STATE OF HAWAI'I FAMILY COURT OF THE FIRST CIRCUIT		
This document is prepared by  [ ] Self-Represented □ Pet  [ ] Attorney for □ Petitioner/		
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CASE NAME		CASE ID/NUMBER
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TITLE OF DOCUMENT		

STATE OF HAWAI'I	MOTION AND DECLARATION FOR PRE-DECREE RELIEF		CASE NUMBER	
FAMILY COURT FIRST CIRCUIT			FC-CU No.	
		Name, address, and tel	ephone number of: torney for Movant	
V.	PLAINTIFF,	ATTACHMENTS  [ ] Income and Expen [ ] Asset and Debt Sta [ ] Child Support Guid [ ] Custody/Visitation [ ] Continuation Sheet [ ] Proposed Parentin	atement lelines Worksheet Statement t g Plan	
	DEFENDANT.	[ ] Order for Pre-Decr [ ] IMPORTANT: The	ee Reliet nis is a <b>Domestic Abuse Case</b>	
I am the [ ] Plaintiff [ ] Defendant in this case. I am referred to as the Movant in this motion. My partner is referred to as Respondent in this motion. Pursuant to Hawai'i Family Court Rule 10, I seek the following relief:  [ ] 1. An order which awards the temporary legal custody, physical custody and visitation of the parties' child(ren) as follows:  This arrangement is best for the parties' child(ren) because:				
Note: If custody and visitation orders are requested, the attached Custody/Visitation Statement must be completed and the Movant's Income and Expense and Asset and Debt Statements must be attached.				
[ ]2. An order requiring the Respondent to pay monthly child support of \$  Note: If child support is requested, the Movant's Income and Expense and Asset and Debt Statements must be attached.				
[ ]3. An order requiring the Respondent to pay monthly alimony of \$  Note: If alimony is requested the Movant's Income and Expense and Asset and Debt Statements must be attached.				
[ ]4. An order requiring the Resmy legal expenses.  Note: If contribution to legal expense and expense and expense attached.	gal expenses is reque	sted, the Movant's	COURT USE ONLY	

FC Adm 12/28/15 Reprographics (1/2016) CUDA Motion and Declaration for Pre-Decree Relief 1F-P-850



In accordance with the Americans with Disabilities Act, as amended, and other applicable state and federal laws, if you require accommodation for a disability, please contact the ADA Coordinator at the First Circuit Family Court office by telephone at 954-8200, fax 954-8308, or via email at adarequest@courts.hawaii.gov at least ten (10) days prior to your hearing or appointment date.

Please call the Family Court Service Center at 954-8290 if you have any questions about forms or procedures.

## STATE OF HAWAI'I FAMILY COURT FIRST CIRCUIT

## MOTION AND DECLARATION FOR PRE-DECREE RELIEF

CASE NUMBER FC-CU No.

FIRST CIRCUIT Page 2 [ ] 5. An order requiring the Respondent to make the following other payments:\_\_\_\_\_ **Note:** If such an order is requested, the Movant's *Income and Expense* and *Asset and Debt Statements* must be attached. [ ] 6. An order requiring mediation on the issue(s) raised by this motion. [ ] 7. An order directing a social study by the Family Court regarding the custody and/or visitation issues raised by this motion. [ ] 8. Financial Restraining Order: An order which requires each of the parties to timely provide to the other party full financial and property disclosure, and which enjoins and restrains each of the parties from transferring, encumbering, wasting, or otherwise disposing of any of the party's real or personal property, over and above current income, except as necessary for the ordinary course of a business or for usual current living expenses, without the consent of the other party, or further order of the court. [ ] 9. Restraining Order Regarding Child(ren): An order which enjoins and restrains the Respondent from removing the parties' child(ren) from the City and County of Honolulu. Such a restraining order is necessary because: [ ]10. Domestic Abuse Restraining Order: An order which enjoins and restrains the Respondent from physically abusing, threatening, or harassing me and/or the parties' child(ren) because: a. The Respondent has physically abused me in the past as follows (state nature and date of most recent incident of abuse):\_\_\_\_\_\_ b. The Respondent has threatened to abuse me in the past as follows (state nature and date of most recent threat of abuse):\_\_\_\_\_ [ ] 11. Presence of Firearms: The Respondent owns, intends to obtain or transfer ownership of, or possesses a firearm or ammunition and the firearm may be used to threaten, injure or abuse any person, as follows: a. The Respondent [ ]owns [ ]possesses the following type(s) of firearm(s):\_\_\_\_\_ As of \_\_\_\_\_(date), the firearm(s) was/were located at (state address and specific

location: \_\_\_

b. I believe that the Respondent intends to obtain or transfer ownership of (a) firearm(s) because:

## STATE OF HAWAI'I **FAMILY COURT**

## MOTION AND DECLARATION FOR PRE-DECREE RELIEF

CASE NUMBER

FC-CU No. FIRST CIRCUIT Page 3 c. In the past the Respondent has [ ] used [ ] threatened to use (a) firearm(s) against me and/or the parties' child/ren as follows (state nature and date of the last such use and/or threatened use): d. I believe that the Respondent may in the future use a firearm to threaten, injure, and/or abuse me, the parties' child/ren and/or someone else because: [ ] 12. Respondent's name, address, date of birth, phone no., and last four digits of his/her Social Security No.: Address: Birthdate: \_\_\_\_\_ Telephone No.: \_\_\_\_\_ Soc. Sec. No.: xxx-xx-[ ]13. Other relief sought: \_\_\_\_ In further support of this motion, I also affirm: [ ] 14. I am not now, nor have I been in the past, a party to a legal proceeding other than this case involving the Respondent. [ ] 15. My participation as a party in other legal proceedings involving the Respondent is/has been as follows: CASE NAME: Case number: \_\_\_\_\_ Location of Court: \_\_\_\_\_ Date filed: \_\_\_\_\_\_ Date concluded: \_\_\_\_\_ Type of case: CASE NAME: Case number: \_\_\_\_\_ Location of Court: \_\_\_\_\_ Date filed: \_\_\_\_\_\_ Date concluded: \_\_\_\_\_ Type of case:\_\_\_\_ I hereby declare under penalty of perjury that the information in this motion and all of the attachments to it are true, correct, and complete to the best of my knowledge, information, and belief. \_\_\_\_\_, Hawaiʻi, \_\_\_\_\_ Dated: Movant's Signature

Print Movant's Name