

1 Name:
Address:

2 Phone:

3 *Pro Se*

4 **IN THE SUPERIOR COURT**
5 **OF THE**
6 **COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS**

7 _____)
(Name of Mother/Father))

8 _____)
(Name(s) of Child(ren)))

9 Minor Child(ren))

10 Plaintiffs,)

11 vs.)

12 _____)
(Name of Mother/Father))
13 Defendant,)
14 _____)

FCD-PA CIVIL ACTION NO. ____-_____

ORDER TO APPEAR AND PLEAD

15
16 UPON CONSIDERATION OF THE MOTION by the Plaintiff for an Order of this Court
17 requiring the Defendant to answer or otherwise plead herein and permitting services to be made by
18 mail, return receipt requested, postage prepaid under 7 CMC Sections 1301 and 1302:

19 IT IS HEREBY ORDERED, that the Defendant shall be served by mail, **return receipt**
20 **requested**, postage prepaid, by the Plaintiff with the Complaint, Summons, and this Order at
21 (his/her) present address at: (Respondent's mailing address) _____
22 _____
23 _____
24 _____
25 _____

