STATE OF NORTH CAROLINA File No. Enter Case No.

ROCKINGHAM COUNTY In the General Court of Justice

 Superior Court Division

ENTER NAME OF PLAINTIFF(s)

vs. **NOTICE OF HEARING / CALENDAR REQUEST**

ENTER NAME OF DEFENDANT(s)

Please place the above-captioned matter on the [ ]  Rockingham / [ ]  Caswell County Civil Superior Court calendar

for the session for the following:

 [ ]  Motion – Please State Type of Motion:

 [ ]  Trial – Please checkmark if it is for [ ]  jury or [ ]  non-jury.

This the day of  20 .

[ ]  Plaintiff [ ]  Attorney for Plaintiff

 [ ]  Defendant [ ]  Attorney for Defendant

**CERTIFICATE OF SERVICE**

This is to certify that the undersigned has this date served this pleading upon all other parties to this cause by:

 ☐ Depositing a copy enclosed in a post-paid, properly-addressed wrapper in a post office or official depository under the exclusive care and custody of the U.S. Postal Service;

 ☐ Handing it to the attorney or to the party;

 ☐ Leaving it at the attorney’s office with a partner or employee;

 ☐ Sending it to the attorney’s office by a confirmed telefacsimile transmittal for receipt by 5:00 P.M. Eastern Time on a regular business day, as evidenced by a telefacsimile receipt confirmation;

 ☐ Having the Sheriff serve the parties.

DATE OF SERVICE: PRINT YOUR NAME:

STATE BAR NO.: SIGN YOUR NAME:

ADDRESS: CITY:

TELEPHONE NUMBER: STATE: ZIP CODE:

List Below the Names and Addresses of Those Served:

Name:

Address: Attorney for:

Address:

Name: Attorney for:

* **Mail**, **Email**, or **Fax** this Form to: Superior Court Trial Court Coordinator, Rockingham County Courthouse, P.O. Box 97, Wentworth, NC 27375; Email: Trina.R.Law2@nccourts.org; Fax: 336-634-6017