

SUPERIOR COURT OF CALIFORNIA, COUNTY OF CALAVERAS

400 Government Center Drive, San Andreas, CA 95249  
Telephone:(209) 754-9800; Web: [www.calaveras.courts.ca.gov](http://www.calaveras.courts.ca.gov)

Attorney or Party without an Attorney (Name and Mailing Address)  
MUST BE LEGIBLE  
  
Attorney For:  
Telephone No. ( ) -

Clerk's File Stamp

People of the State of California  
Vs.  
Defendant (insert name):

Case No:

**Notice of Motion and Motion to Continue Court Trial  
(Infractions Only)**

Date of Hearing/Trial: \_\_\_\_\_ Time: \_\_\_\_\_ Dept: \_\_\_\_\_  
Citing Agency: \_\_\_\_\_ Officer: \_\_\_\_\_ Badge # \_\_\_\_\_

It is the policy of the Superior Court of California, County of Calaveras to require written notice, filed with the court and served upon the opposing party at least ten (10) calendar days prior to the trial date to be continued unless good cause is found for failure to provide timely notice.

**I request a continuance of the above court trial for the following reason(s)** (If you are unable to provide at least 10 days notice, you must also explain why you are unable to provide the required notice):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- See reverse or attached declaration for additional information supporting the motion.
- I understand I have a right to a trial within 45 days of entering my plea and waive that right in order to accommodate this request for continuance (defendant only.)

A copy of this motion was  mailed  personally delivered to the  defendant  citing officer/agency \_\_\_\_\_ on \_\_\_/\_\_\_/\_\_\_ at the following address:

(Optional) In addition to the requirement above, the  defendant  citing officer/agency was also notified by  Telephone  E-mail  Fax (enter number or e-mail address) \_\_\_\_\_  
On date: \_\_\_\_\_

*\*To the opposing party:  
If you wish to oppose this Notice of Motion and Motion to Continue Court Trial you must submit your opposition to the court within 5 days of this notice.*

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed at \_\_\_\_\_, California, on \_\_\_\_\_.

\_\_\_\_\_  
Printed name of declarant

\_\_\_\_\_  
Signature of declarant