

SHORT CALENDAR LIST CLAIM/RECLAIM

JD-CL-6 Rev. 10-99
Pr. Bk. Secs. 11-13, 11-16, 11-18, 17-31

STATE OF CONNECTICUT
SUPERIOR COURT
www.jud.state.ct.us

INSTRUCTIONS

Do not file with original motion. Use only for reclaiming motions or for motions that must be claimed by rule (i.e., Pr. Bk. Sec. 17-31).

DOCKET NO.

RETURN DATE

Judicial District Housing Session G.A. No. _____

ADDRESS OF COURT (No., street, town and zip code)

NAME OF CASE (First named plaintiff and defendant)

The: PLAINTIFF
 DEFENDANT

is claiming or reclaiming the following motion(s)
for the **SHORT CALENDAR LIST**:

DATE OF MOTION	NO. OF MOTION (if known)	TITLE OF MOTION	ORAL ARGUMENT REQUESTED (X)	TESTIMONY REQUESTED (X)

I hereby certify that a copy hereof was mailed/delivered to all counsel and pro se parties of record on:

DATE

NAME OF EACH PARTY SERVED*

ADDRESS AT WHICH SERVICE WAS MADE

*If necessary, attach additional sheet with names of each party served and the address at which service was made.

SIGNED X NAME AND MAILING ADDRESS OF PERSON FILING CLAIM/RECLAIM TELEPHONE NO.	FOR COURT USE ONLY
	FILE DATE