

**IN THE MAGISTRATE COURT OF DOUGLAS COUNTY
STATE OF GEORGIA**

Plaintiff

VS

Civil Action # _____

Defendant

MOTION FOR CONTEMPT

The Plaintiff moves the Court to attach the Defendant for contempt upon the following grounds:

1.

The Defendant is subject to the jurisdiction of this Court and may be personally served with a copy of this motion at _____.

2.

On the _____ day of _____, 20____, Interrogatories were filed in the Magistrate Court of Douglas County in the above referenced case by the Plaintiff and were served upon the Defendant. Said Interrogatories contained a mandate to answer the Interrogatories and a warning of the sanctions for contempt for failure to answer.

3.

Notwithstanding such mandate, the Defendant has willfully failed and refused to answer said Interrogatories. Therefore, the Plaintiff requests that the Court issue a Rule Nisi requiring the Defendant to appear and show cause why he/she should not be attached for contempt and Ordering the Defendant to answer the Interrogatories..

Respectfully submitted this _____ day of _____, 20_____.

Plaintiff's Signature

Address

City, State and Zip Code

(_____) _____
Telephone Number

ACCUSED INFORMATION SHEET

The following information will be used by the DOUGLAS COUNTY SHERIFF'S OFFICE. Please fill in all information about yourself which will allow the SHERIFF'S OFFICE to contact you if needed. Thank you for your cooperation.

Tim Pounds, Sheriff

YOUR NAME

STREET ADDRESS

CITY, STATE, AND ZIP CODE

YOUR HOME PHONE #

YOUR WORK PHONE #

TODAY'S DATE

ACCUSED INFORMATION ONLY

The following information will be used by the DOUGLAS COUNTY SHERIFF'S OFFICE or other arresting agencies to assist in locating and identifying the accused. Please provide as much of the requested information as possible.

ACCUSED NAME

MAIDEN NAME

STREET ADDRESS

CITY, STATE, AND ZIP CODE

PHONE NUMBER

- BIRTHDATE _____ RACE _____ HAIR COLOR _____ HEIGHT _____
- APPROXIMATE AGE _____ EYE COLOR _____ SEX _____ WEIGHT _____
- SOCIAL SECURITY NUMBER _____
- DRIVER'S LICENSE NUMBER _____ STATE ISSUED _____
- EMPLOYER _____ WORK PHONE _____
- EMPLOYER'S ADDRESS _____
- ACCUSED SPOUSE'S NAME _____
- ACCUSED SPOUSE'S BIRTHDATE/AGE _____ RACE _____
- SCAR(S)/LOCATION OF SCAR(S) _____
- TATTOO(S)/LOCATION OF TATTOO(S) _____

---OVER---

- Any other identifiable features which would help identify the accused: _____

- Vehicle: Make _____ Model _____ Year _____
Tag Number _____ State Issued _____ Color of Vehicle _____
- Anything unusual or distinguishable about the vehicle: _____

- What state was the accused born? _____
- What state(s) has the accused lived in? _____
- Is the accused enrolled in a college/technical school? Yes _____ No _____ If so, where? _____
- Has the accused ever been on probation/parole? Yes _____ No _____ If so, from what county and state? _____
- Has the accused recently been arrested? Yes _____ No _____ If so, where arrested? _____
- Does the accused carry weapons (guns, knives, etc.)? Yes _____ No _____ If so, what? _____
- Will the accused run or resist? Yes _____ No _____
- Has the accused been hospitalized recently? Yes _____ No _____ If so, what hospital? _____
- Does the accused have any contagious diseases? Yes _____ No _____ If so, what? _____
- List relatives and/or friends including addresses and phone numbers where accused may frequent: _____

- Accused Children's Names Age School

- List frequent hangouts (bars, game rooms, parks, etc.): _____

- Can you positively identify the accused? Yes _____ No _____ Can you provide a photograph of the accused? Yes _____ No _____

If you have a photograph of the accused, please attach it to this information sheet. There is no guarantee that the photo will be returned to you.