ATTORNEY OR PARTY WITHOUT ATTORNEY: NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: E-MAIL ADDRESS: ATTORNEY FOR *(Name)*:	*FOR COURT USE ONLY*
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN LUIS OBISPO 1050 Monterey Street, Rm 220 San Luis Obispo , CA 93408 805-706-3600	
PEOPLE OF THE STATE OF CALIFORNIA V. DEFENDANT: DATE OF BIRTH:	
Motion to Calendar Criminal Case	CASE NUMBER:

I _____ , ☐ Defendant

Request this matter be placed on the Court's calendar as follows:

Calendar date:	Dept:	Time:

Reason:	Modification of Probation Modification of Sentence Recall Warrant Restitution Hearing	☐ Modification: New Remand/ Jail Turn-in ☐ Date Modification: Ignition Interlock Device ☐ Modification: Probation Fines ☐ Other: _____

Defendants/Parties are advised to check the posted calendar on the court date as departments are subject to change.

_____ Date	_____ Signature of Requesting Party	_____ Telephone Number

If Defendant has an outstanding warrant, he/she has been informed that the warrant remains active and he/she is subject to arrest

☐   Proof of Mailing Attached

ATTORNEY OR PARTY WITHOUT ATTORNEY:		FOR COURT USE ONLY
NAME:		
STREET ADDRESS:		
CITY: STATE: ZIP CODE:		
TELEPHONE NO.: E-MAIL ADDRESS:		
ATTORNEY FOR (Name):		

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN LUIS OBISPO

STREET ADDRESS: 1050 Monterey St

CITY AND ZIP CODE: San Luis Obispo, CA 93408

BRANCH NAME: San Luis Obispo Superior Court

PEOPLE OF THE STATE OF
           CALIFORNIA V.

DEFENDANT:

PROOF OF PERSONAL SERVICE	CASE NUMBER:

Check method of service (only one):	HEARING DATE:
By Personal Service **By Mail** **By Overnight Delivery**	HEARING TIME:
By Messenger Service **By Fax**	DEPARTMENT:

1. I am at least 18 years old, not a party to this action and not a protected person listed in any of the orders

2. Person served (name):

3. I served copies of the following documents (specify):

    a. Date: b. Time:

    c. Address:

4. My name, address and telephone number, and if applicable, county of registration and number (specify):

5. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated: _____

_____	_____
(TYPE OR PRINT NAME OF PERSON WHO SERVED THE PAPERS)	(SIGNATURE OF PERSON WHO SERVED THE PAPERS)