

SUPERIOR COURT CALENDAR REQUEST

File No.: _____

Plaintiff(s)

Plaintiff's Attorney(s)

Versus

Defendant(s)

Defendant's Attorney(s)

Hearing Type: ☐ Motion ☐ Add On Motion ☐ Priority Setting ☐ Jury Trial ☐ Nonjury Trial

Court Session Requested: _____

Motion(s)/ Other : _____

Date Motion was Filed: (Motions will not be calendared until filed): _____

Estimated Length of Hearing: _____

If this case is assigned to a Superior Court Judge by court order, provide the following information:

Assigned Judge's Name : _____

Assigned pursuant to: ☐ GRP Rule 2.1 ☐ G.S. 7A-47.3(MedMal)

Party Making Request: _____

☐ Plaintiff ☐ Attorney for Plaintiff
☐ Defendant ☐ Attorney for Defendant

Email Address: _____ **Telephone Number:** _____

Have all parties agreed to the requested date? ☐ Yes ☐ No

CC: Opposing Party/Attorney(s) : _____

Date: _____

Note: Calendar requests for trial dates should be filed & submitted to the Superior Court Judge's Office at least thirty-one days (31) days before the requested trial date. Calendar requests for motions should be filed & submitted to the Superior Court Judge's Office at least twelve (12) days before the requested hearing date.

Mail or Email this form to: Superior Court Judge's Office, Sampson County Courthouse,
101 E. Main St, Clinton, NC 28528;

Email: Charlotte.S.Wilkerson@nccourts.org ;

Telephone: (910) 596-6616