County District [Name Of Plaintiff(s) MOTION AND FOR SHOW CAU VERSUS FOR SHOW CAU					
Name Of Plaintiff(s) MOTION ANE FOR SHOW CAU Name Of Defendent(c)	D ORDER				
VERSUS					
Vame Ur Derendant(s)					
Rules Implementing Superior Court M and District Court Family Financial Se					
MOTION					
The undersigned mediator moves the Court to order the parties named below to appear before cause why he/she/they should not be held in contempt for failure to pay mediator's fees as order order dated for Superior Court Mediated Settlement Con District Court Family Financial Settlement	ered by the Court in its nference.				
The undersigned mediator is court-appointed . party selected .					
A mount due for mediation services (MSC Rules 7A & 7B / FFS Rules 7A & 7B) Total time spent in mediation:hours, minutes @ \$ per hour b. Amount due for administrative fee (MSC / EES Rule 7 B)	r.				
b. Amount due for administrative fee (MSC / FFS Rule 7.B)					
c. Amount due for postponement fee (MSC / FFS Rule 7.E)					
d. Amount due for out-of-pocket expenses or other agreed upon fees (please specify below):	\$				
Total amount due Mediator					
2. The parties named below have failed to timely pay the above fees:					
NAME OF PARTY OWING FEES ADDRESS OF PARTY TOTAL	AMOUNT OWED BY PARTY				
SWORN AND SUBSCRIBED TO BEFORE ME					
Signature Of Person Authorized To Administer Oaths Telephone					
Date My Commission Expires Signature Of Mediator	Date				
SEAL Notary					
ORDER ALLOWING SHOW CAUSE HEARING					
The above motion for a Show Cause Hearing: is denied. is allowed. The Court finds that the mediator's fees have not been paid. The parties named above are Ordered to appea and place shown below to show cause why they should not be held in civil contempt for the fees as ordered by the Court. If the Court finds a party in civil contempt, he or she may be cor such civil contempt continues. A party may be entitled to have counsel represent him or her a your own counsel. If you are found to be indigent, the Court will appoint counsel for you, ur counsel.	r in person at the date, time eir failure to pay mediator's mmitted to jail for as long as at the hearing. You may hire				
Date of Hearing Time of Hearing Location of Hearing					
Date Name of Judge (Type or Print) Signature of Judge					
Original-File					

		RETURN OF	SERVICE		
I certify that this Motion and Order was received and served as follows:					
Date Served			Name Of Contemnor		
By personally delivering to the contemnor named above a copy of this Motion and Order.					
By leaving a copy of this Motion and Order at the dwelling house or usual place of abode of the contemnor named above with a person of suitable age and discretion residing therein.					
Name Of Person With Whom Copy Left					
Address Where Copy Delivered Or Left					
Date Accepted			Signature Of Person	Who Served Motion And Order	
Other manner of service	(specify):				
Contemnor WAS NOT se	rved for the fo	llowing reason:			
			Classifier Of Density		
Date Received	Date Of Return		Signature Of Deputy	Sheriff Making Return	
Service Fee \$	Paid	Due	County		
			Name Of Sheriff		