

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

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Plaintiff

VS

Civil Action # \_\_\_\_\_

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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\_\_\_\_.

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Plaintiff's Signature

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Address

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City, State and Zip Code

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(\_\_\_\_\_  
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

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YOUR NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY, STATE, AND ZIP CODE \_\_\_\_\_

YOUR HOME PHONE # \_\_\_\_\_

YOUR WORK PHONE # \_\_\_\_\_

TODAY'S DATE \_\_\_\_\_

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## 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---

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.