

Mark this box if this form contains Restricted Information.



CIRCUIT COURT FOR \_\_\_\_\_, MARYLAND

City/County

Located at \_\_\_\_\_ Case No. \_\_\_\_\_

Court Address

Plaintiff \_\_\_\_\_ vs. Defendant \_\_\_\_\_

Street Address \_\_\_\_\_ Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Telephone Number \_\_\_\_\_

**MOTION**  
**(Md. Rule 2-311)**

If this submission contains Restricted Information (confidential by statute, rule or court order) you must file a Notice Regarding Restricted Information Pursuant to Rule 20-201.1 (form MDJ-008) with this submission, and check the Restricted Information box on this form.

I, \_\_\_\_\_,  plaintiff  defendant, move that the court grant the following request in the above-referenced matter:

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

*(Continue to page two (2) if in need of additional writing space.)*

Currently scheduled  hearing  trial date and time: \_\_\_\_\_

Grounds and authorities: \_\_\_\_\_

Request for hearing.

I solemnly affirm under the penalties of perjury that the contents of this document are true to the best of my knowledge, information, and belief.

\_\_\_\_\_ Date \_\_\_\_\_ Signature of Party \_\_\_\_\_

\_\_\_\_\_ Street Address \_\_\_\_\_ Printed Name \_\_\_\_\_

\_\_\_\_\_ City, State, Zip \_\_\_\_\_ Telephone Number \_\_\_\_\_

\_\_\_\_\_ E-mail \_\_\_\_\_ Fax \_\_\_\_\_

**Certificate of Service**

I certify that I served a copy of this motion upon the following party or parties by  mailing first class mail, postage prepaid,  hand delivery, on \_\_\_\_\_ Date \_\_\_\_\_ to:

\_\_\_\_\_ Name \_\_\_\_\_ Street Address \_\_\_\_\_

\_\_\_\_\_ City, State, Zip \_\_\_\_\_

\_\_\_\_\_ Name \_\_\_\_\_ Street Address \_\_\_\_\_

\_\_\_\_\_ City, State, Zip \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_ Signature of Party \_\_\_\_\_

Case No. \_\_\_\_\_

**MOTION, CONTINUED**

Multiple horizontal lines for text entry.

Date

Signature of Party