

CALENDAR REQUEST FOR SUPERIOR COURT – WILSON COUNTY

STATE OF NORTH CAROLINA

FILE NO.

WILSON COUNTY

JURY

NON-JURY

\*

Plaintiff(s)

\*

vs.

\*

SESSION BEGINNING:

\*

Defendant(s)

\*

If Motion, specify type: \_\_\_\_\_

Approximate hearing time: day(s) \_\_\_\_\_ hour(s) \_\_\_\_\_ minutes \_\_\_\_\_.

Have you conferred with all parties involved? \_\_\_\_\_ Yes \_\_\_\_\_ No.

Have all parties agreed to the requested date? \_\_\_\_\_ Yes \_\_\_\_\_ No.

Special Request \_\_\_\_\_

This the \_\_\_\_\_ day of \_\_\_\_\_, year.

\_\_\_\_\_  
Name, Address, State Bar#

Party Represented

Telephone and Fax Number

Copy to Trial Court Coordinator

Felecia W. Lucas

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