

Sample for Reference Purposes Only. Forms have bilingual format for your convenience, but must be completed and filed with the court in English. 表格样本，仅供参考。为了提供便利，表格采用双语格式，但向法院提交的表格必须用英语填写。



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

巡回法院, \_\_\_\_\_ 马里兰州

City/County  
市/县

Located at \_\_\_\_\_ Case No. \_\_\_\_\_  
位置 \_\_\_\_\_ 案件编号 \_\_\_\_\_

Court Address  
法院地址

Plaintiff  
原告

vs.  
诉

Defendant  
被告

Address  
地址

Address  
地址

City, State, Zip  
城市、州、邮政编码

Telephone  
电话

City, State, Zip  
城市、州、邮政编码

Telephone  
电话

### REQUEST FOR HEARING or PROCEEDING

#### 听证会或诉讼程序申请

Please schedule the above-captioned case for a hearing or proceeding of the following type:  
请为标题如上所述的案件安排以下类型的听证会或诉讼程序:

- |  |  |
|--|--|
| <input type="checkbox"/> emergency hearing<br>紧急听证会      | <input type="checkbox"/> trial on the merits<br>实体审判   |
| <input type="checkbox"/> scheduling conference<br>排程会议   | <input type="checkbox"/> uncontested hearing<br>无异议听证会 |
| <input type="checkbox"/> pendente lite hearing<br>诉讼中听证会 | <input type="checkbox"/> other: _____<br>其他: _____     |
| <input type="checkbox"/> pretrial conference<br>审前会议     |  |

The following matters are at issue (check all that apply):  
以下事项存有争议(勾选所有适用项):

- |  |  |
|--|--|
| <input type="checkbox"/> divorce<br>离婚             | <input type="checkbox"/> use and possession<br>使用与持有               |
| <input type="checkbox"/> custody<br>监护权            | <input type="checkbox"/> marital property<br>婚姻财产                  |
| <input type="checkbox"/> visitation<br>探视权         | <input type="checkbox"/> marital award<br>婚姻判定                     |
| <input type="checkbox"/> child support<br>子女抚养费    | <input type="checkbox"/> retirement interests<br>退休权益              |
| <input type="checkbox"/> alimony<br>赡养费            | <input type="checkbox"/> attorney's fees / court costs<br>律师费/法院费用 |
| <input type="checkbox"/> other: _____<br>其他: _____ |  |

Date  
日期

Signature  
签名

Attorney Number  
律师编号

Printed Name  
正写姓名

Address

地址

City, State, Zip

城市、州、邮政编码

Telephone

电话

Fax

传真

E-mail

电子邮件

## CERTIFICATE OF SERVICE

### 送达证明

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

Date

本人证明, 本人已将此听证会或诉讼程序申请的副本送达至下方当事人处, 送达方式为 邮寄一类邮件(预付邮资), 亲手送交, 送达日期为 \_\_\_\_\_ :  
日期

Name

姓名

Address

地址

City, State, Zip

城市、州、邮政编码

Name

姓名

Address

地址

City, State, Zip

城市、州、邮政编码

Date

日期

Signature of Party Serving/Attorney/Attorney Number

送达方/律师签名/律师编号