SUPERIOR COURT OF THE DISTRICT OF COLUMBIA **FAMILY COURT**

Parentage & Support Branch

I KINTT ETITIONEK	S NAME	Case No.
V.	PETITIONER,	Case No.
		IV-D
		Judge
PRINT RESPONDENT'S NAME		5
	RESPONDENT.	
	OPPOSITION T	TO MOTION
		e ☐ PLAINTIFF in this case.
Print Your I	NAME, am the	DEFENDANT
Print Your I	NAME, am the Name k that this Court deny the other	DEFENDANT

I,

Request for Relief

I RESPECTFULLY REQUEST that the Court deny the other party's Motion in this case.

I ALSO REQUEST that the Court award any other relief it considers fair and proper.

I Do request an or Do Not	ral hearing in front of the judge on this motion.
I declare under penalty of perjury th	at the foregoing is true and correct.
Rico, the United States Virgin Island	ide the geographic boundaries of the United States, Puerto ds, and any territory or insular possession subject to the ditional requirements must be met prior to signing.
See Super. Ct. Dom. Rel. R. 2(c)(1)(<i>B</i>).
SIGN YOUR NAME	DATE
PRINT YOUR NAME	PHONE NUMBER
HOME ADDRESS 1	EMAIL ADDRESS
HOME ADDRESS 2	
SUBSTITUTE ADDRESS: CHECK BOX	
HAVE WRITTEN SOMEONE ELSE'S ADDR BECAUSE YOU FEAR HARASSMENT OR H	
BLEAGEL TOO TEAK HAKASSIVENT OK I	1/ MAI/1.

POINTS AND AUTHORITIES IN SUPPORT OF OPPOSITION TO MOTION

In support of this Opposition to Motion, I refer to:

- 1. Super. Ct. Dom. Rel. R. 7(b).
- 2. The record in this case.
- 3. The attached supporting document(s), if any.

[LIST ANY DOCUMENTS THAT YOU ARE ATTACHING]

SUPERIOR COURT OF THE DISTRICT OF COLUMBIA FAMILY COURT

Domestic Relations Branch

PRINT PLAINTII	FF'S NAME	DRB	
	PLAINTIFF,	JUDGE:	
v.			
PRINT DEFEND	ANIT'S NAME		
I KINI DEFEND.			
	DEFENDANT.		
	RUI	LE 5	
	PROOF OF SE	RVICE FORM	
IF YOU HAVE ALREA	ADY SERVED THE OTHER PARTY WIT	H A COPY OF YOUR PAPERS, YOU CAN FILL O	UT AND FILI
	VICE FORM AT THE SAME TIME THAT		
	LREADY SERVED THE OTHER PARTY OF OF SERVICE FORM AFTER YOU SE	WITH A COPY OF YOUR PAPERS, YOU MUST I	FILL OUT
		UMUST SERVE A COPY OF THE PAPERS TO TH PY OF THE PAPERS SHOULD BE SERVED DIRE	
1. I certify that on	I served copie	s of	to:
	DATE OF SERVICE		
		NAME(S) OF PLEADING(S)	
the other part	y,NAME OF OTHER PARTY	or	
the other part	y's attorney,	, who represents Y NAME OF OTHER	
	NAME OF ATTORNE	Y NAME OF OTHER	PARTY

<u> </u>	
ADDRESS WHERE THE PAPERS WERE SI	ENT
leaving them with a person	of suitable age and discretion who lived with the other party at:
Address or Description of Place	WHERE PAPERS WERE SERVED
This place is the other party's	PERMANENT RESIDENCE.
	OTHER: SPECIFY OTHER TYPE OF RESIDENCE
•	e person I gave the papers to (Provide as many details as possible):
Their relationship to the oth	
Roommate	Other:
leaving them at the other p	party's attorney's office with the attorney, a clerk or other person in characteristics. H PAPERS
TITLE OF PERSON SERVED	
STREET ADDRESS	CITY, STATE AND ZIP CODE
sending them electronical other party in writing:	lly through CaseFileXpress or some other electronic way agreed to be
	USED)
EMAIL ADDRESS OF OTHER PARTY (IF	
	·
	MPLE: EMAIL, CASEFILEXPRESS)
EMAIL ADDRESS OF OTHER PARTY (IF ELECTRONIC MEANS USED (FOR EXAM some other way agreed to be	MPLE: EMAIL, CASEFILEXPRESS)

I declare under penalty of perjury that the foregoing is true and correct.

If this document is to be signed outside the geographic boundaries of the United States, Puerto Rico, the United States Virgin Islands, and any territory or insular possession subject to the jurisdiction of the United States, additional requirements must be met prior to signing. See Super. Ct. Dom. Rel. R. 2(c)(1)(B).

SIGN YOUR NAME	DATE
PRINT YOUR NAME	PHONE NUMBER
HOME ADDRESS 1	EMAIL ADDRESS
HOME ADDRESS 2	
SUBSTITUTE ADDRESS: CHECK BOX IF YOU	
HAVE WRITTEN SOMEONE ELSE'S ADDRESS	
BECAUSE YOU FEAR HARASSMENT OR HARM.	