

**FORMS ALLEGING ABUSE BY PARENT AND REQUESTING THAT  
NOTIFICATION OF ABORTION BE PROVIDED TO OTHER RELATIVE  
(R.C. 2919.12)**

**INSTRUCTIONS FOR AFFIDAVIT FORMS**

If you use these forms, the person performing your abortion will not be required to give notice of your abortion to a parent, guardian or custodian. Instead, you can choose to have notice provided to a brother or sister over 21 years of age, or a step-parent or grandparent.

These forms are called Affidavits. An Affidavit is a sworn statement signed before a person authorized to administer oaths, such as a notary public. The Clerk's Office will provide a notary public if you want to complete the forms in the Clerk's Office.

These forms may be used if all of the following apply.

You are:

1. Pregnant;
2. Unmarried;
3. Under 18 years old;
4. Unemancipated, which means that any of the following apply:
  - You have not entered the armed forces of the United States;
  - You do not have a job and support yourself;
  - You are under the care and control of a parent, guardian or custodian.
5. You fear, based on events that have happened in the past, physical, sexual or severe emotional abuse if notice of the abortion is given to a parent, guardian or custodian.

These forms will be filed with the Juvenile Court and be kept confidential. The Clerk of the Court will provide notice to the abortion provider that the forms have been filed and the Clerk will inform the abortion provider of the name of the person you have chosen to receive notice of your abortion. The forms will not be released by the Court.

You do not have to pay any filing fee or court costs to the Clerk for notarizing these forms, filing these forms, or issuing the notice to the abortion provider.

The Affidavit must be filed in a Juvenile Court in the county where you reside or have a legal settlement, or in any county that borders the county where you reside or have a legal settlement.

## **HOW TO FILL OUT THE FORM**

There are two forms. You complete one of them. The other form is completed by the person you select to receive notice of your abortion. That must be a brother or sister over the age of 21 years old, or a step-parent or grandparent.

Your form requires that you name the person to receive notice and provide the name and address of the person to perform the abortion.

Both of the forms must be signed in front of a notary public or other person, such as a judge or attorney, authorized to administer oaths.

## **WHAT TO DO AFTER FILLING OUT THE FORMS**

After the forms are signed and notarized, give them to the Juvenile Court Clerk, who will file them in a confidential place within the Clerk's Office. Then the Clerk will issue a notice that you may take to the abortion provider. With that notice the abortion provider will be authorized to provide notice of the abortion to the brother, sister, step-parent or grandparent that you have selected.

# In the Court of Common Pleas, Lucas County, Ohio

## Juvenile Division

IN THE MATTER OF:

Case Number: \_\_\_\_\_

Jane Doe # \_\_\_\_\_

### Affidavit

*(Pursuant to R.C. 2919.12(B)(1)(b)(ii))*

STATE OF OHIO )  
COUNTY OF LUCAS )

I, \_\_\_\_\_, being duly sworn, state as follows:

1. I am pregnant, unmarried, under 18 years of age, and unemancipated.
2. I wish to have an abortion without notification of a parent, guardian or custodian.
3. I request instead that notice of my intention to have the abortion be given to one of the following [Select One]:  
☐ \_\_\_\_\_, a brother or sister 21 years of age or older or,  
☐ \_\_\_\_\_, a step-parent or grandparent.
4. I am in fear of physical, sexual, or severe emotional abuse from a parent, guardian or custodian who otherwise would be notified of my intention to have an abortion pursuant to R.C. 2919.12.
5. My fear is based on a pattern of physical, sexual or severe emotional abuse exhibited by a parent, guardian or custodian.
6. I understand that upon the filing of this Affidavit, and an Affidavit from the person specified above with the Juvenile Court, an officer of that Court will prepare a Notice verifying that the Affidavits have been filed.
7. The person who intends to perform or induce my abortion and the address of that person are as follows:

Abortion Provider: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
Signature

Before me appeared the above-named person who under oath or by affirmation did sign this Affidavit this \_\_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

# In the Court of Common Pleas, Lucas County, Ohio

## Juvenile Division

IN THE MATTER OF:

Case Number: \_\_\_\_\_

Jane Doe # \_\_\_\_\_

### Affidavit

*(Pursuant to R.C. 2919.12(B)(1)(b)(iii))*

STATE OF OHIO )  
 )  
COUNTY OF LUCAS )

I, \_\_\_\_\_, being duly sworn, state as follows:

1. I am [select appropriate one]  
☐ over 21 years of age and I am a brother or sister of  
☐ a step-parent or grandparent of  
\_\_\_\_\_, (hereinafter referred to as “minor”) who has filed an Affidavit with the Juvenile Court pursuant to R.C. 2919.12(B)(1)(b)(ii).
2. I have been specified in the minor’s Affidavit as the person to receive Notice of the minor’s intention to receive an abortion.
3. The minor has reason to fear physical, sexual or severe emotional abuse from a parent, guardian or custodian who otherwise would be notified of her intention to have an abortion pursuant to R.C. 2919.12.
4. Her fear is based on a pattern of physical, sexual or severe emotional abuse exhibited by a parent, guardian or custodian.

\_\_\_\_\_  
Signature

Before me appeared the above-named person who under oath or by affirmation did sign this Affidavit this \_\_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_.

\_\_\_\_\_  
Notary Public