



# Maricopa County Justice Courts, Arizona

STATE OF ARIZONA

CASE NUMBER: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
vs.

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

Deputy County Attorney / Address / Phone /Email

Defendant(s) Name / Address / Email / Phone

(Type */s/* in front of your name indicating an e-signature).

Attorney for Defendant(s) Name / Address / Phone /Email

### MOTION (Criminal)

- Continue     Dismiss     Modify Release Conditions     Other \_\_\_\_\_
- Oral Argument Requested     By Agreement

I would like the court to grant this motion because:

Date: \_\_\_\_\_  
 State     Defendant's Attorney     Defendant

I have no objection to the above motion     Time excluded     I object to the above motion because:

Date: \_\_\_\_\_  
 State     Defendant's Attorney     Defendant

### RULING ON MOTION

**IT IS ORDERED:**  Granting said motion     Denying said motion

This matter is reset for: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

- Time is ordered excluded     Time Not Excluded     Release Conditions to Remain the Same

Date: \_\_\_\_\_  
Justice of the Peace

I have received a copy of this form. I understand standard conditions and all other conditions of my release, and the consequences of violating this order. I agree to comply fully with each of the conditions imposed on my release and to notify the court promptly in the event I change my place of residence.

Date: \_\_\_\_\_ (Type */s/* in front of your name indicating an e-signature).  
Defendant

Be in court at least 15 minutes before the scheduled hearing.  
**YOU MUST CHECK IN AT THE FRONT COUNTER BEFORE ENTERING THE COURT ROOM.**  
 (Esté en el tribunal por lo menos 15 minutos antes de la audiencia programada.)  
 (DEBE REGISTRARSE EN EL MOSTRADOR DELANTERO ANTES DE ENTRAR EN LA SALA DEL TRIBUNAL)

REQUESTS FOR REASONABLE ACCOMMODATIONS FOR PERSONS WITH DISABILITIES SHOULD BE MADE TO THE COURT AS SOON AS POSSIBLE.  
(LAS SOLICITUDES PARA ARREGLOS O ADAPTACIONES RAZONABLES PARA PERSONAS CON DISCAPACIDADES SE DEBEN PRESENTAR ANTE EL TRIBUNAL LO MAS ANTES POSIBLE.)

If an interpreter is needed, please contact the court listed above to request an interpreter be provided.  
(En caso de necesitarse un intérprete, favor de comunicarse con el Tribunal antes mencionado para solicitar que se brinden los servicios de un intérprete.)

I CERTIFY that a copy of this document has been or will be provided on \_\_\_\_\_ to:  
 The State     Defendant     at the above address     in court     Defendant's Attorney     at the above address     in court  
 Date: \_\_\_\_\_ Clerk \_\_\_\_\_