


ATTORNEY OR PARTY WITHOUT AN ATTORNEY <i>(Name, state bar number, and address)</i> TELEPHONE NO: _____ FAX NO: _____ EMAIL: _____	FOR COURT USE ONLY
 SUPERIOR COURT OF CALIFORNIA COUNTY OF ALPINE 14777 STATE ROUTE 89, PO BOX 518 MARKLEEVILLE, CA 96120 530-694-2113	
PLAINTIFF: THE PEOPLE OF THE STATE OF CALIFORNIA VS. DEFENDANT:	
REQUEST TO BE PLACED ON COURT'S CALENDAR (MISDEMEANOR/ FELONY)	CASE NUMBER: _____

I am the defendant attorney of record for the defendant.

I request this matter be placed on calendar for the following reason(s):

Surrender on warrant Arrest warrant Bench warrant

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

Modification of Program/ Re-referral

DUI Program

Batterer's Treatment Program

Other Program *(specify)*: _____

Modification of sentence/ Terms and conditions of probation

Date to report to jail

Convert fine to jail time

Requirement for ignition interlock device (IID)

Modification of payment installment plan

Other: _____

Information in support of this request is attached *(attach additional sheets as necessary)*.

I am requesting to appear remotely for this hearing. A Request for Remote Appearance (ALP-CR-002) is attached.

Proof of service on the Alpine County District Attorney and / or other persons entitled to notice of the hearing must be attached to this request.

[TO BE COMPLETED BY COURT]

The request is denied.

Other: _____

The request is granted. A hearing is scheduled as follows:

Court hearing date:

DATE: _____

TIME: _____

The court hearing will be at:

ADDRESS:

Alpine County Courthouse

14777 State Route 89, Markleeville, CA 96120

Remote appearance: approved denied

Date

Judge of the Superior Court