



DISTRICT COURT OF MARYLAND FOR _____ City/County

Located at _____ Court Address Case No. _____

STATE OF MARYLAND
OR

Trial Date _____

Name _____ VS. Name _____

Address _____ Address _____

Plaintiff/Judgment Creditor

Defendant/Judgment Debtor

MOTION

I am the Attorney for Plaintiff Defendant Other - Specify: _____

Request Hearing on Motion

Signature _____ Date _____

Address _____ Name - Printed _____

City _____ State _____ Zip _____ Telephone No. _____

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, on _____ Date _____ to:

Name _____ Address _____

Name _____ Address _____

Name _____ Address _____

Date _____ Signature of Party Serving _____

ORDER

It is hereby ORDERED that:

- the relief requested be granted
- the hearing on Motion be set for _____
- denied

Date _____ Judge _____