one dependent remains then Mother shall claim the child(ren) as dependents in even odd years for all federal, state, and local income tax purposes and Father shall claim the child(ren) as dependents in even odd years for all federal, state, and local income tax purposes.

Alternating Dependent(s) Yearly

Mother shall claim the child(ren) as dependents in even odd years for all federal, state, and local income tax purposes and Father shall claim the child(ren) as dependents in even odd years for all federal, state, and local income tax purposes.

Other

IT IS FURTHER ORDERED that any person who may claim a dependent for federal, state, and local income tax purposes shall be substantially current in payment of child support for any tax year for which the child(ren) are claimed as dependents. A child support obligor shall be substantially current in payment of child support if less than \$100 arrears are owed for the tax year for which the child or children are to be claimed as dependent(s), on or before January 31st of the following year. (ORC 3119.82)

IT IS FURTHER ORDERED that any person who is the residential parent of a child, including any party to a Shared Parenting Decree, and any other legal custodian, shall send a notice of intent

to relocate to the Domestic Relations Court Case Management Office, as follows:

- (a) the other parent, Certificate of Service must be provided.
- (b) the Domestic Relations Court Case Management Office;
- (c) the Butler County Child Support Enforcement Agency (CSEA).
- (d) Notice must be sent within the following time frames:
 - i. If relocating within Butler County – at least **thirty (30)** days in advance of the move;
 - ii. If relocating outside Butler County – at least **sixty (60)** days in advance of the move.
- (e) A file stamped copy must be submitted to the Case Management Office on Form C13 if relocating within Butler County and on Form C13A if relocating outside Butler County.
- (f) If either parent believes the relocation will require a change in the allocation of parenting time, it is the responsibility of that parent to file a motion to review the allocation of parenting time.
- (g) If a parent believes that the move requires a change in residential parent status, that parent may file a motion for change of residential parent or modification of the Shared Parenting Plan, in accordance with Rule DR39.

IT IS FURTHER ORDERED that each parent, or other legal custodian, shall have equal access to the children’s school, day care center, medical or educational records and extracurricular or recreational activities. Any school, day care center official, medical, educational, and extracurricular or recreational activity coordinator or keeper of all records shall provide each parent or legal custodian with all records, documents, and materials related to the child(ren). Failure to comply with this order may be punishable as contempt of Court.

The parties in the above-captioned matter hereby waive the necessity of the Magistrate’s making findings of fact and issuing a decision, and further waive the time period for filing objections to said decision as provided by Ohio Civil Rule 53, and consent to the immediate filing of a Judgment Entry in this matter, service of which is hereby acknowledged and waived.

THE PARTIES AND THEIR LEGAL COUNSEL, IF REPRESENTED, APPROVE THE FORGOING AGREEMENT BY THEIR SIGNATURES BELOW:

Plaintiff/1st Petitioner/Petitioner
Telephone # _____

Defendant/2nd Petitioner /Respondent
Telephone# _____

Subscribed and duly sworn before me according to law, by the above named applicant this _____ day of _____, _____, at _____, County of _____, State of Ohio.

Signature of person administering oath

Title (example: Notary, Deputy Clerk of Courts, etc.)

Attorney for Plaintiff/1st Petitioner/
Supreme Court Reg. # _____
Address: _____
Telephone # _____

Attorney for Defendant/2nd Petitioner
Supreme Court Reg. # _____
Address _____
Telephone# _____

I find that the parties have freely and voluntarily entered into the above agreement and that this agreement has been signed and approved by the parties and their attorneys. The agreement is found to be fair and just to all parties and is in the best interest of the children. I recommend that the agreement be approved and that the agreement become the order of this court.

Date

Magistrate

Date

Judge

NOTICE OF RIGHTS TO APPEAL

The filing of timely written objections by any party to this action shall act as an automatic stay of the above judgment entry until the Court takes further action as delineated in Civil Rule 53. **INTERIM ORDERS, HOWEVER, ARE NOT SUBJECT TO THIS AUTOMATIC STAY, AND SHALL REMAIN IN EFFECT REGARDLESS OF THE FILING OF OBJECTIONS. OBJECTIONS MUST BE FILED WITHIN FOURTEEN (14) DAYS OF THE FILING OF THIS MAGISTRATE'S DECISION OR AMENDED MAGISTRATE'S DECISION.** Objections must be in writing, must be specific and state with particularity the grounds of the objection. For other requirements, see Civil Rule 53 and Local Rule.

PARTIES WAIVE THEIR RIGHT TO OBJECT WITHIN 14 DAYS

CERTIFICATE OF SERVICE

I hereby certify that a copy of the within entry was personally given to the parties or their attorneys, if present, on _____.

Court Officer/Deputy Clerk

OR

I hereby certify that a copy of the within Entry was mailed on _____, by U.S. regular mail to the following, at their respective residences or offices:

Plaintiff/1st Petitioner/Petitioner

Defendant/2nd Petitioner/Respondent

Attorney for Plaintiff/1st Petitioner/Petitioner

Attorney for Defendant/2nd
Petitioner/Respondent

Other Party_____

Other Party_____

Other Attorney_____

Other Attorney_____

Court Officer/Deputy Clerk