

2006 PETITION/MOTION FOR CONCILIATION CHECKLIST

1. Case Caption

- | <u>Approved</u> | <u>Rejected</u> | |
|--------------------------|--------------------------|----------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Parties' names |
| <input type="checkbox"/> | <input type="checkbox"/> | Parties' addresses |
| <input type="checkbox"/> | <input type="checkbox"/> | Parties' telephone numbers |
| <input type="checkbox"/> | <input type="checkbox"/> | Assigned case Judge |
| <input type="checkbox"/> | <input type="checkbox"/> | Case number |
| <input type="checkbox"/> | <input type="checkbox"/> | Motion code(s) |

2. Statement of Conciliation

- | <u>Approved</u> | <u>Rejected</u> | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | A statement alleging the facts showing a controversy between the spouses. |
| <input type="checkbox"/> | <input type="checkbox"/> | A statement identifying the child(ren) at issue by name and date of birth, if applicable. |
| <input type="checkbox"/> | <input type="checkbox"/> | A statement requesting the aid of the court to effect reconciliation or any amicable settlement. |

3. Notice of Hearing

- | <u>Approved</u> | <u>Rejected</u> | |
|--------------------------|--------------------------|----------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Name of the hearing officer. |
| <input type="checkbox"/> | <input type="checkbox"/> | Time, date and place of hearing. |

4. Certificate of Service

- | <u>Approved</u> | <u>Rejected</u> | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | A statement of instructions or request for service. |
| <input type="checkbox"/> | <input type="checkbox"/> | Signature of the filing party if <i>pro se</i> or signature of counsel. |

5. Counsel Identification

- | <u>Approved</u> | <u>Rejected</u> | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | If the filing party is represented by counsel, counsel's name, Supreme Court Registration Number, address, and telephone number are provided. |

6. Signature on Motion

- | <u>Approved</u> | <u>Rejected</u> | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | If the filing party is represented, the motion is signed by counsel or if the filing party is appearing <i>pro se</i> the filing party signed the motion. |

7. Number of Copies

- | <u>Approved</u> | <u>Rejected</u> | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Two (2) copies of the motion were provided. |