Note: this form is ONLY to be used if there is no more specific form applicable to your situation.

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| NORTH CAROLINACOUNTY OF WAKE | IN THE GENERAL COURT OF JUSTICEDISTRICT COURT DIVISIONFILE NO.        |
|      , Plaintiff,v.     , Defendant. | **MOTION TO** |

The undersigned hereby moves this Court to:

|  |
| --- |
|       |

The undersigned hereby states that the grounds for making this motion include:

|  |
| --- |
|       |

The undersigned hereby requests the following relief:

|  |
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|       |

This the      day of      , 20  .

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Plaintiff Defendant

Attorney for Plaintiff Attorney for Defendant

**CERTIFICATE OF SERVICE**

 I hereby certify that a copy of this Motion to       has been served on the opposing party/counsel in the following manner:

By depositing a copy in the US Mail in a properly addressed, postpaid envelope to:

|  |
| --- |
|       |

By hand delivery to:

By facsimile to:       Fax No.:

Other:

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

 Plaintiff Defendant

Attorney for Plaintiff Attorney for Defendant