

## SETTING OF CRIMINAL MOTIONS:

1. Note for Hearing form and written Motion are necessary with any supporting information person wishes to file.
2. Must set motion on Note for Hearing form for a Thursday, allowing enough notice to the other side per court rules. Call either the Chief Criminal Dept. (477-4707) or the Criminal Coordinator (477-4403) for a hearing time.
3. Make 3 additional copies of motion materials and Note for Hearing.
  - Take original and 3 copies and serve a copy of everything on Prosecuting Attorney's Office—they will stamp your original and other copies—THIS WILL BE YOUR PROOF OF SERVICE.
  - Provide a copy of everything to the Court Administrator's office (either Chief Criminal Dept. or Criminal Coordinator).
  - File original documents with Clerk in Room 300.
  - Retain a copy for yourself.
4. Call either the Chief Criminal Dept. (477-4707) or the Criminal Coordinator (477-4403) any time before noon the Tuesday prior to the hearing to indicate you are still ready to proceed with the hearing.
5. Appear in Court at the scheduled time and place.

(Copy Receipt)

(Clerk's Date Stamp)

**SUPERIOR COURT OF WASHINGTON, COUNTY OF SPOKANE**

STATE OF WASHINGTON, Plaintiff,  
vs.

CASE No. \_\_\_\_\_

Defendant IN-CUSTODY – DOB \_\_\_\_\_

**CRIMINAL MOTION CALENDAR  
NOTE FOR HEARING-ISSUE OF LAW  
(NTMTDK)**

**TO THE CLERK OF THE COURT AND TO:** \_\_\_\_\_

The undersigned has scheduled a motion for: \_\_\_\_\_  
a copy of which is attached.

The hearing is scheduled for \_\_\_\_\_ at \_\_\_\_\_ a.m./p.m.  
Date

to be heard at : **SPOKANE COUNTY SUPERIOR COURT  
CRIMINAL PRESIDING DEPARTMENT  
1116 WEST BROADWAY  
SPOKANE, WA 99260-0350**

TRANSPORT REQUIRED

**LENGTH OF HEARING:** \_\_\_\_\_

WITNESS TESTIMONY REQUIRED

**NOTICE: Motions must be confirmed no later than 12:00 noon the Tuesday before the hearing by calling the Criminal Presiding Department. See LCrR 4.5. Working copies must be provided to the Criminal Presiding Department at time of filing.**

Signed \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ (print/type) Opposing Counsel Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Bar No. \_\_\_\_\_ Phone \_\_\_\_\_ Bar No. \_\_\_\_\_ Phone \_\_\_\_\_

E-Mail: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**AUTHORITIES**

**Cite those authorities which form primary basis for your legal position. Where case authority is cited, provide reference to specific page of opinion which is controlling. Likewise reference applicable sections or subsection of statutes or court rules. This does not substitute for required Memorandum of Authorities.**

**Applicable Court Rule:** \_\_\_\_\_

**Applicable Statute:** \_\_\_\_\_

**Applicable Case Law:** \_\_\_\_\_