STATE OF NORTH CAROLINA **IN THE GENERAL COURT OF JUSTICE**

COUNTY OF UNION **SUPERIOR COURT DIVISION**

Date: _____ File No. _____

_____

_____
Plaintiff

vs. **CALENDAR NOTICE**

_____

_____
Defendant

Please place the above captioned matter on the Union County Civil Superior Court calendar for the _____session for:

_____ Motion Type of Motion _____

_____ Trial Jury _____ Non-Jury _____

Estimated Length of Hearing: _____

Nature of Case _____

_____
Attorney for Plaintiff/Defendant

Address: _____

_____

Telephone: _____

Mail Calendar Request to: Nevele M. Love, Trial Court Coordinator
Post Office Box 829
Monroe, NC 28111-0829

And a Copy to: (Give name and address of opposing counsel and/or unrepresented parties)

_____

_____

_____

This calendar request form shall constitute notice of hearing pursuant to Rule 7(b)(1) of the North Carolina Rules of Civil Procedure.