

**AFFIDAVIT AND MOTION FOR  
BENCH WARRANT AND  
COMMITMENT TO ISSUE**

DC 6:5(25) Rev. 04/15

**IN THE DISTRICT COURT OF \_\_\_\_\_ COUNTY, NEBRASKA**  
(county where original action was filed)

\_\_\_\_\_,  
(name of person listed as plaintiff in original action)  
**Plaintiff,**

**Case No. CI \_\_\_\_\_**  
(case number assigned by clerk of court)

**vs.**

**AFFIDAVIT AND MOTION FOR BENCH  
WARRANT AND COMMITMENT TO ISSUE**

\_\_\_\_\_,  
(name of person listed as defendant in original action)  
**Defendant.**

COMES NOW \_\_\_\_\_, without assistance of an  
(your name)

attorney, and moves the court to take judicial notice of the court file in the above case and to issue  
a Warrant and Commitment for \_\_\_\_\_ for the following reason:  
(name of person ordered to pay child support)

1. That the District Court of \_\_\_\_\_ County entered an order on  
(county where original action was filed)

\_\_\_\_\_, finding \_\_\_\_\_,  
(date of order finding contempt) (name of person ordered to pay child support)

in contempt of court for failing to pay child support, health care expenses, or childcare expenses as  
previously ordered by the court. The court sentenced \_\_\_\_\_  
(name of person ordered to pay child support)

to \_\_\_\_\_ days in jail.  
(number of days of sentence)

2. That the district court allowed \_\_\_\_\_ the  
(name of person ordered to pay child support)

opportunity to purge his/her contempt by paying:

Check all that apply:

<p>child support of _____ per month beginning (amount of monthly child support ordered)</p> <p>_____ for _____ consecutive months. (date purge plan for child support ordered to begin) (length of purge plan)</p> <p>childcare expenses of _____ per month beginning (amount of child-care expenses ordered)</p> <p>_____ for _____ consecutive months. (date purge plan for childcare ordered to begin) (length of purge plan)</p> <p>health-related expenses of _____ per month beginning (amount of health-care expenses ordered)</p> <p>_____ for _____ consecutive months. (date purge plan for health care ordered to begin) (length of purge plan)</p>
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3. \_\_\_\_\_ has failed to make the payments  
(name of person ordered to pay child support)

required by the purge plan. Check all that apply:

**Child support:** That as of \_\_\_\_\_ the records of the  
(date of Child Support Payment Center record, attached)

Child Support Payment Center reflect that \_\_\_\_\_ failed to  
(name of person ordered to pay child support)

make the child support payments as required in the order dated \_\_\_\_\_,  
(date of order finding contempt)

A Certified Payment History is attached hereto and incorporated by reference as if fully set forth herein.

**Childcare expenses:** That as of \_\_\_\_\_ the records of  
(date of the clerk of district court's record, attached)

the clerk of the district court reflect that \_\_\_\_\_ failed to  
(name of person ordered to pay child support)

make the childcare expense payments as required in the order dated \_\_\_\_\_.  
(date of order finding contempt)

A certified copy of the clerk's records reflecting the payment history is attached hereto and incorporated by reference as if fully set forth herein.

**Health care expenses:** That as of \_\_\_\_\_ the records of  
(date of the clerk of district court's record, attached)

the clerk of the district court reflect that \_\_\_\_\_ failed to  
(name of person ordered to pay child support)

make the health care expense payments as required in the order dated \_\_\_\_\_.  
(date of order finding contempt)

A certified copy of the clerk's records reflecting the payment history is attached hereto and incorporated by reference as if fully set forth herein.

WHEREFORE, affiant respectfully requests the court issue a warrant for the arrest of the above-named \_\_\_\_\_.  
(name of person ordered to pay child support)

\_\_\_\_\_  
Your Signature Date \_\_\_\_\_

\_\_\_\_\_  
Your Full Name

\_\_\_\_\_  
Your Full Street Address/P.O. Box

\_\_\_\_\_  
City/State/ZIP Code

\_\_\_\_\_  
Phone E-mail Address

**VERIFICATION**

STATE OF NEBRASKA )  
 ) ss.  
COUNTY OF \_\_\_\_\_ )  
(county where notarized)

I, \_\_\_\_\_, first being sworn upon oath, depose and  
(your full name)  
say that I am a party in the above-entitled matter and have read the foregoing Affidavit and Motion for Bench Warrant and Commitment to Issue, and state that the facts contained therein are true .

\_\_\_\_\_  
Signature

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC