Superior Court of Justice, Family Court					Court File Number	
	(Name o					
at	(Court office address)				Form 14B: Motion Form	
Name of parties: Applicant: Respondent:	-					
Hearing date:	To Be Determined	Name of ca managemen		The Hon.		
This form is filed applicant	by: respondent	other (Sp.	ecify.)			
with notice to	ent of all persons affect all persons affected – o	opposition expected by the state of the stat	ed	without notice	ll persons affected-unopposed In the support payments under an	
agency can ask the	n assigned to a govern e court to set aside any	ment agency, you order that you ma	must also ay get in th	serve this Notic is motion and ca	ce on that agency. If you do not, the an ask for court costs against you.	
Order that you wa	ant the court to make:					
numbers; and rule no	umbers.)				name of regulation and section	
1. The Notic	ce to the Family Law	Bar and Family	Litigants -	- Tri County; a	and	
2. The Pract	ice Advisory Concerr ects (Effective March	ning the Superior 1, 2022).	Court of	Justice's Bind	ing Judicial Dispute Resolution	
X by relying only	o deal with this motion y on written material. e telephone call (An app	in a heari			ns may attend personally. ance; see rule 14 of the Family Law	
At this motion, I a	m relying on the follo		of the cont	inuing record		
Pages	of the transcript of the evidence of (name of person)					
(Relevant parts of tra	nscript must be highlighte	d.)		7777700 11. TOTAL TOURS	dated	