

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone

**Check your email.** You will receive information and documents at this email address.

\_\_\_\_\_  
Email

I am  Petitioner  Respondent  
 Petitioner's Attorney  Respondent's Attorney (Utah Bar #: \_\_\_\_\_)  
 Petitioner's Licensed Paralegal Practitioner  
 Respondent's Licensed Paralegal Practitioner (Utah Bar #: \_\_\_\_\_)

In the District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

<p>_____ Petitioner</p> <p>v.</p> <p>_____ Respondent</p>	<p><b>Counter Motion to</b></p> <p>_____ (name of motion) (Utah Rule of Civil Procedure 101)</p> <p><input type="checkbox"/> <b>Hearing Requested</b></p> <p>_____ Case Number</p> <p>_____ Judge</p> <p>_____ Commissioner</p>
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I am filing this Counter Motion in response to  petitioner's  respondent's Motion to \_\_\_\_\_, filed \_\_\_\_\_ (date).

1. I ask the court to enter an order as follows:  
(Write **what** you want the court to order)

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2. I ask for this order because:  
(Explain **why** you want the court order.)

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3.  The motion is supported by the law because:  
(List any statutes, ordinances, rules or appellate opinions that support/oppose the motion. For example, Utah Code 15-1-201, or Utah Rules of Civil Procedure 67. Explain why they support the motion.)

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4.  I request a hearing.  
 I do not request a hearing.

5.  I have attached the following documents in support of this motion:

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**Plaintiff/Petitioner or Defendant/Respondent**

I declare under criminal penalty under the law of Utah that everything stated in this document is true.

Signed at \_\_\_\_\_ (city, and state or country).

\_\_\_\_\_  
Date

Signature ► \_\_\_\_\_  
Printed Name \_\_\_\_\_

**Attorney or Licensed Paralegal Practitioner of record** (if applicable)

\_\_\_\_\_  
Date

Signature ► \_\_\_\_\_  
Printed Name \_\_\_\_\_

### Certificate of Service

I certify that I filed with the court and am serving a copy of this Counter Motion on the following people.

Person's Name	Service Method	Service Address	Service Date
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

\_\_\_\_\_ Signature ► \_\_\_\_\_  
 Date \_\_\_\_\_  
 Printed Name \_\_\_\_\_