

# INSTRUCTIONS

## VERIFIED MOTION FOR CONTEMPT REGARDING PARENTING TIME

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

IN RE THE \_\_\_\_\_ OF:

\_\_\_\_\_  
Petitioner,

V.

\_\_\_\_\_  
Respondent.

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.

### 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 FILED THIS CASE AND YOUR NAME APPEARS AS THE FIRST NAME LISTED ABOVE, CHECK "INITIATING"; IF YOU DID NOT FILE THIS CASE AND YOUR NAME APPEARS AS THE SECOND NAME LISTED ABOVE, 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

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5. This case is a domestic relations matter, involves reciprocal enforcement of support, 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.

  X   Yes        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: \_\_\_\_\_

Caption: \_\_\_\_\_ Case Number: \_\_\_\_\_

Caption: \_\_\_\_\_ Case Number: \_\_\_\_\_

Caption: \_\_\_\_\_ Case Number: \_\_\_\_\_

Caption: \_\_\_\_\_ Case Number: \_\_\_\_\_

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 REGARDING PARENTING TIME

### NOT FOR PUBLIC ACCESS IN ACCORDANCE WITH ADMINISTRATIVE RULE 9

ATTENTION CLERK: FOR SELF REPRESENTED LITIGANTS, TREAT THIS FORM AS IF IT IS PRINTED ON LIGHT GREEN PAPER

ATTORNEYS MUST SUBMIT THIS FORM ON LIGHT GREEN PAPER. SEE BOTTOM OF PAGE FOR TEXT OF TRIAL RULE 5 (G) (2)

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

IN RE THE \_\_\_\_\_ OF:

\_\_\_\_\_  
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.

### CIVIL APPEARANCE FORM

#### Item 5 (Social Security numbers of all family members in cases involving support):

PRINT THE NAME AND SOCIAL SECURITY NUMBER OF EACH MINOR CHILD YOU HAVE WITH THE OTHER PARTY WITH WHOM YOU ARE PAYING CHILD SUPPORT

Name: _____	SS # _____
Name: _____	SS # _____
Name: _____	SS # _____
Name: _____	SS # _____
Name: _____	SS # _____
Name: _____	SS # _____
Name: _____	SS # _____
Name: _____	SS # _____

#### Item 8 (Social Security number of person who is subject to involuntary commitment):

Name: \_\_\_\_\_ SS # \_\_\_\_\_

When only a portion of a document contains information excluded from public access pursuant to Administrative Rule 9(G)(1), said information shall be omitted [or redacted] from the filed document and set forth on a separate accompanying document on **light green paper** conspicuously marked "Not For Public Access" and clearly designating [or identifying] the caption and number of the case and the document and location within the document to which the redacted material pertains.

### NOT FOR PUBLIC ACCESS

# INSTRUCTIONS

## VERIFIED MOTION FOR CONTEMPT REGARDING PARENTING TIME

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

\_\_\_\_\_  
Petitioner,

V.

\_\_\_\_\_  
Respondent.

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.

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### VERIFIED MOTION FOR CONTEMPT REGARDING PARENTING TIME (VISITATION) ORDER

Comes now \_\_\_\_\_ PRINT YOUR FULL NAME \_\_\_\_\_, pro se, and states the following:

1. That parties have PRINT THE NUMBER OF MINOR CHILDREN THAT YOU AND THE OTHER PARTY HAVE TOGETHER \_\_\_\_\_ minor child(ren) together, namely:

Name

Date of birth

PRINT THE NAME AND DATE OF BIRTH OF EACH MINOR CHILD

_____	_____
_____	_____
_____	_____

2. That on PRINT THE DATE THE CURRENT CHILD SUPPORT ORDER WAS ISSUED \_\_\_\_\_, this Court entered the current Parenting Time (Visitation) Order in this case (a copy is attached to this Motion as an exhibit);

3. That PRINT THE NAME OF THE PARENT WHO WAS AWARDED CUSTODY \_\_\_\_\_ was awarded custody of the child(ren);

4. That PRINT THE NAME OF THE PARENT WHO WAS AWARDED VISITATION RIGHTS \_\_\_\_\_ was awarded Parenting Time (Visitation) rights;

5. That since the date of such Order, PRINT THE NAME OF THE PARENT WHO HAS VIOLATED THE COURT ORDER \_\_\_\_\_ has violated the above order by:

EXPLAIN HOW THE PARENT HAS VIOLATED YOUR PARENTING TIME (VISITATION) RIGHTS. BE BRIEF AND BE SPECIFIC, AND BE SURE TO LIST DATES, TIMES AND LOCATIONS

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

# INSTRUCTIONS

## VERIFIED MOTION FOR CONTEMPT REGARDING PARENTING TIME

6. That a hearing should be set to hear the issue contained herein.

WHEREFORE, PRINT YOUR FULL NAME requests that this Court set this matter for hearing, and upon hearing, find the other side in contempt for violating my Parenting Time (Visitation) rights, and order all other further relief that is just and proper in the premises.

I affirm under the penalties of 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

# INSTRUCTIONS

## VERIFIED MOTION FOR CONTEMPT REGARDING PARENTING TIME

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

\_\_\_\_\_  
Petitioner,

V.

\_\_\_\_\_  
Respondent.

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.

-----  
TO: PRINT THE OTHER PARTY'S NAME  
PRINT THE OTHER PARTY'S STREET ADDRESS  
PRINT THE OTHER PARTY'S CITY, STATE AND ZIP CODE

### ORDER TO APPEAR AND NOTICE OF HEARING

A Verified Motion for Contempt Regarding Parenting Time (Visitation) Order 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 PRINT THE ADDRESS WHERE YOU WANT THE OTHER PARTY TO BE GIVEN THESE PAPERS,  
CIRCLE "LIVES" IF THE OTHER PARTY IS BEING GIVEN THESE PAPERS AT THEIR HOUSE OR CIRCLE "WORKS" IF AT THEIR JOB

**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 Parenting Time (Visitation) Order. Failure to appear if properly served may result in a warrant for your arrest.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Judge

# INSTRUCTIONS

## VERIFIED MOTION FOR CONTEMPT REGARDING PARENTING TIME

### 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 \_\_\_\_\_



X     Yes          No

Caption:\_\_\_\_\_ Case Number: \_\_\_\_\_

### Self-Represented Party

**NOT FOR PUBLIC ACCESS**  
**IN ACCORDANCE WITH ADMINISTRATIVE RULE 9**

**ATTENTION CLERK: FOR SELF REPRESENTED LITIGANTS, TREAT THIS FORM AS IF IT IS PRINTED ON LIGHT GREEN PAPER**

**ATTORNEYS MUST SUBMIT THIS FORM ON LIGHT GREEN PAPER. SEE BOTTOM OF PAGE FOR TEXT OF TRIAL RULE 5 (G) (2)**

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

\_\_\_\_\_  
Petitioner,

V.

\_\_\_\_\_  
Respondent.

**CIVIL APPEARANCE FORM**

**Item 5** (Social Security numbers of all family members in cases involving support):

Name: _____	SS # _____
Name: _____	SS # _____
Name: _____	SS # _____
Name: _____	SS # _____
Name: _____	SS # _____
Name: _____	SS # _____
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**Item 8** (Social Security number of person who is subject to involuntary commitment):

Name: \_\_\_\_\_ SS # \_\_\_\_\_

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**NOT FOR PUBLIC ACCESS**

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\_\_\_\_\_  
Petitioner,

V.

\_\_\_\_\_  
Respondent.

**VERIFIED MOTION FOR CONTEMPT**  
**REGARDING PARENTING TIME (VISITATION) ORDER**

Comes now \_\_\_\_\_, pro se, and states the following:

1. That parties have \_\_\_\_\_ minor child(ren) together, namely:

**Name**

**Date of birth**

_____	_____
_____	_____
_____	_____
_____	_____

2. That on \_\_\_\_\_, this Court entered the current Parenting Time (Visitation) Order in this case (a copy is attached to this Motion as an exhibit);

3. That \_\_\_\_\_ was awarded custody of the child(ren);

4. That \_\_\_\_\_ was awarded Parenting Time (Visitation) rights;

5. That since the date of such Order, \_\_\_\_\_ has violated the above order by:

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

6. That a hearing should be set to hear the issue contained herein.

WHEREFORE, \_\_\_\_\_ requests that this Court set this matter for hearing, and upon hearing, find the other side in contempt for violating my Parenting Time (Visitation) rights, and order all other further relief that is just and proper in the premises.

I affirm under the penalties of 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. \_\_\_\_\_  
IN RE THE \_\_\_\_\_ OF:

\_\_\_\_\_  
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\_\_\_\_\_  
Respondent.

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ORDER TO APPEAR AND NOTICE OF HEARING**

A Verified Motion for Contempt Regarding Parenting Time (Visitation) Order 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 Parenting Time (Visitation) Order. Failure to appear if properly served may result in a warrant for your arrest.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Judge

### CLERK'S CERTIFICATE OF MAILING

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CLERK

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DATED this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
CLERK

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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