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TIMOTHY W. FITZGERALD SPOKANE COUNTY CLERK Filso

2023 SEP 25 P 2: 49

TIMUTEY W. FITZGERALD SPOKAKE COUNTY CLERK

Superior Court of Washington, County of <u>SPOKANE</u>

In re:

Petitioner/s (person/s who started this case):

Siringa Surina

Motion for Contempt Hearing (MTSC)

Aaron Surina

Aaron Surina

## **Motion for Contempt Hearing**

## 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:

To schedule a hearing on this motion, you must ask the court to sign the Order to Go to Court for Contempt Hearing (Order to Show Cause) (FL All Family 166). This Order may be signed "ex parte" (without the other party there). Contact the Superior Court Clerk's office for the procedure in your county. You must have this Motion and the Order to Go to Court personally served (by someone else) on the other party.

## 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.

L	dec	la	re	٠
	ucc	ıa		

**1.** I am a *(check one):*  $\square$  Petitioner  $\square$  Respondent in this case.

RCW 26.09.160 Mandatory Form (05/2016) FL All Family 165 Motion for Contempt Hearing

2.	The other party, (name): 5 in Ringle Suciona, did not obey the orders checked below that were signed by the court on (date): 10 and 10
	☐ The child support order including (check all that apply): ☐ pay (amount) \$ per month.
	provide health insurance for the children and pay health care costs not covered by insurance.
	pay for the children's day care, education, long-distance transportation, and other expenses.
	Describe how the order was not obeyed, including dates and amounts:  The Aaron unable to file tasses because petitioner whentwrailly causing issues and delaying tasses
	Refuse to provide Andrew's 8332. SAYS SHE GETS TO CHOOSE WHO SHE CHAMIS NOT THE COMEN
	The spousal support (maintenance/alimony) order to pay (amount) \$ per month.
	Describe how the order was <b>not</b> obeyed, including dates and amounts:
	The parenting plan, residential schedule or custody order.
	Describe how the order was <b>not</b> obeyed including dates and times:
	☐ The restraining order.
	Describe how the order was <b>not</b> obeyed including dates and times:
	· · · · · · · · · · · · · · · · · · ·

	Other order (specify): Ture 3	13,2023	Judge	LOIXON D	enered	
	Describe how the order was no	t obeyed inclu	ding dates,	times, and amou	nts, if any:	
	Petitionersher	ould cla	im Ar	drew sur	una FOR	2021
	ailing resemban	+ a 2 a a a	andi	2022 6	8 to	YORDER
	of the petitioner to she Refuse to sign Request - I ask the court to:	5150 8	832 To	RMS. AIL A	Hempts	made
_	she Refuse to sign	, she mis	Bead 4	he judgeon	9/14/203	d forms
3.						
	<ul> <li>Order the other party to go to conjudgment and orders I've reque</li> </ul>		ny the cou	π snould not app	rove tne	
	<ul> <li>Find the other party in contemp</li> </ul>					
	<ul> <li>Approve the requests checked</li> </ul>	below.				
4.	Money judgment requested					
7.	☐ No request.					
	I ask the court to approve a judg	mont ordering	the other r	party to pay (chac	k all that annly)	
	Task the court to approve a judg	T			_	, 
		Amount	Interest	From (date)	To (date)	
	Past due child support	\$	\$			
	Past due medical support  (health insurance & health care	\$	\$			
	costs not covered by insurance)					
	☐ Past due children's expenses	\$	\$			
	for: day care					
	☐ education☐ long-distance transp.					
	other					
	Past due spousal support	\$	\$			
	Other (specify): WASE R	\$ , 201	\$	2020	2022	
	LOST STIMULIS	11,086				
5.	Fines and penalties (remedial	sanctions) re	equested			
	☐ Does not apply.	ŕ	-			
	Approve other reasonable orde	rs, including o	rdering the	other party to:		
	<ul> <li>Pay a fine – civil penalty</li> </ul>	(required for	violations of	of parenting time	orders),	
	<ul> <li>Pay a fine for each day</li> </ul>	the court's ord	ders are not	followed,		
	<ul> <li>Meet certain conditions</li> </ul>	to stop being	in contemp	t (purge the conte	empt),	
	<ul> <li>Pay my lawyer fees and</li> </ul>	costs, if any,				
	<ul> <li>Give me make-up parer</li> </ul>					
	<ul> <li>Any other relief allowed Chapter 26.10 RCW, Ch</li> </ul>				9 RCW,	
	Send the other party to jail.					
						6
	26.09.160 Motio latory Form (05/2016)	n for Contempt F	tearing			
	Comily 165	n 2 of 4				_

declare under penalty of perjury un rovided on this form are true.  igned at (city and state):  erson making this motion signs here agree to accept legal papers for the	nder the laws of the state of Washing  Da  ARON  Print name here	gton that the facts I ha
eclare under penalty of perjury unovided on this form are true.  Igned at (city and state):  Ison making this motion signs here  Igree to accept legal papers for the	nder the laws of the state of Washing  Da  ARON  Print name here	
peclare under penalty of perjury under ovided on this form are true.  Igned at (city and state):  Ison making this motion signs here  Igree to accept legal papers for the	nder the laws of the state of Washing  Da  ARON  Print name here	
gned at (city and state):  gree to accept legal papers for the	Dane JWA Da  AARON  Print name here	
gned at (city and state):  erson making this motion signs here agree to accept legal papers for the	Print name here	ate: 9/22/2 Surina
erson making this motion signs here agree to accept legal papers for the	Print name here	Surina
agree to accept legal papers for th	Print name here	SURINA
agree to accept legal papers for th		
	ie caee at <i>(check che):</i>	
my lawyer's address, listed belowing address, this dead		
- ,	not have to be your home address)	<u> </u>
POBOX 30123 street address or PO box	Spakane (	state zip
(Optional) email: Am5	SURING ARA	otato zip
awyer (if any) fills out below:		
awyer signs here	Print name and WSBA No.	Date
wyei signs nere	Time hame and WODA No.	Baic
wyer's street address or PO box	city	state zip
nail <i>(if applicable):</i>		
	are available for anyone to see unless they	1 1