

FEB - 1 2021 (2)

Superior Court of WA
Sharon Fogo

Ma

20-1-00456-23
NTHG 16
Notice of Hearing
9679355



Superior Court of Washington, County of Mason

State of Washington
Plaintiff/Petitioner

No. 20-1-456-23

Brandon Harding
Defendant/Respondent

Notice of Hearing
(NTHG)

Clerk's action required

Notice of Hearing

To the Court Clerk and all parties:

1. Please take note that a court hearing has been scheduled:

for: Feb 8 2021 at: 9⁰⁰ a.m. p.m.
date time

Interpreter needed for Plaintiff/Petitioner Defendant/Respondent Both

Type of Interpreter: Spanish Other _____

at: Mason County Superior Court
419 N. 4th, Shelton, WA 98584 (look for posted sign in courthouse as to which courtroom)

2. The purpose of this hearing is (specify): Motion for Default Motion for Summary Judgment

Show Cause Hearing Other: Bail Reduction

3. The hearing should be scheduled on the following court calendar:

- | | | |
|--|--|--|
| <input type="checkbox"/> Criminal
(Monday at 9:00 a.m.) | <input type="checkbox"/> Civil and Revisions
(Monday 1:30 p.m.) | <input checked="" type="checkbox"/> Criminal Show Cause
(Tuesday 9:00 a.m.) |
| <input type="checkbox"/> Protection Order
(Monday - Friday 9:00 a.m.) | <input type="checkbox"/> At-Risk-Youth/CHINS
(Monday 3:00 p.m.) | <input type="checkbox"/> Offender
(Tuesday 9:30 a.m.) |
| <input type="checkbox"/> Other: _____ | | <input type="checkbox"/> Dependency
(Thursday 1:30 p.m.) |

Hearings are to be confirmed by e-mail at superiorcourt-confirm@co.mason.wa.us or by phone at (360) 427-9670 ext. 346 or in person, as required by LCR 7 and LSPR 94.04. Mailing address: Mason County Clerk / P.O. Box 340 / Shelton, WA 98584

4. Person scheduling this hearing

Plaintiff/Petitioner or his/her lawyer

Defendant/Respondent or his/her lawyer

Person asking for this hearing signs here

Print name (if lawyer, also list WSBA #)

Date

Mailing Address

City/State/Zip

Phone

E-mail Address

Plaintiff/Petitioner Defendant/Respondent: I have received a copy of this document and _____

Person receiving copy signs here

Print name (if lawyer, also list WSBA #)

Date

5. Declaration of Service

I declare that on _____ 20____, I deposited in the United States mail delivered through a legal messenger service personally delivered a copy of this notice of hearing along with _____

_____ to all the people listed below in section 6.

I declare under penalty of perjury under the laws of the State of Washington that the above is true and correct.

Signed at _____ on _____

City

State

Date signed

Signature

Printed Name

6. Names and Contact Information for Everyone Notified of this Hearing

Name: _____

Name: _____

Attorney for: _____

Attorney for: _____

WSBA #: _____

WSBA #: _____

Address: _____

Address: _____

Telephone: _____

Telephone: _____

Email: _____

Email: _____

Name: _____

Name: _____

Attorney for: _____

Attorney for: _____

WSBA #: _____

WSBA #: _____

Address: _____

Address: _____

Telephone: _____

Telephone: _____

Email: _____

Email: _____

Attach more papers if you need.