



**SUPERIOR COURT OF WASHINGTON
COUNTY OF KITSAP**

Plaintiff/Petitioner

and

Defendant/Respondent

No. _____

**NOTE FOR MOTION DOCKET (NTMTDK)
PRO SE DISSOLUTION CALENDAR
(EXHIBIT D)**

TO THE CLERK OF THE COURT AND

TO:

Please take notice that the undersigned will bring on for hearing:

NATURE OF MOTION: **ENTRY OF FINAL DISSOLUTION DOCUMENTS**

The hearing is to be held:

DATE: Tuesday, _____

TIME: 1:30 p.m. (Dissolutions without children)

2:00 p.m. (Dissolutions with children)

**AT: Kitsap County Superior Court—Pro Se Dissolution Calendar
Kitsap County Courthouse
614 Division Street
Port Orchard, WA 98366**

COURT COMMISSIONER MAY HEAR THIS MOTION: [XX] YES [] NO

DATED this _____ day of _____, A.D. _____.

NOTICE TO PRO SE LITIGANTS:

The Court will not grant your dissolution if your final documents are not in order. Pursuant to KCLFLR 11, you must meet with an attorney, a Courthouse Facilitator, or Kitsap Legal Services to have your final documents reviewed prior to the hearing. To make an appointment with a Courthouse Facilitator, call 360-337-7260.

Signature

Print Name