

Superior Court of Washington, County of Grant

Plaintiff/Petitioner (person/s who started this case):

vs.

Defendant/Respondent (other party/parties):

No. _____

NOTICE OF HEARING

(NTHG)

Clerk's action required: 1

To: _____ Address: _____

- Plaintiff/Petitioner Attorney for Plaintiff/Petitioner
 Defendant/Respondent Attorney for Defendant/Respondent

And To: Grant County Clerk

1. A court hearing has been scheduled:



for: _____ at: _____ a.m. p.m.
date time

at: _____ in _____
court's address room or department

docket / calendar or judge / commissioner's name

2. The purpose of this hearing is (specify): _____

Trial Setting - Estimated Length of Trial: _____

Warning! If you do not go to the hearing, the court may sign orders without hearing your side.

This hearing was requested by: Plaintiff/Petitioner or his/her lawyer
 Defendant/Respondent or his/her lawyer

Person asking for this hearing signs here Print name (if lawyer, also list WSBA #) Date

(Required) Your Phone Number: _____

I agree to accept legal papers for this case at:

address

city state zip

(Optional) email: _____

This does not have to be your home address. If this address changes before the case ends, you must notify all parties and the court clerk in writing. You may use the Notice of Address Change form (FL All Family 120). A party must also update his/her Confidential Information form (FL All Family 001) if this case involves parentage or child support.