

Name, address and telephone number of attorney or party without attorney: Telephone No.: _____ email: _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BENITO Street Address: 450 Fourth Street City and Zip Code: Hollister 95023	
PEOPLE OF THE STATE OF CALIFORNIA vs. DEFENDANT:	
REQUEST FOR ORDER OR TO BE PLACED ON COURT'S CALENDAR	CASE NUMBER:

Interpreter required: Language: _____ Defendant In-Custody: Yes, Location: _____

I request that the court place my case on calendar for the following reason(s):

- Surrender on warrant
 Arrest Warrant
 Bench Warrant
 Warrant ordered but not yet submitted
 Misdemeanor Modification Referral: Specify: _____

Misdemeanor Modification of Sentence/Terms and Conditions of Probation: Specify: _____

Other: Reason: _____

Date: _____
Print Name Signature of Defendant/Attorney

Court's use Only

The matter is placed on the court's calendar as follows:

Hearing Date:	Time:	Department:

Date: _____
Deputy Clerk