

# The Family Court of the State of Delaware

In and For  New Castle  Kent  Sussex County

## REQUEST FOR REVIEW OF A COMMISSIONER'S ORDER

*Petitioner*

*v. Respondent*

Name	Name	File Number
Street Address	Street Address	
Apt. or P.O. Box Number	Apt. or P.O. Box Number	Petition Number
City State Zip Code	City State Zip Code	
Attorney Name and Phone Number	Attorney Name and Phone Number	

(If party seeking the Review of a Commissioner's Order is the Original Petitioner in a **PROTECTION FROM ABUSE** action, please **DO NOT DISCLOSE YOUR ADDRESS** above, as a copy of this request must be mailed to the Respondent.)

- I am the original  Petitioner  Respondent in this action.
- Nature of Proceedings:

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- \_\_\_\_\_, Petitioner herein, appeals the Order Entered by \_\_\_\_\_ Commissioner and dated \_\_\_\_\_

- Objections to the Commissioner's Order (*Please set forth specific objections to the Commissioner's Order, and describe in detail the basis for each objection*):

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- I hereby request that a transcript of the proceedings before the Commissioner be prepared
  - I certify that I will pay all costs associated with the preparation of the transcript.
  - I certify that I have completed and attached an Affidavit to Proceed In Forma Pauperis and Motion to Waive Transcript Fees

