
Name

Address

City, State, Zip

Phone

Check your email. You will receive information and documents at this email address.

Email

I am Petitioner Respondent
 Petitioner's Attorney Respondent's Attorney (Utah Bar #: _____)
 Petitioner's Licensed Paralegal Practitioner
 Respondent's Licensed Paralegal Practitioner (Utah Bar #: _____)

In the District Court of Utah

_____ Judicial District _____ County

Court Address _____

In the Matter of (select one)

- the Marriage of (for a divorce with or without children, annulment, separate maintenance, or temporary separation case)
- the Children of (to establish custody, parent-time or child support)
- the Parentage of the Children of (for a paternity case)

(name of Petitioner)

and

(name of Respondent)

Other parties (if any)

Exhibit Summary

(For voluminous exhibits in Commissioner proceedings; Utah Rule of Civil Procedure 101)

Case Number

Judge

Commissioner

1. I am the petitioner respondent.
2. I am submitting this Exhibit Summary with the court instead of filing the voluminous exhibit (more than 10 pages) that supports my:
 Motion to _____ (name of motion)

Memorandum Opposing Motion to _____
(name of motion)

Reply to Memorandum Opposing Motion to _____
(name of motion)

Other _____

(Utah Rule of Civil Procedure 101(h)(3).)

3. I have provided the other party with a complete copy of the exhibit.
4. I know that I must bring the original or copy of the complete exhibit to the hearing.
5. One or more of my exhibits is longer than 10 pages. I am providing a summary of those exhibits as a chart, list, spreadsheet or calculation. Copies of the exhibits have been provided to all parties and will be available at any hearing.

For each exhibit summary provide a name, a brief summary of the contents, and explain the "foundation" – how you came to have the item, or what you know about the item to prove it is authentic. (Attach additional sheets if needed.)

Example

Name	Exhibit D
Summary of Contents	Itemized list of medical expenses.
Foundation	Compiled from statements from the insurance company.

Name	
Summary of Contents	
Foundation	

Name	
Summary of Contents	
Foundation	

Name	
Summary of Contents	

Foundation	
Name	
Summary of Contents	
Foundation	

Plaintiff/Petitioner or Defendant/Respondent

I declare under criminal penalty under the law of Utah that everything stated in this document is true.

Signed at _____ (city, and state or country).

Date

Signature ► _____
Printed Name _____

Attorney or Licensed Paralegal Practitioner of record (if applicable)

Date

Signature ► _____
Printed Name _____

Certificate of Service

I certify that I filed with the court and am serving a copy of this Exhibit Summary on the following people.

Person's Name	Service Method	Service Address	Service Date
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> 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"/> E-filed <input type="checkbox"/> 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"/> E-filed <input type="checkbox"/> 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.)		

Signature ► _____

Date _____

Printed Name _____