CIVIL CALENDARING REQUEST

| ONS | TE OF NORTH CAROLINA LOW COUNTY | | IN THE GENERAL COURT OF JUSTICE DISTRICT COURT DIVISION FILE NO.: | |
|------------|---|------------------------|---|--|
| | Plaintiff(s) | | Plaintiff's Attorney(s) | |
| | Defendar | | Defendant's Attorney(s) | |
| 1. 2. | Please calendar for: Session Date: | () | | |
| 3. | Presiding Judge: | | | |
| 4. | Nature of Action: | | | |
| 5. | Estimated Court Time Needed for Action: | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | Name and Address of Opposing Counsel or pro se party: | |
| (Signa | ature of Attorney or pro se party maki | ng request) | | |
| (Phone | # of person making request) | (Date) | | |
| | | | | |
| | | | | |
| Note: | Calendaring requests for trial da | ates should be filed & | k submitted to the Judges' office at least thirty-one days (31) | |

MAIL TO OR FAX TO:

days before the requested trial date. Calendaring requests for motions should be filed & submitted to the Judges' office

District Court Judges' Office, Onslow County Courthouse, 625 Court Street, Jacksonville, NC 28540-4797, Telephone: (910) 478-3616, Fax (910) 478-3626

at least twelve (12) days before the requested hearing date.