

INSTRUCTIONS

VERIFIED MOTION FOR CONTEMPT

STATE OF INDIANA) IN THE _____ SUPERIOR/CIRCUIT COURT
) SS:
 COUNTY OF _____) CASE NO. _____

 Petitioner,

V.

FOR THE SECTION ABOVE THE DOTTED LINE, LOOK AT THE COURT PAPERS YOU HAVE FROM THIS CASE AND COPY THE INFORMATION HERE AS IT APPEARS ON THOSE COURT PAPERS.

 Respondent.

APPEARANCE BY SELF-REPRESENTED PERSON IN CIVIL CASE

This Appearance Form must be filed on behalf of every party in a civil case.

1. My Name is: _____ PRINT YOUR FULL NAME _____ and I am

Initiating (filing) _____;

Responding (answering or defending) _____; or

Intervening _____;

} IF YOU ARE THE PETITIONER, CHECK "INITIATING"; IF YOU ARE THE RESPONDENT, CHECK "RESPONDING"

in this case and am representing myself.

2. Contact information for receiving legal service of documents and case information is required by Court Rules: *(NOTE: If you are the Initiating party and this case, or a related case, involves a protection from abuse order, a workplace violence restraining order, or a no-contact order, you must provide an address for the purpose of legal service of documents but that address should not be one that exposes the whereabouts of a petitioner)*

Address: PRINT YOUR FULL ADDRESS _____

Email Address: PRINT YOUR EMAIL ADDRESS _____

Phone: PRINT YOUR PHONE NUMBER _____

FAX: PRINT YOUR FAX NUMBER _____

OR, if in the related case, you have used the Attorney General Confidential address, you may check the box below:

IF YOU USE A CONFIDENTIAL ADDRESS THROUGH THE OFFICE OF THE ATTORNEY GENERAL, CHECK HERE

} _____ Attorney General confidential address (contact the Attorney General at 1-800-321-1907 or e-mail address is **confidential@atg.state.in.us**).

3. This is a LEAVE BLANK case type as defined in administrative Rule 8(B)(3).
(Clerk will supply this information.)

4. I will accept service by FAX at the following number IF YOU HAVE A FAX NUMBER WHERE YOU WANT TO RECEIVE COURT PAPERS, PRINT IT HERE

5. This case is a domestic relations matter, involves Uniform Reciprocal Enforcement of support (URESA), paternity, delinquency, Child in Need of Services (CHINS), guardianship, or any other proceedings in which support may be an issue, and social security numbers of all family members are supplied on a separately attached document (Form TCM-TR3.1-4) filed as confidential information on light green paper.

_____ Yes CHECK HERE No

6. There are related cases: Yes _____ No _____ (If yes, please indicate below.)

} IF THERE ARE OTHER COURT CASES INVOLVING YOURSELF, THE OTHER PARTY, AND/OR YOUR CHILD(REN). CHECK "YES"; OTHERWISE, CHECK "NO"

Caption and case number of related cases:

IF YOU CHECKED "NO" FOR #6, SKIP. IF YOU CHECKED "YES" FOR #6, PRINT THE CAPTION AND CASE NUMBER FOR EACH RELATED CASE

Caption: _____ Case Number: _____

7. Additional information required by local rule:

IF NECESSARY, PRINT ADDITIONAL INFORMATION REQUIRED BY YOUR COUNTY'S LOCAL RULES

SIGN YOUR NAME
Self-Represented Party

INSTRUCTIONS

VERIFIED MOTION FOR CONTEMPT

STATE OF INDIANA) IN THE _____ SUPERIOR/CIRCUIT COURT
) SS:
COUNTY OF _____) CASE NO. _____

Petitioner,

V.

FOR THE SECTION ABOVE THE DOTTED LINE, LOOK AT THE COURT PAPERS YOU HAVE FROM THIS CASE AND COPY THE INFORMATION HERE AS IT APPEARS ON THOSE COURT PAPERS.

Respondent.

VERIFIED MOTION FOR CONTEMPT

Comes now _____ PRINT YOUR FULL NAME _____, and states that on _____ PRINT THE DATE THE COURT ORDER WAS ISSUED _____,

this Court entered an order whereby _____ PRINT THE FULL NAME OF THE OTHER PARTY _____,

was ordered to (do) (not do) the following: } CIRCLE THE APPROPRIATE PARENTHESIS; THE PARTY WAS ORDERED TO DO OR NOT DO SOMETHING

STATE WHAT THE OTHER PARTY WAS ORDERED TO DO/NOT DO BY PRINTING WHAT WAS SET OUT IN THE COURT ORDER

Since the date of such order, such person has violated the above order in that
BRIEFLY AND SPECIFICALLY EXPLAIN HOW THE OTHER PARTY HAS VIOLATED THE COURT ORDER. STATE DATES, TIMES, AND LOCATIONS OF THE VIOLATION

WHEREFORE, the undersigned asks that the Court order _____ PRINT THE FULL NAME OF THE OTHER PARTY TO APPEAR in open Court and explain why such person should not be punished for contempt of Court.

I affirm under the penalties for perjury that the foregoing representations are true.

SIGN YOUR NAME
Signature

PRINT YOUR FULL NAME

PRINT YOUR STREET ADDRESS

PRINT YOUR CITY, STATE AND ZIP CODE

CERTIFICATE OF SERVICE

I hereby certify that I sent a copy of this Motion by first class mail to the opposing attorney, or the opposing party if the opposing party is not represented by an attorney, on _____ PRINT THE DATE YOU WILL FILE THE FORMS

SIGN YOUR NAME
Signature

STATE OF INDIANA) IN THE _____ SUPERIOR/CIRCUIT COURT
) SS:
COUNTY OF _____) CASE NO. _____

Petitioner,

V. FOR THE SECTION ABOVE THE DOTTED LINE, LOOK AT THE COURT PAPERS YOU HAVE FROM THIS CASE AND COPY THE INFORMATION HERE AS IT APPEARS ON THOSE COURT PAPERS.

Respondent.

TO: PRINT THE OTHER PARTY'S NAME

ORDER TO APPEAR AND NOTICE OF HEARING

A Verified Motion for Contempt has been filed in this Court in this case. **IT IS THEREFORE**

ORDERED by the Court that PRINT THE OTHER PARTY'S NAME, who (lives) (works) at } CIRCLE "LIVES" IF THE OTHER PARTY IS BEING GIVEN THESE PAPERS AT THEIR HOUSE OR CIRCLE "WORKS" IF AT THEIR JOB
PRINT THE ADDRESS WHERE YOU WANT THE OTHER PARTY TO BE GIVEN THESE PAPERS

IS ORDERED TO APPEAR in the PRINT THE COUNTY Superior/Circuit Court, located at

PRINT THE ADDRESS WHERE THE COURT IS LOCATED. CALL THE COURT TO MAKE SURE YOU HAVE THE CORRECT INFORMATION

Indiana, on the ____ day of _____, 20____, at _____, ____m., to explain why such person should not be punished for contempt of this Court's Order. Failure to appear if properly served may result in a warrant for your arrest.

Dated: _____

Judge

CLERK'S CERTIFICATE OF MAILING

I certify that on the ____ day of _____, 20____, I mailed a copy of this Motion for Contempt to the Defendant by certified mail requesting a return receipt.

DATED this ____ day of _____, 20____.

CLERK

CLERK'S RETURN OF SERVICE ACCEPTED BY MAIL

I hereby certify that service of this Motion for Contempt with return receipt requested was mailed and that a copy of the return receipt was received by defendant the ____ day of _____, 20____, which copy is attached.

DATED this ____ day of _____, 20____.

CLERK

CLERK'S CERTIFICATE OF SERVICE NOT ACCEPTED BY MAIL

I hereby certify that I mailed a copy of this Motion for Contempt to the Defendant by certified mail, and the same was returned without acceptance this ____ day of _____, 20____.

DATED this ____ day of _____, 20____.

CLERK

SHERIFF'S RETURN OF SERVICE

This Motion for Contempt came to hand on the ____ day of _____, 20____, and I served the same on the ____ day of _____, 20____:

1. ____ By delivering a copy of the Motion for Contempt personally to the Defendant.
2. ____ By leaving a copy of the Motion for Contempt at the dwelling or usual place of abode of the Defendant; and mailing a copy of the Motion for Contempt to the Defendant at the Defendant's last known address.
3. ____ By serving Defendant's agent as provided by rule statute or valid agreement, and mailing a copy of this Motion for Contempt to Defendant at Defendant's last known address.
4. ____ Defendant cannot be found in my bailiwick, and this Motion for Contempt was not served.

AND I NOW RETURN THIS _____ THIS ____ day _____, 20____.

SHERIFF

STATE OF INDIANA) IN THE _____ SUPERIOR/CIRCUIT COURT
) SS:
COUNTY OF _____) CASE NO. _____

IN RE THE _____ OF:

Petitioner,

V.

Respondent.

APPEARANCE BY SELF-REPRESENTED PERSON IN CIVIL CASE

This Appearance Form must be filed on behalf of every party in a civil case.

1. My Name is: _____ and I am

Initiating (filing) _____;
Responding (answering or defending) _____; or
Intervening _____;

in this case and am representing myself.

2. Contact information for receiving legal service of documents and case information is required by Court Rules: *(NOTE: If you are the Initiating party and this case, or a related case, involves a protection from abuse order, a workplace violence restraining order, or a no-contact order, you must provide an address for the purpose of legal service of documents but that address should not be one that exposes the whereabouts of a petitioner)*

Address: _____

Email Address: _____

Phone: _____

FAX: _____

OR, if in the related case, you have used the Attorney General Confidential address, you may check the box below:

____ Attorney General confidential address (contact the Attorney General at 1-800-321-1907 or e-mail address is **confidential@atg.state.in.us**).

3. This is a _____ case type as defined in administrative Rule 8(B)(3).
(Clerk will supply this information.)

4. I will accept service by FAX at the following number _____

5. This case is a domestic relations matter, involves Uniform Reciprocal Enforcement of support (URESAs), paternity, delinquency, Child in Need of Services (CHINS), guardianship, or any other proceedings in which support may be an issue, and social security numbers of all family members are supplied on a separately attached document (Form TCM-TR3.1-4) filed as confidential information on light green paper.

_____ Yes _____ No

6. There are related cases: Yes _____ No _____ (*If yes, please indicate below.*)

Caption and case number of related cases:

Caption: _____ Case Number: _____

7. Additional information required by local rule:

Self-Represented Party

STATE OF INDIANA) IN THE _____ SUPERIOR/CIRCUIT COURT
) SS:
COUNTY OF _____) CASE NO. _____

Petitioner,

V.

Respondent.

VERIFIED MOTION FOR CONTEMPT

Comes now _____, and states that on _____,
this Court entered an order whereby _____,
was ordered to (do) (not do) the following:

Since the date of such order, such person has violated the above order in that

WHEREFORE, the undersigned asks that the Court order _____
TO APPEAR in open Court and explain why such person should not be punished for contempt of Court.

I affirm under the penalties for perjury that the foregoing representations are true.

Signature

CERTIFICATE OF SERVICE

I hereby certify that I sent a copy of this Motion by first class mail to the opposing attorney, or
the opposing party if the opposing party is not represented by an attorney, on _____.

Signature

STATE OF INDIANA) IN THE _____ SUPERIOR/CIRCUIT COURT
) SS:
COUNTY OF _____) CASE NO. _____

Petitioner,

V.

Respondent.

TO: _____

ORDER TO APPEAR AND NOTICE OF HEARING

A Verified Motion for Contempt has been filed in this Court in this case. **IT IS THEREFORE**

ORDERED by the Court that _____, who (lives) (works) at

_____,
IS ORDERED TO APPEAR in the _____ Superior/Circuit Court, located at

_____,
Indiana, on the ____ day of _____, 20____, at _____, ____m., to explain why such
person should not be punished for contempt of this Court's Order. Failure to appear if properly served
may result in a warrant for your arrest.

Dated: _____

Judge

CLERK'S CERTIFICATE OF MAILING

I certify that on the ____ day of _____, 20____, I mailed a copy of this Motion for Contempt to the Defendant by certified mail requesting a return receipt.

DATED this ____day of _____, 20____.

CLERK

CLERK'S RETURN OF SERVICE ACCEPTED BY MAIL

I hereby certify that service of this Motion for Contempt with return receipt requested was mailed and that a copy of the return receipt was received by defendant the ____ day of _____, 20____, which copy is attached.

DATED this ____day of _____, 20____.

CLERK

CLERK'S CERTIFICATE OF SERVICE NOT ACCEPTED BY MAIL

I hereby certify that I mailed a copy of this Motion for Contempt to the Defendant by certified mail, and the same was returned without acceptance this ____ day of _____, 20____.

DATED this ____day of _____, 20____.

CLERK

SHERIFF'S RETURN OF SERVICE

This Motion for Contempt came to hand on the ____ day of _____, 20____, and I served the same on the ____day of _____, 20____:

- 1.____By delivering a copy of the Motion for Contempt personally to the Defendant.
- 2.____By leaving a copy of the Motion for Contempt at the dwelling or usual place of abode of the Defendant; and mailing a copy of the Motion for Contempt to the Defendant at the Defendant's last known address.
- 3.____By serving Defendant's agent as provided by rule statute or valid agreement, and mailing a copy of this Motion for Contempt to Defendant at Defendant's last known address.
- 4.____Defendant cannot be found in my bailiwick, and this Motion for Contempt was not served.

AND I NOW RETURN THIS _____ THIS ____day_____, 20____.

SHERIFF