ATTORNEY OR PARTY WITHOUT AN ATTORN	NEY (Name, state bar number, and address)	FOR COURT USE ONLY	
TELEPHONE NO: EMAIL:	FAX NO:		
SUPERIOR COURT OF CAL	IFORNIA		
COUNTY OF ALPINE 14777 STATE ROUTE 89, PO			
MARKLEEVILLE, CA 96120 530-694-2113			
PLAINTIFF:			
THE PEOPLE OF THE STATE OF CALIFO	DRNIA		
DEFENDANT:		CITATION NUMBER:	
REQUEST FOR TRA	FFIC COURT TRIAL	CASE NUMBER:	
☐ I am the defendant in this case. I am pleading not guilty to all violations alleged on my citation and I am requesting to schedule a court trial before a judge.			
I have been retained by the defendant in this matter. I have advised the defendant of the charges, possible pleas and defenses, potential direct consequences of conviction, and his/her constitutional and statutory rights, including without limitation the right to a speedy trial. I am entering a plea of not guilty to all alleged violations on behalf of my client and requesting to schedule a court trial before a judge.			
		a trial within 45 days of the filing date of the trial up to 90 days from the filing date of	
☐ I am requesting to appear remotely version of remote appearance informations.		, for the court trial. My email address for	
I understand that by appearing remotely for trial, any evidence I wish the court to consider must be received by the court no later than five days prior to my trial date and served on all parties in this matter.			
Date Defendant's / Attorney's Signature			
[TO BE COMPLETED BY COURT]			
The defendant's request is denied.			
Other:			
The defendant's request is granted. A	A court trial is scheduled as follows:		
Court hearing date:	The court heari	ng will be at:	
DATE:	ADDRESS:		
TIME:	Alpine County (14777 State Ro	Courthouse ute 89, Markleeville, CA 96120	
Remote appearance: approved denied			
Date Deputy Court Clerk			