

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.