NORTH CAROLINA COUNTY OF WAKE		IN THE GENERAL COURT OF JUSTICE DISTRICT COURT DIVISION FILE NO. Assigned Judge:	
Plaintiff, v. Defendant.		ORDER TO APPEAR AND SHOW CAUSE	
	TIFF DEFENDANT NA	MED ABOVE:	
	Name and address of Perso	n to be Served:	
•	•		nal contempt for failing to comply with the Motion for Contempt (DATED:),
a copy of which is atta	ached. You are hereby order	red to appear at the d	ates, times and places set out below to show
cause, if any, why the	Court should not enter an o	rder holding you in	civil or criminal contempt. Your failure to
appear as ordered may	result in the issuance of an G	Order for Arrest.	
At this hearing you will be present for this he	ll be advised of your legal rig	EMENT HEARING ghts regarding couns	G: sel. The Moving Party is not required to
Date of Hearing	Time of Hearing	Length of Hearing	Wake County Courthouse, Courtroom 316 Fayetteville Street Raleigh, North Carolina 27601
	a.m. p.m.		Raieigii, Nortii Caronna 2/001
	SHOW	CAUSE HEARING	: :
Date of Hearing	Time of Hearing ☐ a.m. ☐ p.m.	Length of Hearing	Wake County Courthouse, Courtroom 316 Fayetteville Street Raleigh, North Carolina 27601
This the day	v of	, 20	<u>_</u> :
	_	ISTRICT COURT J	UDGE

CERTIFICATE OF SERVICE

I hereby certify that a cop party/counsel in the following many		Show Cause has been served on the opposing	
☐ By depositing a copy in the US	Mail in a properly addressed, po	ostpaid envelope to:	
☐ By certified mail, return receipt	requested to:		
[Note: the return receipt green car			
By Sheriff to:			
By facsimile to:	Fax No.:		
Other:			
Date:	Plaintiff Attorney for Plaintiff	☐ Defendant ☐ Attorney for Defendant	
SHERIFF CO	OMPLETES THE FORM BEL	LOW THIS BOX	
	Appear and Show Cause was rec	eeived and served as follows:	
Date Served:	Name of Obligor:		
By delivering to the Obligor nar	med above a copy of this Order.		
By leaving a copy of this Order a person of suitable age and discret Name And Address Of Person W	ion then residing therein.	place of abode of the obligor named above with	
Name And Address Of Ferson W	Tui Whom Copies Left.		
☐ The obligor WAS NOT served	for the following reason:		
Date Received:	Name Of Sheriff:		
Date Of Return:	County:		
Service Fee:	Deputy Sheriff Mak	Deputy Sheriff Making Return:	