SUPCR 205

ATTORNEY OR PARTY WITHOUT AN ATTORNEY (Name, State Bar number, and address): NAME:	FOR COURT USE ONLY
ADDRESS:	
CITY, STATE, ZIP:	
TELEPHONE NO:	
FAX NO. (Optional): EMAIL ADDRESS (Optional):	
ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CRUZ	
701 Ocean Street, Room 120	
Santa Cruz, CA 95060	
Santa Cruz Branch	
PEOPLE OF THE STATE OF CALIFORNIA	
VS.	
DEFENDANT:	
	CASE NUMBER:
REQUEST AND ORDER TO CALENDAR CASE	
(FOR ATTORNEY AND AGENCY USE ONLY)	
Good cause appearing from the oral/written request of	y/Probation/HSA/Other Agency)
The above-referenced case(s) is/are ordered to be on calendar for the following r	
 Arraignment on Violation of: ☐ Probation ☐ Conditional Sentence because: _ 	
2. Other (Disposition, Setting, etc.):	
3. ☐ Modification of: ☐ probation terms or ☐ conditional sentence	
4. District Attorney's request for late filing of new criminal complaint	
5. \square Appearance or \square surrender after issuance of warrant	
6. ☐ Defendant is: ☐ in custody ☐ not in custody ☐ Defendant has	s bench warrant outstanding
7. ☐ Bail bond filed ☐ cash bail ☐ property bond filed	S
8. Defendant was: notified by on on	, 20 at
(Name)	(Date & Time)
By: telephone call email in person	(= 200 00 0000)
9. Pending court date in Department	<u> </u>
10. Opposing counsel was notified of this red	quest on, 20 at
(Name)	(Date & Time)
By: telephone call email in person	
ORDER	
☐ District Attorney's request for late filing of a new criminal complaint is grant	ed.
1. Set case on calendar at at	
	·
2. Date of at at	in Dept is vacated.
3. Bench Warrant/Warrant of Arrest is ordered recalled	(Judge's Initials)
Dated:Time:	
Judicial Officer	's Signature)