

TO BE COMPLETED BY LAW ENFORCEMENT ONLY
WARREN COUNTY, OHIO COURT OF COMMON PLEAS
JUVENILE DIVISION

JUVENILE COURT FACT SHEET

(A SEPARATE FACT SHEET NEEDS TO BE COMPLETED FOR EACH OFFENSE DATE)

NAME OF PERSON FILING: _____ FILING DATE: _____

NAME OF AGENCY: _____

ADDRESS OF AGENCY: _____

DATE OF OFFENSE: _____

CODE/SECTION/SUB SECTION AND DEGREE OF OFFENSE: _____

FACTS:

VICTIM/OWNER NAME: _____ DOB: _____

VICTIM/OWNER ADDRESS: _____

DEFENDANT (FULL LEGAL NAME): _____ DOB: _____

STREET ADDRESS: _____

CITY, STATE, ZIP: _____

PARENT/ GUARDIAN: _____

PHONE NUMBER: _____

SIGNATURE OF OFFICER FILING: _____

FILING FOR OFFICER: _____

WARRANT REQUESTED: ☐ YES ☐ NO IF YES, PLEASE SIGN: _____

SSN: _____ RACE: _____ GENDER: _____

WEIGHT: _____ HEIGHT: _____ EYE COLOR: _____ HAIR COLOR: _____

TO BE COMPLETED BY DEPUTY CLERK ONLY

IN ACCORDANCE WITH CRIM. R. (4)(A)(1), OFFICER HAS ESTABLISHED PROBABLE CAUSE FOR A WARRANT TO BE
ISSUED, TO WIT: _____

☐ WARRANT TO BE ISSUED

☐ SUMMONS TO BE ISSUED

CLERK SIGNATURE: _____ DATE: _____

IN THE WARREN COUNTY, OHIO COURT OF COMMON PLEAS
JUVENILE DIVISION
COMPLAINT

SECTION 2919.24(B)(3) – Contributing (Adult)

CASE NO. _____

STATE OF OHIO

v.

Full Legal Name

DOB

Street Address

City, State, Zip

_____ being first duly cautioned and sworn, deposes and alleges
that he / she has knowledge, information and belief that _____
did act in a way that contributes to an adjudication of the child as a delinquent child based on the child's violation of a court
order adjudicating the child an unruly and for being a habitual truant, in that on or about _____
in the County of Warren and State of Ohio the defendant,

To Wit: (State essential facts constituting charged offense – you must describe what happened in the space below)

Contrary to and in violation of **Section 2919.24(B)(3)** of the Ohio Revised Code, an **M-1**.

Sworn to before me and subscribed in my presence, this _____ day of _____, 20 _____

Joseph W. Kirby, Judge

Warren County Common Pleas Court
Juvenile Division

Complainant

Address

By: Deputy Clerk / Notary Public

City, State, Zip