

IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON

IN AND FOR THE COUNTY OF SPOKANE

State of Washington,	)	
Plaintiff,	)	Case No. _____
v.	)	
	)	CCCA CALENDAR
_____ ,	)	NOTE FOR HEARING – <b>BENCH</b>
DEFENDANT.	)	<b>WARRANT RECALL</b>
DOB _____	)	(NTMTDK) **This form for BW Recall ONLY*

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TO THE CLERK OF THE COURT AND TO: DPA \_\_\_\_\_ AND  
DEFENSE ATTORNEY \_\_\_\_\_

The undersigned has scheduled a motion for **BENCH WARRANT RECALL**.  
The hearing is scheduled for:

**Wednesday** \_\_\_\_\_ (date) at **3:30 p.m.**

To be heard at: Spokane County Superior Court – **Chief Criminal – Courtroom 401**  
1116 West Broadway  
Spokane, WA 99260-0350

SIGNED BY \_\_\_\_\_ Print name \_\_\_\_\_

Current Phone #: \_\_\_\_\_

\*\*Notice to attorneys by CT ADMIN \_\_\_\_\_\*\*

**ORIGINAL COPY for Court**

**COPY for Defendant**