

STATE OF INDIANA )  
 )  
COUNTY OF ELKHART )

IN THE ELKHART SUPERIOR/CIRCUIT COURT  
CASE NO. \_\_\_\_\_

THE STATE OF INDIANA

STREET ADDRESS: \_\_\_\_\_

VS

CITY, STATE, ZIP CODE: \_\_\_\_\_

NAME: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

D.O.B.: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

**MOTION**

I am requesting the Court to do the following: (State the **specific** action you are requesting from the Court.)

Reasons for request: (Give a brief detailed reason for your request.)

Is a hearing date requested?  Yes  No

More time requested?  Yes  No

If yes, how much time? \_\_\_\_\_

**ATTENTION: If a lawyer is currently representing the Defendant in this case, the Court will NOT act upon any filings made by the Defendant. Also, you MUST serve a copy of this Motion on the State of Indiana (prosecutor).**

*I affirm under the penalties for perjury, the foregoing representations are true and correct.*

**Date:** \_\_\_\_\_ **Signature:** /s/ \_\_\_\_\_

**CERTIFICATE OF SERVICE**

I certify that on the \_\_\_\_\_, a complete and accurate copy of the foregoing Motion was served on the State of Indiana via the Elkhart County Prosecuting Attorney's Office (301 South Main Street, Suite 100, Elkhart, IN 46516) by personal delivery, by first class mail, or by the Indiana electronic filing system (IEFS).

**Signature:** /s/ \_\_\_\_\_