

**THE STATE OF NEW HAMPSHIRE**  
**JUDICIAL BRANCH**  
<http://www.courts.state.nh.us>

Court Name: \_\_\_\_\_

Case Name: \_\_\_\_\_

Case Number: \_\_\_\_\_  
(if known)

***EX PARTE (EMERGENCY) MOTION***

Your Name: \_\_\_\_\_

Other Party's Name: \_\_\_\_\_

A. What *ex parte* orders do you want the court to make?

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B. Describe the reasons that you feel are important supporting your request for *ex parte* orders and describe the immediate and irreparable injury, loss or damage that will happen to you, your child(ren) or your property if the *ex parte* orders are not granted before the other party has an opportunity to be heard on this matter. List each separately.

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C. Notification:

1. What efforts have you made to notify the other parties of your appearance at court today and your request for *ex parte* orders?

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2. What were the results of those efforts?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify that on this date I provided a copy of this document to \_\_\_\_\_ (other party) or to \_\_\_\_\_ (other party's attorney) by:  Hand-delivery OR  US Mail OR  E-mail (E-mail only by prior agreement of the parties based on Circuit Court Administrative Order).

I verify the truth and accuracy of all facts alleged within this document to the best of my belief and further verify that all facts contained in this document are alleged in good faith. By affixing my signature to this document I acknowledge my understanding that any false statements made in this document may subject me to criminal penalties and the penalties of perjury which may include a fine or imprisonment or both.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Attorney for Party (if any)

\_\_\_\_\_  
Signature of Party

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name, Address, E-mail, and Phone Number of Attorney