

**STATE OF NORTH CAROLINA**

Court File No.

Case Type (Code)

IV-D Case No.

\_\_\_\_\_ County

In The General Court Of Justice  
District Court Division

Name Of Plaintiff

**ORDER TO APPEAR AND SHOW CAUSE  
FOR FAILURE TO COMPLY WITH  
SUPPORT ORDER  
AND ORDER TO PRODUCE RECORDS AND LICENSES**

G.S. 50-13.9(d)

**VERSUS**

Name Of Defendant

Name And Address Of Obligor

Name And Address Of Obligor's Employer

Service Address (If Different From Above)

Drivers License No.

Date Of Birth

Race

Sex

Telephone No. (Home)

Telephone No. (Work)

**TO THE OBLIGOR NAMED ABOVE:**

The undersigned finds that there is probable cause to believe that you are in contempt for failure to make the support payments as directed by order of this Court. Your account is now in arrears in the amount indicated below. Additional payments may be due prior to the hearing date.

You are hereby **ORDERED TO APPEAR** in person at the date, time and place indicated below to show cause why you should not be subject to income withholding or held in contempt of court for failing to comply with the lawful orders of this Court. The Court may order income withholding if you are delinquent in an amount equal to the support for one month. Income withholding, if implemented, will apply to your current employer and all subsequent employers and will be continued until terminated pursuant to G.S. 110-136.10. If income withholding is not an available or adequate remedy, the Court may proceed with contempt, imposition of a lien or other available, appropriate enforcement remedies. If the Court finds you in civil contempt, you may be committed to jail for as long as such civil contempt continues. If the Court finds you in criminal contempt, you may be fined up to \$500, imprisoned for up to 30 days, or both. You are entitled to be represented by an attorney. You may be eligible for court appointed counsel if you are indigent.

The Court may order the revocation of some or all of your licensing privileges if you are delinquent in an amount equal to the support due for one month.

**You are further ORDERED to bring with you records and information relating to your employment and the amount and sources of your disposable income, and all your state-issued professional, recreational and driving licenses. FAILURE TO APPEAR OR FAILURE TO BRING THESE RECORDS AND INFORMATION WILL BE GROUNDS FOR CONTEMPT.**

Date To Appear

Time

 AM PM

Place Of Hearing

Amount Of Delinquent Support

Date Of Support Order

\$

(As Of

← Date)

Name Of Each Child For Whose Benefit Support Is Due

**NOTICE TO SHERIFF:**

This Order To Appear And Show Cause must be returned to the Clerk no later than the date shown below:

Date

Signature

 Assistant CSC Clerk Of Superior Court District Court Judge

**RETURN OF SERVICE**

I certify that this Order To Show Cause was received and served as follows:

<i>Date Served</i>	<i>Time Served</i> <input type="checkbox"/> AM <input type="checkbox"/> PM	<i>Name Of Obligor</i>
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- By delivering to the obligor named above a copy of this Order.
- By leaving a copy of this Order at the dwelling house or usual place of abode of the obligor named above with a person of suitable age and discretion then residing therein.

*Name And Address Of Person With Whom Copies Left*

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- The obligor WAS NOT served for the following reason:

<i>Date Received</i>	<i>Signature Of Deputy Sheriff Making Return</i>
<i>Date Of Return</i>	<i>Name Of Sheriff (Type Or Print)</i>
	<i>County Of Sheriff</i>

**CERTIFICATE OF MAILING**

A copy of this Order was mailed by certified mail, return receipt requested, on the date shown below to the obligor shown on the reverse side.

<i>Date Of Mailing</i>	<i>Signature</i>
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**NOTE:** Attach return receipt.

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| <input type="checkbox"/> Deputy CSC              | <input type="checkbox"/> Assistant CSC |
| <input type="checkbox"/> Clerk Of Superior Court | <input type="checkbox"/> IV-D Agency   |