

**Superior Court of Washington  
County of Okanogan**

And

Petitioner,

Respondent.

**No.**

**Note for Hearing  
Clerk's Action Required  
(NTHG)**

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**To the Clerk of Court and to:**

1. Please note that this case will be place on the hearing calendar regarding

Civil Law and Motion Calendar for hearing on Tuesday, \_\_\_\_\_ at 9:00 am  
(date)

Agreed Orders Calendar on Tuesday, \_\_\_\_\_ at 11:00 am  
(date)

Interpreter required \_\_\_\_\_  
(language)

Place: Okanogan Superior Court (*Courtroom to be determined*)  
149 3<sup>rd</sup> Ave N., Okanogan, WA 98840

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Requesting Party or Lawyer/WSBA No.