


MOTION TO THE COURT AND AFFIDAVIT		DOCKET NO. _____		Massachusetts Trial Court			
PLAINTIFF/Commonwealth		DEFENDANT		COURT DEPARTMENT <input type="checkbox"/> BOSTON MUNICIPAL COURT <input type="checkbox"/> DISTRICT COURT		DIVISION	

On behalf of the ☐ Plaintiff ☐ Commonwealth ☐ Defendant in this case, I respectfully request the Court:

☐ *Continuance*: to continue this case which is presently scheduled for _____ (event) on _____, until _____, for the reasons given on page two of this form.

☐ *Remove default*: to order that the default, default order, or default judgment that was entered on _____ be set aside, and that this case be restored to the court's calendar, for the reasons given on page two of this form.

☐ *Remove dismissal*: to order that the order for, or judgment of, dismissal that was entered on _____ be set aside, and that this case be restored to the court's calendar, for the reasons given on page two of this form.

☐ *Speedy trial*: to order that the complaints whose docket number is listed above be advanced for speedy trial, for the reasons given on page two of this form.

☐ *New trial*: to order that the court's judgment in this case dated _____ be vacated and a new trial ordered, for the reasons given on page two of this form.

☐ *Revise and revoke sentence*: to revise or revoke the sentence(s) imposed in this case on _____ (date) for the reasons given on page two of this form.

☐ *Amend or extend an abuse prevention order*: to extend or amend the abuse prevention order under G.L. c. 209A dated _____ in the manner and for the reasons given on page two of this form.

☐ *Withdraw from representation*: to be permitted to withdraw from further representation of the _____ (party) in this case for the reasons given on page two of this form.

☐ *Other*: (Specify what you are asking the Court to do and the reasons on a separate piece of paper and attach it to this form.)

PROOF OF SERVICE - NOTICE OF MOTION

On _____ (date) I gave notice to all other parties in this case by ☐ mail ☐ e-mail ☐ personally delivering a copy of this motion

Any statements of fact made in this motion are made under the penalties of perjury and are ☐ of my own personal knowledge. ☐ based on information I believe is true.

DATE	PRINT NAME	SIGNATURE	PHONE NUMBER

E-MAIL ADDRESS	BUSINESS ADDRESS

If motion is agreed to by other party, that party or attorney should sign here to indicate assent.

DATE	PRINT NAME	SIGNATURE	PHONE NUMBER

The moving party requests a hearing before the Court on: DATE _____ TIME _____

FOR CLERK MAGISTRATE USE ONLY	<input type="checkbox"/> hearing scheduled as requested <input type="checkbox"/> hearing scheduled for DATE _____ TIME _____
--	--

FOR JUDGE'S USE ONLY

☐ After hearing ☐ Without a hearing this motion is ☐ **ALLOWED** ☐ **DENIED**

DATE	SIGNATURE OF JUSTICE

MOTION TO THE COURT AND AFFIDAVIT	DOCKET NO.	PAGE TWO
<p><i>Please note that you must comply with any court rules that govern your specific motion. As indicated on page one, attach any materials you wish the Court to consider. Include all reasons for your motion. Please note, failing to include a reason for filing the motion may bar you from raising it later. Any factual statements are made under the penalties of perjury.</i></p>		