FORM 76B

Courts of Justice Act

SIMPLIFIED PROCEDURE MOTION FORM

Court	File	Nο					

(General heading)

			SIMPLIF	IED PROC	EDURE MOTION FO	ORM	
JURISDICTION () Judge () Master () Registrar							
THIS identij	FORM IS FILED BY fy this party as plaintij	(Check approff, defendant,	opriate boxes to ide etc. in the action)	entify the po	arty filing this form as	a moving/responding party	on this motion AND to
[]	moving party plaintiff						
[]	responding party defendant			•••••			
[]	Other — specify kin						
MOT	ION MADE						
[]	on consent of all par without notice	ties		[]	on notice to all parts	ies and unopposed ies and expected to be opposed	sed
Notice	e of this motion was se	erved on (date	e):				
by me	eans of:						
METI	HOD OF HEARING F	REQUESTED)				
[]	by attendance in writing only, no a by fax	ttendance					
[]	by telephone conference by video conference	ence under ru under rule 1.	le 1.08 08				
Date,	time and place for con	aference call,	telephone call or ap	pearances			
	(dat	e)			(time)		(place)
ORDI	ER SOUGHT BY THI	S PARTY (R	esponding party is	presumed t	o request dismissal of	motion and costs)	
[] [] []	Extension of time — serve claim file or deliver statem Other relief — be sp	ent of defenc					
MAT	ERIAL RELIED ON I	BY THIS PAI	RTY				

[] this form

[] []	pleadings affidavits — specify other — specify							
GROU	JNDS IN SUPPORT OF/IN OPP	OSITION TO MOTION (INCLUDIN	NG RULE AND STATU	JTORY PROVISIONS RELIED ON)				
CERT	TIFICATION BY LAWYER							
	fy that the above information is c ture of lawyer (If no lawyer, party	orrect, to the best of my knowledge. must sign)						
Date								
	PARTY'S LAWYER (If no law e, telephone and fax number.)	ver, give party's name, address for	OTHER LAWYER (If no lawyer, give other party's name, address for service, telephone and fax number.)					
Name	and firm:		Name and firm:					
Addre	SS:		Address:					
Telepl	none:	Fax:	Telephone:	Fax:				
THIS service	PARTY'S LAWYER (If no law e, telephone and fax number.)	ver, give party's name, address for	OTHER LAWYER (If no lawyer, give other party's name, address for service, telephone and fax number.)					
Name	and firm:		Name and firm:					
Addre	ss:		Address:					
Telepl	none:	Fax:	Telephone:	Fax:				
DISPO	OSITION							
[] [] []	order to go as asked adjourned to order refused order to go as follows:							
Hearir	ng method		learing durationin.					
Heard	in: [] courtro	om [] office						
[]	Successful party MUST prepare	e formal order for signature						
[]	No copy of disposition to be ser	nt to parties						
[]	Other directions — specify							
Date			•••••	Signature				