



**SUPERIOR COURT OF WASHINGTON
COUNTY OF KITSAP**

Plaintiff/Petitioner

Attorney for Plaintiff/Petitioner

vs.

Defendant/Respondent

Attorney for Defendant/Respondent.

NO.:

NOTE FOR MOTION DOCKET
(NTMTDK)

CLERK'S ACTION REQUIRED

TO THE CLERK OF COURT AND ALL PARTIES:

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

NATURE OF MOTION: _____

The hearing is to be held: DATE: _____, 20____ TIME: _____ a.m./p.m.

AT: Superior Court of Kitsap County, 614 Division Street, Port Orchard, WA 98366

(List Calendar/Docket/Judge's Departmental/Special Set)

ALL PARTIES AND COUNSEL ARE EXPECTED TO APPEAR VIA ZOOM UNLESS IMPOSSIBLE TO DO SO.

ZOOM MEETING ID: _____ **MEETING PASSCODE:** _____

You can confirm this Zoom Meeting information the day prior to the hearing by clicking the "**Today's Calendar**" link at the Superior Court website: www.kitsapgov.com/sc. Information will be posted no later than 4:30 p.m. the day prior.

For more information regarding remote appearances, please visit:

www.kitsapgov.com/sc/Pages/remoteppearance.aspx

COURT COMMISSIONER MAY HEAR THIS MOTION: YES NO

Dated: _____

Signed: _____

Lawyer for: _____

Address: _____

Phone: _____

Email: _____