IN THE MUNICIPAL COURT OF AKRON
SUMMIT COUNTY, OHIO

STATE OF OHIO, CITY OF AKRON

V.

_____

DEFENDANT

CASE NO: _____

JUDGE_____

MOTION FOR REQUEST

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

For Court Use Only:

☐ Granted

☐ Denied

☐ See Judgement Entry

_____

Judge's Signature

Date:_____

_____

Defendant's signature

Date: _____

_____

_____

Address

_____

Phone

_____

Email

Please note this does not guarantee your request will be granted. Your motion will be given to the Judge with your file for consideration. When a decision has been made, you will be contacted by the Court.

Please file with the Akron Municipal Court Clerk's Office on the 7th floor

02/2020