

Name, address and telephone number of attorney or party without attorney: Telephone No.: _____ Fax No.: _____	<i>FOR COURT USE ONLY</i>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BENITO STREET ADDRESS: 450 Fourth Street MAILING 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: No Yes, Language: _____

Defendant In-Custody: No Yes, Location: San Benito County Jail Other (*specify*): _____

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

- Surrender on warrant Arrest Warrant Bench Warrant Warrant ordered but not yet

NOTE: Defendant may be remanded into custody at time of hearing.

Misdemeanor Modification Referral

- DUI program SB-38 DUI Program
- BTP program Other (*Specify*) _____

Misdemeanor Modification of Sentence/Terms and Conditions of Probation

- Date to report to jail Convert fine to jail time
- Requirement for interlock device Other *Specify*) _____

Information in support of this request (*attach additional sheets as necessary*):

Early entry of plea for trial resolution

Approved by opposing Counsel.

Date: _____

(TYPE OR PRINT NAME) (SIGNATURE)

COURT USE ONLY:

The request for order is granted as follows:

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

Hearing Date:	Time:	Location: 450 Fourth Street, Hollister, CA 95023 Courtroom: TBD
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The request for order or to be placed on the court's calendar is denied.

Date

Judge of the Superior Court