The Family Court of the State of Delaware

In and For  New Castle County  Kent County  Sussex County

**MOTION FOR CONTEMPT OF ORDER OF PROTECTION FROM ABUSE**

## Petitioner v. Respondent

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name |  | Name |  | File Number |
|  |  |  |  |  |
| Street Address (including Apt) |  | . Street Address (including Apt) |  |  |
|  |  |  |  |  |
| P.O. Box Number |  | P.O. Box Number |  |  |
|  |  |  |  | Petition Number |
| City/State/Zip Code |  | City/State/Zip Code |  |  |
|  |  |  |  |  |
| Attorney Name |  | Attorney Name |  |  |
|  |  |  |  |  |
| Interpreter needed?  Yes  No |  | Interpreter needed?  Yes  No |  | |
| Language |  | Language |  | |

The Respondent is under an Order of Protection From Abuse dated      . The Order directed the respondent to observe certain conditions which he/she has failed to do. Specifically (*please list in detail all incidents in which the Respondent has violated the Order of Protection from Abuse that was issued to him/her, including specific dates, if available*):

WHEREFORE, the Petitioner asks the Court that a hearing be set on these charges and that the Court find the Respondent in contempt of the Order of Protection from Abuse and make any further rulings as the Court finds appropriate.

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| --- | --- | --- |
|  |  |  |
| Date |  | Signature |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **VERIFICATION** | | | | | |
|  | |  | | |  |
| **STATE OF DELAWARE** | | **)** | | |  |
|  | | **) ss.:** | | |  |
| **COUNTY OF** | **,** | | | | **being duly sworn, says:** |
|  |  | | | |  |
|  | | |  | | |
| **I am the Petitioner / Movant in this action. I have read the above Motion and know to the best of my knowledge that the facts contained therein are true.** | | | | | |
|  |  | | | |  |
|  |  | | | |  |
|  |  | | | | **Movant Signature** |
|  |  | | | |  |
| **Subscribed and sworn before me on this date,** | | | | |  |
|  |  | | | |  |
|  | | | |  |  |
| **Date** | | | |  | **Clerk of Court / Notary Public** |

**AFFIDAVIT OF MAILING**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| I, the Movant, affirm that a true and correct copy of this Motion was placed in the U.S. Mail on the | | | | | | | | | | | | |
|  | day of |  | , |  | | | | and sent to the other party or attorney at | | | | |
| the address listed on the petition, first class postage pre-paid. | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
|  | | | | |  | | | | | | | |
|  | | | | | | | Movant | | | | |  |
| Sworn to and subscribed before me this | | | |  | | day of | | |  | , |  |  |
|  | | | | | | | | | | | |  |
|  | | | | | | | Clerk of Court/Notary Public | | | | |  |