

Superior/District Court of Washington, County of _____
Municipal Court of the City of _____

State of Washington/City of _____,
Plaintiff,

vs.

Defendant

DOB _____

No. _____

Note for Calendar re: Blake Motion to Vacate
Drug Possession Conviction and Refund
Paid LFO Amounts

☒ Clerk's action required: 1

Notice of Hearing

To the Court Clerk and the Prosecuting Attorney for County/City of _____:

1. I request that a court hearing on Defendant's **Blake Motion** to Vacate Drug Possession Conviction and Refund Paid LFO Amounts be considered at the following date, time, and location:



for: _____ at: _____ ☐ a.m. ☐ p.m.
date *time*

at: _____ ☐ County Superior Court
name of county or city of the court ☐ County District Court
☐ City Municipal Court

Judge or Docket/Calendar: _____

Court Address: _____

2. I request (check one):

- ☐ The Court rule on Defendant's motion without Defendant's appearance.
☐ To appear at the calendar (check one): ☐ in person ☐ by phone/video, if available

I understand that if I request to appear and then do not appear that the Court may continue my case or rule on the motion in my absence.

Dated this _____ day of _____, 20_____.



Person asking for this hearing signs here

Print name (if lawyer, also list WSBA #)

I agree to accept legal papers for this case at:

address

city state zip

email (optional)

This does **not** have to be your home address. If this address changes before the case ends, you **must** notify all parties and the court clerk in writing.