

STATE OF NORTH CAROLINA
 COUNTY OF **CUMBERLAND**

File No.

IN THE GENERAL COURT OF JUSTICE
 SUPERIOR DISTRICT COURT DIVISION

Name Plaintiff

vs.

Name Defendant

**OBJECTION TO
 REQUEST FOR CONTINUANCE**

Cumberland County Local Rule 9

NOTICE TO THE TRIAL COURT ADMINISTRATOR

The undersigned attorney objects to the request for continuance in this action based upon the following reason(s): *(Indicate reason for Objection.)*

Date	Name of Attorney/ Party	Address and Telephone Number
<input type="checkbox"/> Attorney for Plaintiff <input type="checkbox"/> Attorney for Defendant <input type="checkbox"/> Unrepresented Party		

Copy of this Notice distributed to: <i>(Provide Name and Address of all parties)</i>	Indicate method of service to opposing parties <input type="checkbox"/> US Mail <input type="checkbox"/> Facsimile <input type="checkbox"/> Hand Delivery
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NOTICE: All counsel/ parties have a continuing obligation to notify this office of any correction/addition/deletion of counsel.

PART B [For Official Use Only]
DO NOT WRITE IN THIS SPACE

Date Objection Received TCA Office: