

**ADJOURNMENT REQUEST/WITHDRAWAL/SETTLEMENT NOTIFICATION**  
**FOR**  
**TRIALS/EVIDENTIARY HEARINGS**

Case Name:

Case Number:

Adversary Number (if applicable):

Moving Party Name (if applicable):

Requesting Attorney Name:

Law Firm Name:

Law Firm Phone Number:

Date of Hearing/Trial:

Reason for Adjournment:

Consent of all parties obtained: yes\_\_\_\_\_ no\_\_\_\_\_

CC:

**If your adjournment request is approved, the court will notify you of the adjourned date.**