NAME AND ADDRESS OF ATTORNEY FOR PARTY:		FOR COURT USE ONLY
TELEPHONE NUMBER:		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF IMPERIAL  650 Wake Avenue, El Centro, CA 92243  939 West Main Street, El Centro, CA 92243  2124 Winterhaven Drive, Winterhaven, CA 92283  People of the State of California,		
vs. Defendant(s):		
MISDEMEANOR WINDOW ARRAIGNMENT		CASE NUMBER:
<ol> <li>The original copy of this form must be filed with the court no less than 24 hours before the scheduled arraignment event date.</li> <li>Upon filing of this form, the clerk of the court will provide trial dates to counsel.</li> <li>This form must be completed in ink or typewritten.</li> <li>This form must be signed by defendant's attorney of record.</li> <li>Defendant's attorney must inform the court if date selected by clerk, pursuant to calendar policy, is unacceptable.</li> <li>Defendant's attorney must appear at all hearings, represent to the court that the case will go to trial, or that a disposition without trial will be made.</li> <li>By signing this form, the attorney certifies that the case does not involve domestic violence within the meaning of Family Code §6211.</li> </ol> I hereby make a general appearance on behalf of the above-named defendant, waive formal arraignment,		
enter a plea of NOT GUILTY, and a	request that the case be set for	
∐ By Jury	☐ By Court	
Release Status:  Own Recognizance	Bail Posted	☐ Bond Posted
Attorney for Defendant:	(TYPE OR PRINT NAME)	Bar #:
Signature of Attorney:		Date:
FOR COURT USE ONLY		
Pre-trial is set for:	at	am _ pm, in Dept
<b>Readiness Hearing</b> is set for: at 8		:30 am in Dept
Jury Trial is set for: at 8:30 am		in Dept
(within 40 days of this entry of pleating Copy of complaint provided to complaint provid	a)	
Deputy Clerk		Date: