

IN THE SUPERIOR COURT OF WASHINGTON, COUNTY OF PIERCE

_____ Plaintiff(s)/Petitioner, vs. _____ Defendant(s)/Respondent.	Cause No: NOTE FOR JUDGES MOTION DOCKET (NTMT)
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TO THE CLERK OF THE SUPERIOR COURT AND TO OPPOSING PARTY (IES):

NAME: _____ WSBA#: _____
Phone: _____
ADDRESS: _____ Self-Represented or
ATTORNEY FOR: _____

(Please note additional attorneys on an attached page)

Please take notice that an issue of law in this case will be heard on the date below and the clerk is directed to note this on the appropriate calendar:

Pierce County Superior Court, County-City Building – 930 Tacoma Ave. S – Tacoma, WA 98402

JUDGE: _____

CALENDAR DATE: _____ **TIME:** 9:00 am

Proceeding Type: _____

NATURE OF HEARING (MUST CHOOSE ONE OR MORE):

<input type="checkbox"/> Adjust Trial Date	<input type="checkbox"/> Amend	<input type="checkbox"/> Appoint GAL/PI	<input type="checkbox"/> Compel	<input type="checkbox"/> Consolidate
<input type="checkbox"/> Disburse Funds	<input type="checkbox"/> Dismiss	<input type="checkbox"/> Extend GAL/PI Times and Fees	<input type="checkbox"/> In Limine	
<input type="checkbox"/> Parenting Plans	<input type="checkbox"/> Presentation	<input type="checkbox"/> Other _____		

WORKING COPIES SHALL BE DELIVERED TO THE COURT PURSUANT TO PCLR 7 (a) (7)

**PARTY SETTING HEARING SHALL CONFIRM BY NOON, THREE (3) COURT WORKING DAYS
PRIOR TO HEARING OR HEARING WILL BE CANCELLED**

Submitted by:

DATED: _____ Signed: _____

NAME: _____ Phone: _____

ADDRESS: _____ WSBA# _____

Attorney for: _____
