| [ ]Plaintiff/Petitioner, Pro Se [ ] Defendant/Resp<br>[ ]Attorney for [ ] Plaintiff/Petitioner [ ] Defer          |   |
|---|---|
| IN THE FAMILY COUR  | RT OF THE SECOND CIRCUIT  |
| STAT  | E OF HAWAI`I  |
| Plaintiff/Petitioner,   | ) FC NO ) MOTION AND AFFIDAVIT FOR ) PRE-DECREE RELIEF; SCHEDULING ) ORDER FOR PRE-DECREE RELIEF  |
| VS.  Defendant/Respondent   | ) ATTACHMENTS: ) [] Income and Expense Statement ) [] Asset and Debt Statement ) [] Child Support Guidelines Worksheet ) [] Custody/Visitation Statement ) [] Proposed Parenting Plan |
| MOTION AND AFFIDAN SCHEDULING ORDE  | VIT FOR PRE-DECREE RELIEF R FOR PRE-DECREE RELIEF dant/Respondent in this case. I am referred to as referred to as the Respondent in this motion.                                     |
| Pursuant to the Hawai`i Family Court Rule ´ [ ] 1. An order which awards the te visitation of the parties' childe | emporary legal custody, physical custody and  |
|   |   |

|            |                   |           | This arrangement is best for the parties' child(ren) because:   |
|------------|-------------------|-----------|---|
|            |                   |           |   |
|            |                   |           | y and visitation orders are requested, the attached Custody/Visitation Statement <u>must</u> be completed Income and Expense and Asset and Debt Statement <u>must</u> be attached.  |
| <u>N</u> ( |                   | If child  | An order requiring the Respondent to pay monthly child support of \$ support is requested, the Movant's Income and Expense and Asset and Debt Statement <u>must</u> be  |
|            | ]<br><u>DTE</u> : |           | An order requiring the Respondent to pay monthly alimony of \$  v is requested, the Movant's Income and Expense and Asset and Debt Statement must be attached.  |
| <u>N(</u>  |                   | If contri | An order requiring the Respondent to pay \$ toward my legal expenses.  bution to legal expenses is requested, the Movant's Income and Expense and Asset and Debt be attached.   |
| [          | ]                 | 5.        | An order requiring the Respondent to make the following other payments:   |
|            | DTE:              |           | n order is requested, the Movant's Income and Expense and Asset and Debt Statement <u>must</u> be   |
| [          | ]                 | 6.        | An order which enjoins and restrains either party from transferring, encumbering, wasting, or otherwise disposing of any of his/her real or personal property, except as necessary, over and above current income, for the ordinary course of business or for usual living expenses. Such a restraining order is necessary because: |
| [          | ]                 | 7.        | An order which enjoins and restrains either party from removing the parties' child(ren) from the Island of [ ] Maui [ ] Molokai [ ] Lana`i. Such a restraining order is necessary because:  |
|            |                   |           |   |

| [] 8.        | A<br>[<br>[<br>[ | ] th<br>] co   | order which enjoins and restrains the Respondent from: ] threatening or physically abusing me or any of my relatives who live with me ] contacting me ] residing, continuing to remain at, or going within 50 yards of my residence at: |  |  |
|--------------|------------------|----------------|---|--|--|
|              | [                | _<br>] ha      | having any contact with the minor child(ren):   |  |  |
|              |                  |                | this case except he/she may have contact with the minor child(ren) as llows:  |  |  |
|              | [                | _<br>_<br>] ha | arassing me.  |  |  |
| These orders |                  |                | cessary because: The Respondent has physically abused me in the past as follows (state nature and date of most recent incident of abuse):   |  |  |
|              | [                | ] b.           | The Respondent has threatened to abuse me in the past as follows (state nature and date of most recent threat of abuse):  |  |  |
|              | [                | ] c.           | The Respondent has used weapons against me or threatened to use weapons in the following incidents:   |  |  |
|              | [                | ] d.           | The Respondent owns, intends to obtain, or possesses a firearm and the firearm may be used to threaten, injure or abuse any person as follows:  |  |  |

| As of(date), the firearm(s) was/were located at (state address and specific location therein):   |
|--|
|  |
|  |
| [ ] ii. I believe the Respondent intends to obtain firearms because:   |
| [ ] iii. In the past, the Respondent has [ ] used [ ] threatened to use firearm(s) against me and or the parties' child(ren) as follows (state n and date of the last such use and/or threatened use): |
| [ ] iv I believe that the Respondent may in the future use (a) firearm(c)  |
| [ ] iv. I believe that the Respondent may in the future use (a) firearm(s) to threaten, injure and/or abuse me, the parties child(ren) and/or someone else because:                                    |
| I am concerned about Respondent having contact with the minor child(r  |
| because:   |
| because:   |
| I am concerned about Respondent having contact with:   |

|     |     | [ ] g. I am concerned the Respondent may harass me because:  |
|-----|-----|--|
|     |     |  |
|     |     | [ ] h  |
|     |     |  |
|     |     |  |
| []  | 9.  | I am requesting that the orders I am seeking in Paragraph(s) [ ] 6, [ ] 7 and/or [ ] 8 be granted <u>ex parte</u> . In other words, that the become effective before we have a court hearing on this case. |
| [ ] | 10. | The Respondent's name, address, telephone number, year of birth, and last four of social security number are:  |
|     |     | Name:  |
|     |     | Address:   |
|     |     | Telephone No:  |
|     |     | Year of Birth: Social Security Number: XXX-XX  |
| [ ] | 11. | Other relief sought:   |
|     |     |  |
|     |     |  |
|     |     |  |
|     |     |  |
|     |     |  |

| []   | 12. | • •   | n I also affirm that I am not now, nor have I been in all proceeding other than this case involving the |  |  |
|------|-----|---|---|--|--|
| [ ]  | 13. | My participation as a party in other legal proceedings involving the Respondent is/has been as follows: |   |  |  |
|      |     | (Case Name)   |   |  |  |
|      |     | (Case Number)   | (Location of Court)   |  |  |
|      |     | (Date Filed)  | (Date Concluded)  |  |  |
|      |     | (Type of Case)  |   |  |  |
|      |     | (Case Name)   |   |  |  |
|      |     | (Case Number)   | (Location of Court)   |  |  |
|      |     | (Date Filed)  | (Date Concluded)  |  |  |
|      |     | (Type of Case)  |   |  |  |
|      |     | are under penalty of perjury that the in not complete to the best of my knowled                         | nformation in this motion and all of the attachments to it is edge and belief.                          |  |  |
| Date |     | <del></del>   | Signature of Movant   |  |  |
|      |     |   | Printed Name of Movant  |  |  |
| Date |     |   | Signature of Movant's Attorney  |  |  |
|      |     |   | Printed Name of Movant's Attorney   |  |  |



Americans with Disabilities Act Notice

If you need an accommodation for a disability when participating in a court program, service, or activity, please contact the ADA Coordinator as soon as possible to allow the court time to provide an accommodation:

Call (808) 244-2855 FAX (909) 244-2023 (27)

Call (808) 244-2855 FAX (808) 244-2932 OR Send an e-mail to: adarequest@courts.hawaii.gov. The court will try to provide, but cannot guarantee, your requested auxiliary aid, service or accommodation.