

STATE OF INDIANA)
) (\$):
COUNTY OF MARION)

IN THE MARION COUNTY SMALL CLAIMS COURT
PERRY TWP DIVISION

Cause Number: 49K04-_____

Plaintiff

v.

Defendant

MOTION FOR CONTINUANCE

I affirm under the penalties for perjury that the following representations are true:

1. This matter is scheduled for a hearing on _____.

2. I am requesting a continuance for the following reason: (Check)

_____ medical _____ seek legal counsel _____ obtain evidence
_____ work _____ secure witness _____ other

3. Explain: _____

4. I request a continuance for _____ day(s).

5. I have contacted opposing counsel/party and advised them of this continuance and they (check one):
_____ Object _____ Do not object OR _____ I do not know their position

Signature

Date

CERTIFICATE OF SERVICE

I hereby certify that a copy of this document has been mailed upon opposing counsel/party, on or about _____ (date).

Signature
Current Address: _____

Date

Email: _____
Telephone: _____

ORDER

Motion to Continue is:

_____ Granted. Hearing is reset to _____ over/without objection by opposing party/counsel as verified by court staff.

_____ Denied.

Date

Judge Cheryl Rivera
Marion County Small Claims Court
Perry Twp Division