Person Filing:

Address (if not protected):

City, State, Zip Code:

Telephone:

Email Address:

**IN THE MUNICIPAL COURT**

**CITY OF BULLHEAD CITY**

**COUNTY OF MOHAVE, STATE OF ARIZONA**

State of Arizona Case Number:

**Plaintiff**

(Please check all that apply)

Vs.  **MOTION**

       **MOTION TO CONTINUE**

**Defendant**  Arraignment

Pretrial Conference

Sentencing/Change of Plea

Other:

The section below must be written to explain your request - what you want the judge to order if they grant your Motion. The judge will sign the attached Order noting their decision.

|  |
| --- |
|  |

Date:

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Defendant:

Case Number:

Copy to City Prosecutor for input. Clerk:      Date:       Due back:

Clerk Statement:  The City Prosecutor Statement:  Does not object.

Does object due to the following:

|  |
| --- |
|  |
|  |
|  |

Date:       Signature/Initials:

**ORDER**

**GRANTED**

**Motion to Continue GRANTED:**

It is Ordered resetting the above captioned cause for  the  day of , 20 at the hour of  am/pm (Mountain Standard Time).

**Failure to appear may result in additional charges being filed against you and/or a warrant issued for your arrest.**

**DENIED**

|  |
| --- |
|  |
|  |
|  |
|  |

Signed this       day of      , 20     .

Bullhead City Judge

By signing below, I acknowledge receipt of this Order.

     

Defendant Date

Copies issued to:  Defendant Date:       Delivery Method:

City Prosecutor      

Defense Attorney      