

STATE OF NORTH DAKOTA
COUNTY OF _____

IN DISTRICT COURT
_____ JUDICIAL DISTRICT

Plaintiff,

vs

Defendant.

)
)
)
)
)
)
)

Case No. _____

**NOTICE OF MOTION FOR
VISITATION ASSISTANCE**

TO: _____
(First) (Middle) (Last)

(Street Address)

(City) (State) (Zip Code)

PLEASE TAKE NOTICE that oral arguments on the Motion for Visitation Assistance will be heard before the Court on the _____ day of _____, 20____, at _____ o'clock ____m. or as soon thereafter as the matter may be heard.

PLEASE TAKE FURTHER NOTICE that your response must be in the mail and filed with the Court within thirteen (13) days of the mailing of this Motion for Visitation Assistance. The Court may in its discretion disregard any response served or filed with the Court after that date.

Dated this _____ day of _____, 20____

(Signature)

(Printed Name)

(Address)

(City, State, Zip Code)

(Telephone Number)

___ 6. Change the existing visitation order to provide for the transportation of the child(ren) for visitation.

___ 7. Change the existing visitation order to require supervised visitation.

___ 8. Change the existing visitation order to allow unsupervised visitation.

III. Costs.

___ 9. Direct the other party to pay me for my Court fees and costs resulting from having to bring this motion or from the other party's wrongful failure to follow the existing Court order.

10. A brief and an affidavit in support of this motion are attached.

Dated this ___ day of _____, 20___

(Signature)

(Printed Name)

(Address)

(City, State, Zip Code)

(Telephone Number)

STATE OF NORTH DAKOTA
COUNTY OF _____

IN DISTRICT COURT
_____ JUDICIAL DISTRICT

Plaintiff,

vs

Defendant.

)
)
)
)
)
)
)

Case No. _____

**BRIEF IN SUPPORT OF MOTION
FOR VISITATION ASSISTANCE**

**FOR ITEMS 1-8 IN PARTS I, II AND III, CHECK ONLY THOSE THAT APPLY – THE
SAME AS YOU CHECKED ON YOUR MOTION FOR VISITATION ASSISTANCE.**

I. If you only want the Court to enforce the current order.

___ 1. Direct the other party to obey the existing visitation order.

Skip to Item III.

II. If you want the Court to change the visitation order.

___ 2. I believe that the changes in the current visitation schedule I am requesting are in the best interest of the minor child(ren) for reasons that were unknown to the Court, or that have arisen since the last order. Those reasons are:

I am requesting that the Court:

___ **3.** Change the existing visitation order from “reasonable visitation” to the following specific visitation schedule:

Weekends: _____

Week nights or after school: _____

Holidays: _____

Summer: _____

School Holidays: _____

Telephone contact: _____

Mail/electronic contact: _____

Other: _____

___ **4.** Change the existing visitation order to the following specific visitation schedule:

Weekends: _____

Week nights or after school: _____

Holidays: _____

Summer: _____

School Holidays: _____

Telephone contact: _____

Mail/electronic contact: _____

Other: _____

___ 5. Change the existing visitation order to provide for drop offs and pick ups of the child(ren) to occur at a visitation exchange center and for both parties to follow all rules of the visitation exchange center.

___ 6. Change the existing visitation order to provide for the transportation of the child(ren) for visitation to be as follows:

___ 7. Change the existing visitation order to require supervised visitation.

___ 8. Change the existing visitation order to allow unsupervised visitation.

III. Costs.

___ 9. Direct the other party to pay me for my Court fees and costs resulting from having to bring this motion or from the other party's wrongful failure to follow the existing Court order.

10. The above relief is requested under North Dakota Century Code Sections 14-05-22 and 14-09-06.1, and is in the best interest of the minor child(ren).

Dated this ___ day of _____, 20___

(Signature)

(Printed Name)

(Address)

(City, State, Zip Code)

(Telephone Number)