

SUPERIOR COURT OF WASHINGTON, COUNTY OF COWLITZ

In Re:

No:

Plaintiff/Petitioner,

and

Defendant/Respondent.

CIVIL CALENDAR NOTICE

****Clerk's Action Required****
(NTMTDK)

To: Cowlitz County Clerk
To: All parties and/or attorneys listed at end

Place: To be ruled upon by assigned judicial officer at Cowlitz County Superior Court, Kelso, WA. **You must respond in writing and appear via Zoom (see "Zoom Hearings" at www.cowlitzsuperiorcourt.us). DO NOT APPEAR IN PERSON.**

NOTICE: A COURT HEARING AFFECTING YOUR RIGHTS WILL BE HELD VIRTUALLY ON THE DATE BELOW. READ THIS NOTICE CAREFULLY FOR INSTRUCTIONS.
See Superior Court Website for rules, forms, and Zoom help: www.cowlitzsuperiorcourt.us.

WEDNESDAY, _____, 2026 AT 1:00PM
PROBATE/GUARDIANSHIP CALENDAR (Zoom ID: See court website)
(Decisions made on filed written documents only, with proof of service filed.)

THIS MOTION IS REGARDING: _____

WEDNESDAY, _____, 2026 AT 2:00PM
CIVIL CALENDAR (Zoom ID: See court website)
(Decisions made on filed written documents only, with proof of service filed.)

THIS MOTION IS REGARDING: _____

YOU MUST SUBMIT PROPOSED (DRAFT) ORDERS FOR THE COURT TO SIGN.

Name: _____
Address: _____

Phone: _____

-WARNING-

YOU MUST RESPOND IN WRITING. YOUR WRITTEN RESPONSE MUST BE FILED WITH THE COURT NO LATER THAN:

DATE: _____

(The date above must comply with state and local court rules.)

The court will decide this motion (request) based on only the documents filed. If you do not submit documents in time, the court will rule without considering your evidence. You **MAY NOT** appear in person for this motion and must submit documents for consideration. See www.courts.wa.gov/forms or www.washingtonlawhelp.org for forms and instructions or purchase from clerk's office. Any filings made less than three (3) days prior to docket will not be available for court review without a bench copy.

Names and addresses of the parties and/or their attorneys in named cause of action. **EMAIL ADDRESS IS REQUIRED FOR HEARING NOTIFICATION:**

Name: _____ Name: _____

Address: _____ Address: _____

Email: _____ Email: _____

Phone: _____ Phone: _____

Proof of Service: The undersigned certifies that all parties and/or counsels have been served a copy of this notice either personally or by mail.

Date: _____ Submitted by: _____

Name

Email Address