

IN THE COURT OF APPEALS OF VIRGINIA

RECORD NO.

Name(s), Appellant(s)¹

v.

Name(s), Appellee(s)

MOTION FOR _____

Appellant/Appellee (Name), by counsel, (if applicable), moves this Honorable Court to _____.² In support of this request, the appellant/appellee states:

- 1) Provide details to the Court about the background of the case including relevant filing dates. (Attach any relevant documents as exhibits).
- 2) Appellant/appellee is making this request because (state the reasons why request is needed).
- 3) In accordance with Rule 5A:2(a), I contacted the opposing party before filing this motion. The opposing party (agrees/objects) to the relief requested.³

WHEREFORE, the appellant/appellee respectfully requests

_____.

¹ Regardless of whether you were the plaintiff or the defendant in the trial court, in the Court of Appeals you are called the appellant if you are the one who is appealing or the appellee if you are responding to an appeal filed by someone else.

² Describe to the Court what is being requested.

³ Rule 5A:2(a)(2) provides that opposing counsel parties have 10 days after a motion is filed to file a response, but the Court of Appeals may act on the motion before the 10 days expire, if necessary.

CERTIFICATE OF SERVICE⁴

I certify that on *(date)* _____, I *(check one)*

mailed | emailed

a copy of this document to:

1) Party Name: _____

Attorney Name: *(if any)* _____

Address: _____

Email address: _____

2) Party Name: _____

Attorney Name: *(if any)* _____

Address: _____

Email address: _____

Respectfully submitted,

[Signature]

[Date]

NAME OF PARTY OR ATTORNEY
EMAIL ADDRESS
LAW FIRM NAME (IF APPLICABLE)
MAILING ADDRESS
TELEPHONE NUMBER
BAR NUMBER (IF APPLICABLE)

⁴ Any document filed with the Court must also be sent to the opposing party in the appeal. This form certifies that a copy has been provided. Rule 5A:1(c).