

☐ Mark this box if this form contains Restricted Information.



**DISTRICT COURT OF MARYLAND FOR**

Located at

Court Address

City/County

Telephone

Case No.

**NOTE: Respondent will be served a copy of this completed document. Petitioner does not need to give an address if doing so risks further harm.**

Name of Petitioner on Original Court Order

VS.

Name of Respondent on Original Court Order

Street Address, Apt. No.

Street Address, Apt. No.

City, State, Zip

Home

City, State, Zip

Home

E-mail

Work

Telephone

E-mail

Work

Telephone

**PETITION FOR CONTEMPT – PEACE ORDER  
(Md. Rule 15-206)**

**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 am the ☐ petitioner ☐ respondent in this case.

I state that:

1. On \_\_\_\_\_, this court ordered the following: \_\_\_\_\_  
Date

2. That \_\_\_\_\_ has violated the court order as follows: *(state in detail*  
Name of Violator  
*when, where, and how the violation occurred)* \_\_\_\_\_

I request that this court pass an order finding that \_\_\_\_\_

Name of Violator

is in contempt of court, and granting any other relief that is necessary in this case. ☐ I request that the court send the respondent to jail until the court's order is obeyed.

Date

Signature

Street Address (unless confidential)

Printed Name

City, State, Zip

Fax

E-mail

Home Telephone

Work Telephone

**CERTIFICATE OF SERVICE**

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

Name

Address

City, State, Zip

Name

Address

City, State, Zip

Date

Signature of Party Serving

**DESCRIPTION OF ALLEGED VIOLATOR**

Home Address: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Work Address: \_\_\_\_\_

Work Telephone: \_\_\_\_\_ Employer: \_\_\_\_\_

Work Hours: \_\_\_\_\_ Other Places/Times They Can Be Found: \_\_\_\_\_

**DESCRIPTION:** Driver's License # \_\_\_\_\_ State \_\_\_\_\_ Race \_\_\_\_\_ Sex \_\_\_\_\_ Ht \_\_\_\_\_

Wt \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_ DOB \_\_\_\_\_ FBI # \_\_\_\_\_ SID # \_\_\_\_\_

Complexion \_\_\_\_\_ Tattoos, Marks, Scars \_\_\_\_\_ Other \_\_\_\_\_