

\_\_\_\_\_  
My Name

\_\_\_\_\_  
Address

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

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

I am the  Plaintiff/Petitioner  
 Defendant/Respondent  
 Attorney for the  Plaintiff/Petitioner  Defendant/Respondent and my  
Utah Bar number is \_\_\_\_\_

In the  District  Juvenile  Justice Court of Utah  
\_\_\_\_\_ Judicial District \_\_\_\_\_ County  
Court Address \_\_\_\_\_

<p>_____ Plaintiff/Petitioner</p> <p>V.</p> <p>_____ Defendant/Respondent</p>	<p><b>Notice of Order</b></p> <p>_____ Case Number</p> <p>_____ Judge</p> <p>_____ Commissioner</p>
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**Instructions:**

- You must complete this form before you file it. Court staff cannot complete this form for you.
- Keep a copy of all documents for your records.
- Attach the Findings of Fact, Conclusions of Law, and Order

Please take notice that the court has entered the attached findings of fact, conclusions of law and order.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Sign here ►

\_\_\_\_\_  
Typed or Printed Name

### Certificate of Service

I certify that I served a copy of this document on the following people.

Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by 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.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by 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"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by 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.)		

\_\_\_\_\_ Sign here ► \_\_\_\_\_  
 Date \_\_\_\_\_ Typed or Printed Name \_\_\_\_\_