



5. I understand that I must file this form in the Prothonotary's Office and that I must file a new form every time my address or telephone number changes. Please see Pennsylvania Rule of Civil Procedure 1930.8 for more information.

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DATE

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SIGNATURE

IN THE COURT OF COMMON PLEAS OF HUNTINGDON COUNTY, PENNSYLVANIA  
CIVIL DIVISION

\_\_\_\_\_,  
Plaintiff :  
vs. : No. CP-31-CV- \_\_\_\_\_ - \_\_\_\_\_  
 :  
 :  
\_\_\_\_\_,  
Defendant : CIVIL ACTION – CUSTODY  
 :

**NOTICE AND ORDER TO APPEAR FOR CIVIL CONTEMPT**

TO: \_\_\_\_\_  
Respondent's Name

Legal proceedings have been brought against you alleging you have willfully disobeyed the provisions of the Order of Court dated \_\_\_\_\_ in the above-captioned action. (Date of Court Order disobeyed)

If you wish to defend against the claim set forth in the following pages, you may but are not required to file in writing with the Court your defenses and objections.

Whether or not you file in writing with the Court your defenses or objections, you must appear for a conference before the Court in Courtroom No. \_\_\_\_\_, at the Huntingdon County Courthouse, Huntingdon, Pennsylvania, on the \_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at \_\_\_ o'clock \_\_.m.

**IF YOU DO NOT APPEAR IN PERSON, THE COURT MAY ISSUE A WARRANT FOR YOUR ARREST.**

If the Court finds that you have willfully failed to comply with its Order of Court, you may be found to be in contempt of court and committed to jail, fined or both.

No party may make a change in residence of any child which significantly impairs the ability of the other party to exercise custodial rights without first complying with all the applicable provisions of 23 Pa. C.S. § 5337 and Pa.R.C.P. 1915.17 regarding relocation.

**YOU SHOULD TAKE THIS PAPER TO YOUR LAWYER AT ONCE. IF YOU DO NOT**

**HAVE A LAWYER, GO TO OR TELEPHONE THE OFFICE SET FORTH BELOW. THIS OFFICE CAN PROVIDE YOU WITH THE INFORMATION ABOUT HIRING A LAWYER. IF YOU CANNOT AFFORD TO HIRE A LAWYER, THIS OFFICE MAY BE ABLE TO PROVIDE YOU WITH INFORMATION ABOUT AGENCIES THAT MAY OFFER LEGAL SERVICES TO ELIGIBLE PERSONS AT A REDUCED OR NO FEE.**

**COURT ADMINISTRATOR  
HUNTINGDON COUNTY COURTHOUSE  
223 PENN STREET  
HUNTINGDON, PA 16652  
(814) 643-5078  
AMERICANS WITH DISABILITIES ACT OF 1990**

The Court of Common Pleas of Huntingdon County, Pennsylvania is required by law to comply with the Americans with Disabilities Act of 1990. For information about accessible facilities and reasonable accommodations available to disabled individuals having business before the Court, please contact our office. All arrangements must be made at least 72 hours prior to any hearing before the Court. You must attend the scheduled conference or hearing.

BY THE COURT

DATE: \_\_\_\_\_

\_\_\_\_\_  
Judge



3. \_\_\_\_\_ is the  mother,  father,  
Respondent

or  \_\_\_\_\_ of the child(ren), and resides at  
State the Relationship (for example, grandparent)

\_\_\_\_\_  
Address, including City, State, Zip and County

4. An Order of Court was entered on \_\_\_\_\_, in the Court of Common Pleas of  
Date of Order

\_\_\_\_\_ County, in the State of \_\_\_\_\_, granting me  
Name of County Name of State

legal custody,  physical custody, or  other, of the child(ren). A true and correct copy of the Order of Court is attached.

5. The Respondent has violated the Order in the following way:

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6. I last visited with the child(ren) on \_\_\_\_\_.  
Date

7. \_\_\_\_\_ is now in contempt for failing to obey the Order  
Respondent's Name  
dated \_\_\_\_\_.  
Date of Order

8. Request for Emergency Order

The following emergency situation requires immediate attention by the Court.

Describe this situation in detail:

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**9. Emergency Contact Information:**

Plaintiff: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Defendant number 1: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Defendant number 2: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

**FOR THESE REASONS,** I request the Court to issue an Order finding

\_\_\_\_\_ in contempt, enforce custody, and order any other  
Respondent's Name

appropriate relief relating to custody with the child(ren), including: \_\_\_\_\_

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**VERIFICATION**

I verify that the statements made in the foregoing document are true and correct. I understand that false statements herein are made subject to the penalties of perjury of 18 Pa.C.S. § 4904 relating to unsworn falsification to authorities.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature





