(Date)

(Marshal's Name)

(Address)

(City, State, Zip)

Dear Marshal:

Enclosed please find a Motion for Contempt which includes an Order to Attend Hearing and Notice to be served on ______. (name of person to be served)

(nume of person to be served)

The best place to serv	e him/her is at his/her home addre	ess at	
	between the hours of	and	or at his/her
place of employment,	, located at		
	, between the hour	rs of	_ and
	is	years old,	tall, and
(name of person to be	e served)		

(physical description)

Please make your return of service to me and (check one)

_____ bill me directly, or

_____ submit to State of CT for payment in accordance with enclosed order to waive fees.

Please file proof of service with this court at least six days before the hearing. Please call me if you have any questions. Thank you.

Sincerely,

(Your Name)

(Your Street Address)

(Your City, State, Zip)

(Your Telephone Number)