

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
FAMILY COURT
Domestic Relations Branch**

PRINT PLAINTIFF'S NAME

PLAINTIFF,

v.

DR _____

PRINT DEFENDANT'S NAME

Judge _____

DEFENDANT.

MOTION

Does the Other Party Consent to this Motion? yes no

I, _____, am the PLAINTIFF DEFENDANT in this case.
PRINT YOUR NAME

1. I respectfully ask this Court to

_____.

2. I would like this Court to grant my request because

_____.

Request for Relief

I RESPECTFULLY REQUEST that the Court grant my Motion.

I ALSO REQUEST that the Court award any other relief it considers fair and proper.

I Do Do NOT request an oral hearing in front of the judge on this motion.

Respectfully Submitted,

SIGN YOUR NAME

STREET ADDRESS

CITY, STATE AND ZIP CODE

TELEPHONE NUMBER

SUBSTITUTE ADDRESS: CHECK BOX IF YOU HAVE WRITTEN SOMEONE ELSE'S ADDRESS AND PHONE NUMBER BECAUSE YOU FEAR HARASSMENT OR HARM.

If by consent:

OTHER PARTY'S SIGNATURE

DATE

POINTS AND AUTHORITIES IN SUPPORT OF MOTION

In support of this Motion, I refer to:

1. Super. Ct. Dom. Rel. R. 7(b).
2. The record in this case.
3. The attached supporting document(s), if any.

[LIST ANY DOCUMENTS THAT YOU ARE ATTACHING]

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
FAMILY COURT**

PRINT PETITIONER'S/PLAINTIFF'S NAME

Case No. _____

PETITIONER/PLAINTIFF,

v.

PRINT RESPONDENT'S/DEFENDANT'S NAME

RESPONDENT/DEFENDANT.

**RULE 5
CERTIFICATE OF SERVICE**

IF YOU HAVE ALREADY SERVED THE OTHER PARTY, YOU CAN FILL OUT AND FILE THIS CERTIFICATE OF SERVICE ON THE SAME DAY YOU FILE YOUR PAPERS.

IF YOU HAVE NOT ALREADY SERVED THE OTHER PARTY, YOU MUST FILL OUT AND FILE THIS CERTIFICATE OF SERVICE AFTER YOU SERVE THE OTHER PARTY.

I certify that I served a copy of my Motion to the other party or the other party's attorney on _____.
PRINT DATE OF SERVICE

The papers were delivered [CHECK ONE]

by handing it to the other party

by first class mail to:

PRINT NAME OF PERSON SERVED WITH PAPERS

STREET ADDRESS

CITY, STATE AND ZIP CODE

by fax to:

PRINT NAME OF PERSON SERVED WITH PAPERS

FAX NUMBER

by leaving a copy at the other party's workplace with a clerk or person in charge, or because there was no one in charge, by leaving it in a conspicuous place:

PRINT NAME OF PERSON SERVED WITH PAPERS

STREET ADDRESS

CITY, STATE AND ZIP CODE

by leaving a copy at the other party's home with a person of suitable age and discretion who lives there:

PRINT NAME OF PERSON SERVED WITH PAPERS

STREET ADDRESS

CITY, STATE AND ZIP CODE

SIGN YOUR NAME

DATE