For e-Filing only

THE STATE OF NEW HAMPSHIRE

JUDICIAL BRANCH

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

Court Name:					
Case Name:					
Case Number:					
	ΜΟΤΙΟ	N FOR PER (Pursuant to	IODIC PAYMENTS RSA 524:6-a)		
		V			
Filing Party			Other Party		
Address			Address		
City	State	Zip code	City	State	Zip code
Judgment not having bee	n satisfied in	full, the Filing F	Party in the above-entitled ma	atter request	s that the

Judgment not having been satisfied in full, the Filing Party in the above-entitled matter requests that the Court issue Orders of Notice / Hearing Date (Summons) requiring the Other Party to appear in court so that an Order for Payments may be considered.

Total Amount of Judgment	\$
Filing Fee	\$
Total Paid to Date	\$
Balance Due	\$

<u>Instructions to Filing Party</u>: You are required to formally serve the Other Party with the Orders of Notice which will contain the date of the hearing you requested. Select <u>one</u> of the options below. The court will send you the necessary paperwork based on your selection.

- I request that Orders of Notice / Hearing Date be issued to me for service by certified mail, restricted delivery, return receipt requested. I understand that I will responsible for completing the certified mail process and for any certified mail expenses.
- I request that Orders of Notice / Hearing Date be issued to me for personal service by a Sheriff. I understand I will be responsible for delivery of the Orders of Notice / Hearing Date to the Sheriff and for any personal service expenses.

In addition to the service of the Orders of Notice / Hearing Date as selected above, court rules require that copies of all motions/documents filed with the court be provided to all parties on the case.

I state that on this date I am sending a copy of this document as required by the rules of the Circuit Court. I am electronically sending this document through the court's electronic filing system to all attorneys and to all other parties who have entered electronic service contacts (email addresses) in this case. I am mailing or hand-delivering copies to all other interested parties.

			/s/		
Name of Filer			Signature of Filer	Date	
Law Firm, if applicable	Bar ID	# of attorney	Telephone		
Address			E-mail		
City	State	Zip code			