## IN THE SUPERIOR COURT OF NEWTON COUNTY STATE OF GEORGIA

Plaintiff,	) Civil Action No.:	
VS.	)	
	)	
Defendant.	)	
REQUE	ST FOR HEARING	
Name, address, and e-mail address of Party req	uesting hearing:	
Name, address, and e-mail address of opposing	counsel or Party:	
		· · · · · · · · · · · · · · · · · · ·
Purpose of Hearing (Divorce Final, Name Char	nge Final, etc)	
Service Date of Defendant OR Date Acknowle		
NOTE**A hearing date CANNOT be set an office if it has been less than 30 days since filed, if there is no mailing address for the de	service was rendered, if proof	of service has not been
	This day of	, 20
	Plaintiff/Defendant, Pro-se	

THIS FORM IS ONLY TO BE COMPLETED AND SUBMITTED <u>AFTER</u> PROOF OF SHERIFF'S SERVICE OR AN ACKNOWLEDGMENT OF SERVICE HAS BEEN FILED. A HEARING DATE CANNOT BE SET UNTIL SERVICE IS COMPLETED.

Please complete this form and certificate of service and file with the Newton County Clerk of Superior Court. A copy of the request for hearing shall be mailed or emailed to the opposing party.

- 1. Once the Request for Hearing is filed, the clerk's office will forward the case to the judge for review.
- 2. All information requested MUST be provided or your case will not be forwarded to the judge.

## **CERTIFICATE OF SERVICE**

This is to certify that I have this day served the parties in the foregoing matter with a copy of the attached Request for Hearing form by depositing said copy in the United States Mail in a properly addressed envelope with adequate postage thereon as follows:

Name and Address of Oppo	osing Attorney/Party	:	
This day of	, 20		
		Plaintiff/Defendant, Pro	-se