

IN RE:

The Marriage / Children Of:

Civil Action No. _____

Petitioner (*First/Middle/Last*)

and

Respondent (*First/Middle/Last*)

MOTION FOR TEMPORARY RELIEF

This Motion is being made by _____.

☐ Yes ☐ No Have you previously requested temporary relief in this case?

☐ Yes ☐ No Has the other party previously requested temporary relief in this case?

I, _____, request the Court to Order the following Temporary Relief.

Check the "Yes" or "No" box in front of the relief you want.

1. ☐ Yes ☐ No Determine custodial responsibility and time to be spent with children.
2. ☐ Yes ☐ No Adopt my Individual Proposed Parenting Plan.
(Check "Yes" only if you have attached a Parenting Plan.)
3. ☐ Yes ☐ No Order a reasonable amount of child support.
4. ☐ Yes ☐ No Order a reasonable amount of spousal support (alimony).
5. ☐ Yes ☐ No Order that health insurance be maintained or established.
6. ☐ Yes ☐ No Order the use and/or possession of the residence and personal property located within the residence.
7. ☐ Yes ☐ No Order the use and/or possession of the automobile(s).
8. ☐ Yes ☐ No Determine responsibility for debts and attorney's fees.
9. ☐ Yes ☐ No Appoint a *guardian ad litem* for a party or a child of the parties.
10. ☐ Yes ☐ No Issue a Protective Order.
11. ☐ Yes ☐ No Other relief requested:

_____.

VERIFICATION

I, _____, after making an oath or affirmation to tell the truth, say that the facts I have stated in this Motion are true to the best of my personal knowledge and belief; and if I have provided information given to me by others, I believe that information to be true.

Signature

Date

This Verification was sworn to or affirmed before me on the _____ day of _____, 20____.

Notary Public / Other Official

My commission expires: _____.

CERTIFICATE OF SERVICE

State of West Virginia

County of _____

I, _____, the person making this Motion for Temporary Relief,
(Print your name here.)

mailed the Motion, together with any attached documents, by first class United States Mail, postage paid to

_____, at the address of
(Opposing party)

_____,
(Opposing party's address)

on the _____ day of _____, 20____.

Signature

Date