## THE STATE OF NEW HAMPSHIRE JUDICIAL BRANCH

http://www.courts.state.nh.us

Court Name:		
Case Name:		
Case Number:		
(if known)	MOTION	
	MOTION:	
l,		
state the following	g facts and request the following relief:	
Date		Signature
Telephone		Address
I certify that on t		ocument to (other party) or to ttorney) by: Hand-delivery OR US Mail OR
E-mail (E-mail		sed on Circuit Court Administrative Order).
	, , ,	,
Date		Signature
ORDER		
☐ Motion granted	d. Motion denied.	
Recommended:		
Date		Signature of Marital Master/Referee
		Printed Name of Marital Master/Referee
So Ordered:	-(	
referee/hearing of		and agree that, to the extent the marital master/judicial e has applied the correct legal standard to the facts g officer.
Date		Signature of Judge
		Printed Name of Judge