

ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME, ADDRESS, PHONE)

ATTORNEY FOR: (NAME)

SUPERIOR COURT OF CALIFORNIA, COUNTY OF CALAVERAS
COURT LOCATION: 400 GOVERNMENT CENTER DRIVE
MAILING ADDRESS: 400 GOVERNMENT CENTER DRIVE
CITY & ZIP CODE: SAN ANDREAS, CA 95249

PETITIONER/PLAINTIFF:

RESPONDENT/DEFENDANT:

Case No.

**REQUEST TO SET DEFAULT OR UNCONTESTED
MATTER FOR HEARING**

I hereby represent to the Court that the above-entitled proceeding is ready for hearing, and I know of no reason why this matter should not be heard as soon as the calendar of the Court will permit.

Default or dismissal has been entered as to all parties
The matter may proceed as uncontested

Nature of Hearing (*Describe*):

Unlimited Civil – Heard Fridays at 9:00 a.m. in Dept 2
Limited Civil – Heard Fridays at 9:00 a.m. in Dept 2
Family Law – Heard Tuesdays at 9:00 a.m. in Dept 2 (Pro Per)
Family Law – Heard Tuesdays at 10:00 a.m. in Dept 2 (Attorney)

I am requesting this matter be scheduled as follows:

Date: _____, 20____ Time: _____ a.m.

TO BE COMPLETED BY CLERK

Matter set as requested in Courtroom _____

Matter set as follows:

Date: _____ Time: _____ Crtrm: _____

Dated: _____ D. Vrtis, Clerk by _____, Deputy