

**REQUEST FOR ASSIGNMENT - TO BE USED FOR COMPLAINTS FOR CONTEMPT ONLY**

**PROBATE AND FAMILY COURT**

**FILL OUT COMPLETELY - PLEASE PRINT**

Docket Number: \_\_\_\_\_

Plaintiff: \_\_\_\_\_

Defendant: \_\_\_\_\_

Nature of Action: **FOR CONTEMPT HEARINGS ONLY** \_\_\_\_\_

**Location Requested:**

(Must be filled out if the Probate Court you are requesting a hearing at, has multiple locations) Please indicate the location you wish.

**CONTESTED ISSUES:**

Child Support/Alimony arrears

Visitation

Real or Personal Property issues

Health Insurance/medical bills

Other - please specify: \_\_\_\_\_

**REASON FOR ASSIGNMENT OF CONTEMPT CASE FOR FURTHER HEARING:**

Review of compliance with a stipulation or agreement

Continuance requested to negotiate or present agreement

Continuance requested for counsel to be present

Capias returned and continued for hearing

Hearing with testimony required - TIME ESTIMATE: \_\_\_\_\_

Review or adjustment of arrears

Other - Please specify \_\_\_\_\_

Has this Complaint for Contempt been mediated by the Family Service Office?  Yes  No

Has there been a suspended jail sentence on this Complaint for Contempt?  Yes  No

Is the Department of Revenue involved in this case?  Yes  No

All persons are entitled to access all court programs, activities, and services without regard to disability. If you need to request an accommodation, including the use of an elevator, check YES and contact the court.  Yes  No

**NOTE: Time Estimate MUST be completed if contested hearing is requested**

**REQUESTED BY:**

**OPPOSING COUNSEL:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Person filing this request: \_\_\_\_\_ Date: \_\_\_\_\_