

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

\_\_\_\_\_  
Plaintiff/1<sup>st</sup> Petitioner/Petitioner

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Date of Birth

vs.

\_\_\_\_\_  
Defendant/2<sup>nd</sup> Petitioner/Respondent

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Date of Birth

\* \* \* \* \*

Now comes \_\_\_\_\_ to request that the Court review the billing invoice received from  
Name of Party

the Clerk of Courts' Office in reference to their request for payment of Court fees and costs.

\_\_\_\_\_  
Signature of Filing Party

The Court waives all fees and costs for the filing of this request for hearing to review court costs.

**SO ORDERED**

\_\_\_\_\_  
Judge

**G110 - REQUEST TO REVIEW COURT COST**

Case No: \_\_\_\_\_

Date: \_\_\_\_\_

**NOTICE OF HEARING**

A hearing on the above Motion(s) will be held  in person at the Butler County Domestic Relations Court, 315 High St. 2nd floor, Hamilton, Ohio 45011, or  by telephone  by video on \_\_\_\_\_ (date) at \_\_\_\_\_ am/pm before Judge/Magistrate\_\_\_\_\_.

**If your hearing is to be conducted by telephone or video, you must contact the Case Management Office at 513-887-3100 ext. 2 and confirm your telephone number and email information a minimum of one business day in advance of the hearing.**

**INSTRUCTIONS TO THE CLERK**

To the Clerk of Courts:

Please serve this Motion, Notice and Instructions to the Clerk on \_\_\_\_\_ (Name of Other Party) at the following address \_\_\_\_\_ by:

- Certified Mail, Return Receipt Requested
- Issuance to Sheriff of \_\_\_\_\_ County, Ohio for  Personal or  Residence service
- Other: (*specify*) \_\_\_\_\_

\_\_\_\_\_  
Signature of Filing Party