Superior	Court	of	Washington,	County	/ of
Ouponor	ovuit	<b>~</b> .	maonington,	ocum	,

In re:	
Petitioner/s (as listed on the Petition):	No
	Motion to Allow Testimony
And Respondent/s (as listed on the Petition):	Motion to Allow Testimony (About Modifying Child Support) (MTAT)

# Motion to Allow Testimony (About Modifying Child Support)

### To both parties:

**Deadline!** Your papers must be filed and served by the deadline in your county's Local Court Rules, or by the State Court Rules if there is no local rule. Court Rules and forms are online at <u>www.courts.wa.gov</u>.

If you want the court to consider your side, you **must**:

- File your original documents with the Superior Court Clerk; AND
- Give the Judge/Commissioner a copy of your papers (if required by your county's Local Court Rules); AND
- Have a copy of your papers served on all other parties or their lawyers; AND
- Go to the hearing.

The court may not allow you to testify at the motion hearing. Read your county's Local Court Rules, if any.

Bring proposed orders to the hearing.

### To the person filing this motion:

You must schedule a hearing on this motion. You may use the *Notice of Hearing* (form FL All Family 185) unless your county's Local Court Rules require a different form. Contact the court for scheduling information.

### To the person receiving this motion:

If you do not agree with the requests in this motion, file a *Response to Motion to Allow Testimony* (form FL Modify 504) explaining why the court should not approve those requests. You may file other written proof supporting your side.

2.	I ask the court to allow testimony about modifying the Child Support Order because the
	court needs to hear testimony to make a fair decision.

**3.** This is an extraordinary case because (check all that apply):

RCV	N 26.	09.175(6) Motion to Allow Testimony
□ tł	ne fo	llowing address (this does <b>not</b> have to be your home address):
□ n	ny la	wyer's address, listed below.
l agr	ee t	o accept legal papers for this case at <i>(check one):</i>
		aking this motion signs here Print name here
Sign	ed a	t (city and state): Date:
-		on this form are true.
		under penalty of perjury under the laws of the state of Washington that the facts I have
Pers	son	making this motion fills out below:
4.	l ha	ave attached the following documents to support this motion ( <i>specify</i> ):
		Other (explain):
		(Explain):
		There are very complex issues in this case that require an expert witness to testify.
		complete. More discovery will not solve this problem. ( <i>Explain</i> ):
		The information gathered through the discovery process is inconsistent, or is not
		There are substantial questions of credibility on a major issue. (List the major issue and reasons why the court should not rely on the information provided.):

street address or PO box	city	state zip	
( <b>Optional)</b> email:			

(If this address changes before the case ends, you **must** notify all parties and the court clerk in writing. You may use the Notice of Address Change form (FL All Family 120). You must also update your Confidential Information Form (FL All Family 001).)

## Lawyer (if any) fills out below:

for an order to seal other documents.

Lawyer signs here	Print name and WSBA No.	Date
Lawyer's street address or PO box	city	state zip
Email (if applicable):		
<i>Warning!</i> Documents filed with the Financial, medical, and confidential re can only be seen by the court, the othe filing them separately, using a <i>Sealed</i>	ports, as described in General Rule er party, and the lawyers in your cas	e 22, <b>must</b> be sealed so they se. Seal those documents by