

**GUILFORD COUNTY SUPERIOR COURT  
REQUEST TO CALENDAR**

**GREENSBORO**   
**HIGH POINT**

**FILE #** \_\_\_\_\_ **CvS** \_\_\_\_\_

\_\_\_\_\_  
(PLAINTIFF)

**Vs**

**Approximate  
Hearing Time:**

**Day(s):** \_\_\_\_\_

**Hour(s):** \_\_\_\_\_

**Minute(s):** \_\_\_\_\_

\_\_\_\_\_  
(DEFENDANT)

**WEEK YOU ARE REQUESTING:** \_\_\_\_\_ *(Subject to Available Court Time)*

**TRIALS: JURY**  **NON-JURY**

**COURTROOM: 3H**  **3G**  **3D**

**HIGH POINT: WASHINGTON COURTOOM 434**

**COURTROOM: 3H**

**MOTIONS:**

List each motion below:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**DO YOU REQUIRE A COURT REPORTER?** YES  NO

**HAVE YOU CONFERRED WITH ALL PARTIES INVOLVED?** YES  NO

**HAVE ALL PARTIES AGREED TO THE DATE YOU ARE REQUESTING?** YES  NO

<p align="center"><b>CERTIFICATE OF SERVICE</b></p> <p>This is to certify that the undersigned has this date served this pleading upon all other parties to this case by:</p> <p><input type="checkbox"/> depositing a copy enclosed in a post paid, properly addressed wrapper in a post office or official depository under the exclusive care and custody of the United States Postal Service,</p> <p><input type="checkbox"/> handing it to an attorney or to the party,</p> <p><input type="checkbox"/> leaving it at the attorney's office with a partner or employee,</p> <p><input type="checkbox"/> sending it to the attorney's office by a confirmed telefacsimile transmittal for receipt by 5:00 P.M. Eastern Time on a regular business day, as evidenced by a telefacsimile receipt confirmation,</p> <p><input type="checkbox"/> having the Sheriff serve the parties</p> <p><b>DATE OF SERVICE:</b> _____</p>	<p><b>PRINT OR TYPE YOUR NAME:</b></p> <p><b>STATE BAR NUMBER:</b></p> <p><b>SIGN YOUR NAME:</b></p> <p><b>YOUR ADDRESS:</b></p> <p><b>TELEPHONE NUMBER:</b></p> <p><b>ARE YOU THE:</b>    <b>PLAINTIFF</b> <input type="checkbox"/>                            <b>DEFENDANT</b> <input type="checkbox"/>                            <b>UNNAMED DEFENDANT</b> <input type="checkbox"/></p>
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LIST BELOW THE NAMES AND ADDRESSES OF THOSE SERVED		
<b>Name:</b>	<b>Attorney For:</b>	
<b>Address:</b>		
<b>Name:</b>	<b>Attorney For:</b>	
<b>Address:</b>		

**Appendix A**