| Superior Court of Washingtor | n, County of |
|---|--|
| In re the marriage / domestic partnership of: | |
| Petitioner (person who started this case): | No |
| And Respondent (other spouse / partner): | Motion for Temporary Family Law Order (MTTO) [] and Restraining Order (MTTMO) |

Motion for Temporary Family Law Order [] and Restraining Order

Use this form in marriage/domestic partnership cases only. For other cases, use FL Parentage 323 or FL Modify 623, depending on the type of case.

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 www.courts.wa.gov.

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 statement (using form FL All Family 135, *Declaration*) explaining why the court should not approve those requests. You may file other written proof supporting your side, and propose your own *Parenting Plan* or *Child Support Worksheets*.

| Childre | en | | | | |
|---|--|--|---|----------------------------|--|
| [] No | request. | | | | |
| [] I wa | ant my children under 18 lis | sted below t | o be included in the court's orders | : | |
| | Child's name | Age | Child's name | Age | |
| 1. | | | 2. | | |
| 3. | | | 4. | | |
| 5. | | | 6. | | |
| Active | duty military | · · · · · · · · · · · · · · · · · · · | | <u>.</u> | |
| commissioned corps of the Public Health Service and NOAA. The state Service Members' Civil Relief Act covers those service members listed above who are either stationed in or residents of Washington state, and their dependents, except for the commissioned corps of the Public Health Service and NOAA.) | | | | | |
| |] My spouse/domestic partner is not covered by the state or federal Servicemembers Civil Relief Acts. | | | | |
| | My spouse/domestic partner is covered by the [] state [] federal Servicemembers Civil Relief Act. | | | | |
| [] | member or dependent from I ask the court to approve | m respondii temporary would be v | e act – Military duty may keep the ng or coming to the hearing on thi orders even if the covered persor very unfair (a manifest injustice) n | is motion. n asks for a | |
| | | | | | |
| Care a | nd safety of children (che | eck all that a | apply) | | |
| [] No | request. | | | | |
| [] Apı | prove the parenting plan pro | oposed by | [] me [] my spouse/domestic pa | artner. | |
| [] Ord Sta | | tner not to t | ake the children listed in 2 out of V | Vashington | |
| bes | | • | to the court about what is in the coerson's fees. This person should | | |
| [] | Guardian ad Litem (GAL) o | r Evaluator/ | Investigator as chosen by the cou | rt. | |
| | Guardian ad Litem (GAL). | | | | |
| | Evaluator/Investigator. | | | | |
| [] | (Name): | | | | |

| [] Other: | | | |
|---|--|--|--|
| | | | |
| | | | |
| | Provide support | | |
| | [] No request. | | |
| | [] Order child support according to the Washington state child support schedule. | | |
| | [] Order (check one): [] me [] my spouse/domestic partner to pay spousal support (maintenance/alimony) in the amount of: \$ every month until (date event): | | |
| | Family home | | |
| [] No request. | | | |
| | [] Stay in the home | | |
| [] I want to continue living in the family home. | | | |
| [] My spouse/domestic partner may continue living in the family home.[] Move out | | | |
| | | | |
| Use of property | | | |
| [] No request. | | | |
| [] Order that I can possess and use (specify): | | | |
| | [] property in my possession now. | | |
| | [] vehicle(s): | | |
| | [] other: | | |
| | | | |
| | Order that my spouse/domestic partner can possess and use (specify): | | |
| [] property in their possession now. | | | |
| [] vehicle(s): | | | |
| [] other: | | | |
| | [] Guion. | | |
| | | | |
| | Protect property | | |
| | [] No request. | | |

| 9. | Household expenses | | | | |
|-----|---|---------------------------------|--|--|--|
| | | | | | |
| | [] No request. | | | | |
| | [] Order household expenses to be paid as follows: | | | | |
| | Expense | Who should pay | | | |
| | [] First Mortgage | [] Petitioner [] Respondent | | | |
| | [] Second Mortgage/Line of Credit | [] Petitioner [] Respondent | | | |
| | [] Rent or Lease Payment | [] Petitioner [] Respondent | | | |
| | [] Utilities | [] Petitioner [] Respondent | | | |
| | [] Homeowner's Insurance | [] Petitioner [] Respondent | | | |
| | [] Property Taxes | [] Petitioner [] Respondent | | | |
| | [] Vehicle (specify): | [] Petitioner [] Respondent | | | |
| | [] Vehicle (specify): | [] Petitioner [] Respondent | | | |
| | [] Child Care | [] Petitioner [] Respondent | | | |
| | [] Other: | [] Petitioner [] Respondent | | | |
| 10. | Divide debts | | | | |
| | [] No request. | | | | |
| | [] Order my spouse/domestic partner and me to: | | | | |
| | Each be responsible for his/her own future debts, in loans, security interest, and mortgages. | cluding debt from credit cards, | | | |
| | Divide our debts as follows (list debts and who should | pay each one): | | | |
| | Debt (describe) | Who should pay | | | |
| | 1. | [] Petitioner [] Respondent | | | |
| | 2. | [] Petitioner [] Respondent | | | |
| | 3. | [] Petitioner [] Respondent | | | |
| | 4. | [] Petitioner [] Respondent | | | |
| | 5. | [] Petitioner [] Respondent | | | |
| | 6. | [] Petitioner [] Respondent | | | |
| 44 | | [] r citioner [] r capondent | | | |
| 11. | Do not change insurance No request. | | | | |

spouse/domestic partner or any child listed in **2**. That means they must not transfer, cancel, borrow against, let expire, or change the beneficiary of any policy.

Who should pay

Pay insurance premiums as follows (list policies and who should pay each one):

| | 1 0.10) (4000.100) | | | | |
|-----|---|-------------------------------------|--|--|--|
| | 1. | [] Petitioner [] Respondent | | | |
| | 2. | [] Petitioner [] Respondent | | | |
| | 3. | [] Petitioner [] Respondent | | | |
| 12. | Pay fees and costs | | | | |
| | [] No request. | | | | |
| | [] Order my spouse/domestic partner to: | | | | |
| | [] Pay my lawyer's fees for this case. <i>Amount:</i> \$ | | | | |
| | Make payments to <i>(name)</i> : | | | | |
| | [] Pay other professional fees and costs for this case. <i>Amount:</i> \$ | | | | |
| | to (name): | | | | |
| | for (purpose): | _ | | | |
| 13. | Restraining Order | | | | |
| | [] No request. | | | | |
| | [] The Court already signed a <i>Restraining Order</i> on <i>(date):</i> in this case. [] I am not asking the court to make any changes to this <i>Restraining Order</i> . | | | | |
| | I ask the Court to remove (terminate) this <i>Restraining Order</i> . | | | | |
| | [] I ask the Court to change this Restraining Order as fol | lows (specify): | | | |
| | | | | | |
| | [] I ask the Court for a Restraining Order (form FL All Family 150) that orders my spouse/domestic partner to obey the restraints and orders checked below. (Check all that apply; also check the "and Restraining Order" boxes in the form titles on page 1): | | | | |
| | [] Do not disturb – Do not disturb my peace or the peac | e of any child listed in 2 . | | | |
| | [] Stay away - Do not go onto the grounds of or enter m or school, and the daycare or school of any child listed | • | | | |
| | [] Also, do not knowingly go or stay within f | eet of my home, workplace, | | | |

[] Do not hurt or threaten

Policy (describe)

• Do not assault, harass, stalk, or molest me or any child listed in 2; and

vehicle, or school, or the daycare or school of any child listed in 2.

 Do not use, try to use, or threaten to use physical force against me or the children that would reasonably be expected to cause bodily injury. **Warning!** If the court makes this order, the court must consider if weapons restrictions are required by state law; federal law may also prohibit the Restrained Person from possessing firearms or ammunition.

| | [] Prohibit weapons and order surrender |
|----|---|
| | Not to access, possess, have in their custody or control, purchase, receive, or attempt to purchase or receive firearms, other dangerous weapons, or concealed pistol licenses until the Order ends, and |
| | Immediately surrender any firearms, other dangerous weapons, and any concealed pistol licenses that they possess or control to (check one): [] the police chief or sheriff. [] their lawyer. [] other person (name): |
| | |
| | Other: |
| | |
| | |
| | Other temporary orders |
| 4. | |
| 4. | [] No request. |
| 4. | |
| 4. | [] No request. [] (Specify): |
| 4. | |

> Reasons for my requests

- 15. Why are you asking the court for the orders you checked above? (Explain):
 - If you need additional space use the Declaration form FL All Family 135.
 - If you are asking for a parenting plan, also fill out the *Information for Temporary Parenting Plan*, form FL All Family 139, and a proposed *Parenting Plan*, form FL All Family 140.
 - If you are asking for child support, also fill out the Child Support Worksheets. If you
 have received public assistance for any child in this case, also fill out the Public
 Assistance Declaration, form FL All Family 132.
 - If you are asking for any order involving money (including child support), also fill
 out the *Financial Declaration*, form FL All Family 131, and file the required financial
 records.
 - If you are asking to prohibit weapons or order surrender, give your reasons at the end of this section.
 - If you are asking to change an earlier temporary order, give the date of the earlier order and explain how circumstances have changed since then.

| ∏ Re | asons for "Prohibit weapons and order surrender" request (check all that apply) |
|------|---|
| | |
| | (Name): has used, displayed, or threatened to use a firearm or other dangerous weapon in a felony. (Describe): |
| | |
| | |
| [] | (Name): previously committed an offense |
| LJ | (Name): previously committed an offense making them ineligible to possess a firearm under RCW 9.41.040. (Describe): |
| | |
| | |

| [] | | sion of firearm presents a | | |
|--------------------------------|--|---|--|--|
| | serious and imminent threat (harm that may happen immediately) to public health or safety, or to the health or safety of any individual. (Describe): | | | |
| | | | | |
| Person asl | king for this order fills | s out below: | | |
| | der penalty of perjury un this form are true. | der the laws of the State of Was | shington that the facts I have | |
| Signed at (c | ity and state): | | Date: | |
|) | | | | |
| Person asking | g for this order signs here | Print name here | | |
| I agree to ac | ccept legal papers for this case at (check one): | | | |
| [] my lawye | yer's address, listed below. | | | |
| [] the follow | ving address <i>(this does i</i> | not have to be your home addre | ss): | |
| | dress or PO Box | City | State Zip | |
| use the No | otice of Address Change form | e ends, you must notify all parties and (FL All Family 120). You must also up plves parentage or child support.) | | |
| Lawyer (if | any) fills out below: | | | |
| • | | | | |
| Lawyer signs | here | Print name and WSBA No. | Date | |
| Lawyer's Stre | et Address or PO Box | City | State Zip | |
| Email (if appli | icable): | | | |
| and confiden the other part | cuments filed with the court a tial reports, as described in G ty, and the lawyers in your cas | re available for anyone to see unless the Seneral Rule 22, must be sealed so the se. Seal those documents by filing them | ey are sealed. Financial, medical, ey can only be seen by the court, separately, using a <i>Sealed</i> cover | |