ANSON COUNTY SUPERIOR CIVIL COURT

CALENDAR REQUEST	CASE NUMBER:			
*FILL IN [] JURY	[] NON-JURY	[] MOT	ION – TYPE	OF MOTION
	WHERE APPLICA Negligence L []	and Dispute	Caveat	Other
f "Other" Explain:			L J	
PLAINTIFF(S) /S DEFENDANT(S)		BEGINNIN * ESTIMATI	HOURS_	
ATTORNEY	CERTIFICATE OF RE	ADINESS (For M	otions Only)	
THISDAY OF	, 20, 20			
Allonn	ey for Flammin/Defend	ant		
If opposing counsel ca given to the undersigne 266-4575 <u>immediately.</u> COPY TO: (MUST SHC 1. (ORIGINAL) Anson Cou 2. Patricia Fields, Trial Co Laurinburg, N. C. 28353 3. 4. Pro Se:	d and to Patricia F OW SERVICE ON P Inty Clerk of Court, P.O. urt Coordinator, FAX – 9	RO SE PART Box 1064, Wades 10-266-4578 and Attorney Attorney	IES/OPPOSIN boro, N. C. 28170 mail to P.O. Box 7 For	ator, at 910- NG COUNSEL ⁾ ^{769,}
I HEREBY CERTIFY: (a) All motions existing of disposed of without de (b) I know of no procedura (c) I know of no parties or v (d) I know of no current reas	lay of trial. I matters which would de vitnesses desired that w	en heard or other elay the trial of the ill not be available	rwise disposed of e case when calle e on the trial date	d for trial.
This day of				
			Attornov for /F	Daintiff/Defendan

_Attorney for (Plaintiff/Defendant)