



**Superior Court of the District of Columbia  
Domestic Violence Division  
500 Indiana Ave NW, Room 4510, Washington DC 20001  
202-879-0157 | www.dccourts.gov**

Case No.: \_\_\_\_\_

\_\_\_\_\_

**Petitioner**

Vs.

\_\_\_\_\_

**Respondent**

**MOTION TO ADJUDICATE  CRIMINAL /  CIVIL CONTEMPT**

By order of this Court dated \_\_\_\_\_, that was served on Respondent on \_\_\_\_\_,

Date

Date

the Court directed the Respondent to observe certain conditions which he/she has failed to do, in that

Count 1: On or about \_\_\_\_\_ at \_\_\_\_\_ am/pm,

Date

Time

At (location): \_\_\_\_\_

Respondent \_\_\_\_\_

Count 2: On or about \_\_\_\_\_ at \_\_\_\_\_ am/pm,

Date

Time

At (location): \_\_\_\_\_

Respondent \_\_\_\_\_

Wherefore, the Petitioner asks that a hearing be set and that a Notice of Hearing and Order to Appear be issued directing the Respondent to appear.

**VERIFICATION**

District of Columbia, I, \_\_\_\_\_ swear under penalty of perjury, that I am the party named in this case; I have read and understand the contents of this motion, and that the facts stated are true to the best of my knowledge.

Name

Date: \_\_\_\_\_

\_\_\_\_\_

Petitioner

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA  
DOMESTIC VIOLENCE DIVISION  
INFORMATION SHEET**

PLEASE PRINT

DATE \_\_\_\_\_

**PETITIONER'S INFORMATION:**

If your address is CONFIDENTIAL from the respondent, please give a safe address where the court can reach you.

1. NAME \_\_\_\_\_

2. ADDRESS \_\_\_\_\_ apt# \_\_\_\_\_

3. HOME PHONE# \_\_\_\_\_ WORK/CELL \_\_\_\_\_ EMAIL \_\_\_\_\_

4. DATE OF BIRTH \_\_\_\_\_ RACE \_\_\_\_\_ SEX \_\_\_\_\_ HGT. \_\_\_\_\_

WEIGHT \_\_\_\_\_ EYE COLOR \_\_\_\_\_ HAIR COLOR \_\_\_\_\_

Driver's License # (Optional) \_\_\_\_\_ SSN # (Optional) \_\_\_\_\_

5. PLACE OF EMPLOYMENT & ADDRESS \_\_\_\_\_

6. BEST TIME(S) TO CONTACT YOU? \_\_\_\_\_

DID THE POLICE ARREST THE RESPONDENT IN THIS CASE? (check one)    YES    NO

**RESPONDENT'S INFORMATION:**

1. NAME \_\_\_\_\_

2. ADDRESS \_\_\_\_\_ apt # \_\_\_\_\_

3. TELEPHONE # HOME \_\_\_\_\_ WORK \_\_\_\_\_ Cell \_\_\_\_\_

4. DATE OF BIRTH \_\_\_\_\_ RACE \_\_\_\_\_ SEX \_\_\_\_\_ HGT. \_\_\_\_\_

WEIGHT \_\_\_\_\_ EYE COLOR \_\_\_\_\_ HAIR COLOR \_\_\_\_\_

Driver's License # (Optional) \_\_\_\_\_ SSN # (Optional) \_\_\_\_\_

5. PLACE OF EMPLOYMENT & ADDRESS \_\_\_\_\_

• When is the best time to serve the other party \_\_\_\_\_ ( am / pm )  
(When are they there?)

• Other address to serve the other party \_\_\_\_\_