NORTH CAROLINA COUNTY OF WAKE		IN THE GENERAL COURT OF JUSTICE DISTRICT COURT DIVISION FILE NO. Assigned Judge:	
Plaintiff,  v.  Defendant.		ORDER TO APPEAR AND SHOW CAUSE	
TO THE PLAINTIFI	F DEFENDANT NAMED	ABOVE:	
	Name and address of Perso	n to be Served:	
-			
-			
•	•		inal contempt for failing to comply with the Motion for Contempt (DATED:),
a copy of which is att	ached. You are hereby ord	dered to appear at the	he dates, times and places set out below to
•	ered may result in the issuar	_	g you in civil or criminal contempt. Your
rantice to appear as order	•	EMENT HEARING	
At this hearing you will be present for this hear	l be advised of your legal rig		sel. The Moving Party is not required to
Date of Hearing	Time of Hearing	Length of Hearing	Wake County Courthouse, Courtroom
	a.m. p.m.		316 Fayetteville Street Raleigh, North Carolina 27601
	SHOW	CAUSE HEARING	G:
Date of Hearing	Time of Hearing	Length of Hearing	Wake County Courthouse, Courtroom
	a.m. p.m.		316 Fayetteville Street Raleigh, North Carolina 27601

This the \_\_\_\_\_\_, 20\_\_\_\_\_\_.

DISTRICT COURT JUDGE

## **CERTIFICATE OF SERVICE**

I hereby certify that a copy of this Order to Appear and Show Cause 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 certified mail, return receipt requested to: [Note: the return receipt green card must be filed with the clerk's office to show proof of service] By Sheriff to: By facsimile to: Fax No.: Date: \_\_\_\_\_ Plaintiff Defendant Attorney for Plaintiff Attorney for Defendant SHERIFF COMPLETES THE FORM BELOW THIS BOX I certify that this Order to Appear and Show Cause was received and served as follows: Date Served: Name of Obligor: By delivering to the Obligor named above a copy of this Order. By leaving a copy of this Order at the dwelling house or usual place of abode of the obligor named above with a person of suitable age and discretion then residing therein. Name And Address Of Person With Whom Copies Left: The obligor **WAS NOT** served for the following reason: Date Received: Name Of Sheriff: Date Of Return: County:

Service Fee:	Deputy Sheriff Making Return: