



**STATE OF RHODE ISLAND
FAMILY COURT**

MOTION FOR RELIEF--REMOTE

Plaintiff	Case No.:
Defendant	

<input type="checkbox"/> Murray Judicial Complex Newport County *(401) 841-8340	<input type="checkbox"/> Noel Judicial Complex Kent County *(401) 822-6725
<input type="checkbox"/> McGrath Judicial Complex Washington County *(401) 782-4111	<input type="checkbox"/> Garrahy Judicial Complex Providence/Bristol County *(401) 458-3200

Now comes the Plaintiff or Defendant in the above-referenced matter and states that by Order of this court dated _____, I was ordered to pay the sum of _____ per week in child support and by order of this court dated _____, I was ordered to pay _____ per week in arrearage.

Since this time of there has been a substantial change of circumstances, and I am requesting that the prior Order be modified because of the following.

- I lost my job.
- I am working fewer hours.
- The custodial parent no longer receives Family Independence Program Benefits.
- I would like to stop interest from running.
- My driver's license has been suspended.
- I am seeking reinstatement of my driver's license.

Other (explain) _____

WHEREFORE, the movant respectfully requests relief from prior orders of this court.

NOTICE OF HEARING DATE

Please take notice that this Motion for Relief will be called for a telephonic or audio-visual hearing before the Family Court on the date and time listed below. If you fail to participate, court orders may be entered against you for the relief demanded.

	APPEARANCE DATE			TIME	DIAL-IN NUMBER
					1-617-315-0704
Judicial Officer: (circle one)	Magistrate E. Newman	Magistrate S. Nahabedian	Magistrate A. Cardona	Magistrate P. Jones	Magistrate J. Shepard
<input type="checkbox"/> If you have a hearing scheduled in Providence/Bristol County before Magistrate Newman, to appear by telephone, please use Access Code 2633 702 1076 or to participate via video hearing, please visit https://ricourts.webex.com/meet/garrahy5c .					
<input type="checkbox"/> If you have a hearing scheduled in Providence/Bristol County before Magistrate Nahabedian, to appear by telephone, please use Access Code 2633 070 4034 or to participate via video hearing, please visit https://ricourts.webex.com/meet/garrahy5f .					
<input type="checkbox"/> If you have a hearing scheduled in Providence/Bristol County before Magistrate Cardona, to participate by telephone please use Access Code 2632 885 2484 or to participate via video hearing please visit https://ricourts.webex.com/meet/garrahy3b .					
<input type="checkbox"/> If you have a hearing scheduled in Kent County before Magistrate Jones, to participate by telephone, please use Access Code 2632 403 0337 or to participate via video hearing, please visit https://ricourts.webex.com/meet/kent3a					
<input type="checkbox"/> If you have a hearing scheduled in Newport County before Magistrate Shepard, to participate by telephone, please use Access Code 2633 056 7297 or to participate via video hearing, please visit https://ricourts.webex.com/meet/newport5 .					
<input type="checkbox"/> If you have a hearing scheduled in Washington County before Magistrate Shepard, to participate by telephone, please use Access Code 2630 245 0937 or to participate via video hearing please visit https://ricourts.webex.com/meet/washington5 .					

CERTIFICATE OF SERVICE

I hereby certify that on the _____ day of _____, 20____, I mailed by certified mail, restricted delivery, return receipt requested a copies of these document to the attorney for the opposing party or the opposing party if self-represented, whose name is _____, at the following address _____.

The return receipt received in connection with the certified mail (green postcard) must be presented to the court before the hearing.

/s/ _____ Attorney for the <input type="checkbox"/> Plaintiff / <input type="checkbox"/> Defendant or the <input type="checkbox"/> Plaintiff/ <input type="checkbox"/> Defendant	Rhode Island Bar Number:
	Date:
Telephone Number:	<u>E-mail:</u>

If you need language assistance, please contact the Office of Court Interpreters at (401) 222-8710 or by email at interpreterfeedback@courts.ri.gov before your court appearance.

* If an accommodation for a disability is necessary, please contact the Family Court Clerk’s Office at the telephone number listed above as soon as possible. TTY users can contact the Family Court through Rhode Island Relay at 7-1-1 or 1-800-745-5555 (TTY) to voice number.