

\$50.00 Filing Fee

## FOREST COUNTY POTAWATOMI TRIBAL COURT

### MOTION FOR CONTEMPT

Enter the original case number.

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

#### Petitioner/Joint Petitioner:

Enter the name, address and daytime phone number of the petitioner or joint petitioner from the original case file.

\_\_\_\_\_  
First name                      Middle name                      Last name

\_\_\_\_\_  
Current Mailing Address

\_\_\_\_\_  
City, State, Zip, Daytime Phone Number

v.

#### Respondent/Joint Petitioner:

Enter the name, address, and daytime phone number of the respondent or joint petitioner from the original case file.

\_\_\_\_\_  
First name                      Middle name                      Last name

\_\_\_\_\_  
Current Mailing Address

\_\_\_\_\_  
City, State, Zip, Daytime Phone Number

Check if the FCP-TCSA is a party or not. If you are unsure, you may call the FCP-TCSA.

The Forest County Potawatomi Tribal Child Support Enforcement Agency (FCP-TCSA).

is a party to this action.

is not a party to this action.

### MOTION FOR CONTEMPT

1. The other party was court ordered to the following and has failed to do so:

Check all boxes that apply.  
  
(More choices on the next page.)

- Pay child support in the amount of \$ \_\_\_\_\_ per \_\_\_\_\_.
- Pay maintenance (spousal support) in the amount of \$ \_\_\_\_\_ per \_\_\_\_\_.
- Pay family support in the amount of \$ \_\_\_\_\_ per \_\_\_\_\_.
- Pay uninsured medical bills in the total amount of \$ \_\_\_\_\_.

**(Copies of the unpaid bills are attached.)**

- Return property that was awarded to me.
- Sign/complete final documentation (Quit Claim Deed, QDRO, WI Real Estate Transfer Return, vehicle titles, etc.)
- Pay debts that he/she was ordered to pay.

- Pay the amount of \$ \_\_\_\_\_ to equalize the property settlement.
- Allow me to claim the children as tax exemptions as ordered.
- Provide medical insurance cards and/or other medical records.
- Provide transportation expenses related to placement in the total amount of \$ \_\_\_\_\_.
- Other: \_\_\_\_\_.

Enter the date the current court order or judgment was signed by a court official.

2. The Court order that I am asking to be enforced was dated: \_\_\_\_\_.

3. The facts supporting my reasons for believing that the other party is in contempt are as follows:  See attached.

Enter the facts that support your claims. If you need additional space, mark the box and attach the sheets.

Sign and print your name.

Enter the date on which you signed your name.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print or Type Name

\_\_\_\_\_  
Date

**NOTICE: Once you have completed and signed, bring this motion to the Clerk of Court's for filing. The Clerk will schedule the matter for a hearing and mail a notice to you and the other party.**

FCP Tribal Court  
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