

**INSTRUCTIONS  
TO THE CLERK  
LORI M. TYACK, CLERK  
FRANKLIN COUNTY MUNICIPAL COURT, COLUMBUS, OHIO**

\_\_\_\_\_ Plaintiff Case No. \_\_\_\_\_ CV \_\_\_\_\_  
 \_\_\_\_\_ VS. \_\_\_\_\_  
 \_\_\_\_\_ Defendant Signature \_\_\_\_\_  
 \_\_\_\_\_ Attorney Code \_\_\_\_\_  
 \_\_\_\_\_ Date Attorney for \_\_\_\_\_

To the Clerk: Please issue

- \_\_\_\_\_ Writ of Restitution - \$35.00 (Includes Service)  
(Red Tag)
- \_\_\_\_\_ Set Out - \$45.00 (Includes Service)
- \_\_\_\_\_ Replevin - \$35.00 (Includes Service)  
(You must complete bailiff instructions)
- \_\_\_\_\_ Execution - \$35.00 (Includes Service)  
(You must complete bailiff instructions)
- \_\_\_\_\_ Execution/Vehicle - \$835.00 (Includes Service)  
(You must complete bailiff instructions)
- \_\_\_\_\_ Exemplified Copy or Certificate of Copy - \$20.00
- \_\_\_\_\_ Certificate of Judgment - \$10.00
- \_\_\_\_\_ Revivor - \$30.00  
(Up to 3 defendants and/or addresses with 1 type of service)
- \_\_\_\_\_ Certificate of Judgment to BMV - \$10.00  
Date of Loss \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Social Security # \_\_\_\_\_  
Driver License # \_\_\_\_\_  
License Plate # \_\_\_\_\_
- \_\_\_\_\_ Appeal - \$50.00
- \_\_\_\_\_ Transfer from Small Claims - \$45.00
- \_\_\_\_\_ Other \_\_\_\_\_

- \_\_\_\_\_ Assignment of Judgment - \$20.00
- \_\_\_\_\_ Docket Transcript - \$20.00
- \_\_\_\_\_ Out of County Sheriff - \$41.00  
County Name \_\_\_\_\_
- \_\_\_\_\_ Post Judgment Motion - \$20.00
- \_\_\_\_\_ Objection to Magistrate's Report - \$20.00
- \_\_\_\_\_ Amended Complaint - \$20.00  
(Plus service fees, if requested)
- \_\_\_\_\_ Third Party Complaint - \$20.00  
(Plus service fees, if requested)
- \_\_\_\_\_ Counterclaim/Crossclaim - \$20.00 ea.  
(Plus service fees, if requested)
- \_\_\_\_\_ Order to Show Cause - \$50.00  
(Includes Service)
- \_\_\_\_\_ Ordinary Mail Service - \$3.00 ea.
- \_\_\_\_\_ Certified Mail Service - \$6.00 ea.
- \_\_\_\_\_ Bailiff Service - \$25.00 ea.
- \_\_\_\_\_ Jury Demand Fee - \$10.00
- \_\_\_\_\_ Jury Demand Deposit - \$500.00
- \_\_\_\_\_ New Address

\_\_\_\_\_ Street \_\_\_\_\_  
 \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_