

NORTH CAROLINA
COUNTY OF WAKE

IN THE GENERAL COURT OF JUSTICE
DISTRICT COURT DIVISION
FILE NO. _____

Assigned Judge: _____

_____, Plaintiff, v. _____, Defendant.

**AFFIDAVIT FOR JUDICIAL
ASSIGNMENT AND
NOTICE OF HEARING**

The undersigned certifies the following:

1. That I am the Plaintiff/Plaintiff's attorney Defendant/Defendant's attorney in this matter.
2. That the attached Complaint Answer/Counterclaim Motion in the Cause Motion for Order to Show Cause is:
 - A newly filed action/matter.
 - A filing in which there is a pending action involving the same parties or family in this District.
 - A filing in which there is a resolved action involving the same parties or family in this District.
 - A filing in which there is a pending or resolved action involving the same parties or family in other districts in North Carolina or another state.
 - A Motion for Order to Show Cause for violation of a Domestic Violence Protective Order.
3. Wake County District Court Judge _____ is or was the assigned judge in a pending or prior civil action in this District involving the same parties and/or family members (including either parties' children) and/or related family issues.
4. That the issue(s) in this Complaint/Answer/Counterclaim/Motion in the Cause/Motion to Show Cause is/are: *(check all that apply)*

<input type="checkbox"/> Custody	<input type="checkbox"/> Child Support	<input type="checkbox"/> Divorce from Bed & Board
<input type="checkbox"/> Post-Separation Support	<input type="checkbox"/> Alimony	<input type="checkbox"/> Divorce
<input type="checkbox"/> Equitable Distribution	<input type="checkbox"/> Interim Distribution	<input type="checkbox"/> Attorneys' Fees
<input type="checkbox"/> Other: _____		
5. An interpreter is needed to be present for court proceedings.
 YES NO
If yes, what language(s) does the party speak? _____

This the _____ day of _____, 20_____.

- | | |
|-------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Plaintiff | <input type="checkbox"/> Defendant |
| <input type="checkbox"/> Attorney for Plaintiff | <input type="checkbox"/> Attorney for Defendant |

Daytime Telephone Number: _____

Email Address: _____

NOTICE OF HEARING

PLEASE TAKE NOTICE THAT a hearing has been scheduled in this matter on the date and time indicated below, or as soon thereafter as the Court can hear this matter, in the courtroom indicated.

FAMILY COURT COMPLETES THIS BOX			
Judge Assigned: <input type="checkbox"/> Bell <input type="checkbox"/> Ratledge <input type="checkbox"/> Hauter <input type="checkbox"/> Stevens <input type="checkbox"/> Other: _____			
<input type="checkbox"/> Temporary Hearing for Custody	Date: _____	Time: _____	Courtroom: _____
<input type="checkbox"/> Temporary Hearing for Child Support	Date: _____	Time: _____	Courtroom: _____
<input type="checkbox"/> Post-Separation Support	Date: _____	Time: _____	Courtroom: _____
<input type="checkbox"/> Scheduling and Discovery Conference (ED)	Date: _____	Time: _____	Courtroom: _____
<input type="checkbox"/> Other: _____	Date: _____	Time: _____	Courtroom: _____
FCCC:	Date:		

CERTIFICATE OF SERVICE

I hereby certify that a copy of this Affidavit for Judicial Assignment and Notice of Hearing has been served on the opposing party/counsel in the following manner:

By depositing a copy in the US Mail in a properly addressed, postpaid envelope to: _____

By hand delivery to: _____

By facsimile to: _____ Fax No.: _____

Other: _____

Date: _____

- | | |
|-------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Plaintiff | <input type="checkbox"/> Defendant |
| <input type="checkbox"/> Attorney for Plaintiff | <input type="checkbox"/> Attorney for Defendant |