



STATE OF RHODE ISLAND JUDICIARY

SUPERIOR COURT

OMNIBUS CALENDAR ASSIGNMENT FORM

<input type="checkbox"/> Providence/Bristol County	<input type="checkbox"/> Kent County	<input type="checkbox"/> Washington County	<input type="checkbox"/> Newport County
			CASE NUMBER
VS.			

CALENDAR TYPE MUST BE SELECTED FOR SCHEDULING PURPOSES

☐ FORMAL SPECIAL CAUSE CALENDAR ☐ BUSINESS CALENDAR ☐ DISPOSITIVE MOTION CALENDAR

FORMAL SPECIAL CAUSE AND BUSINESS CALENDAR

- | | |
|--|--|
| <input type="checkbox"/> AGENCY APPEAL
<input type="checkbox"/> ASSESSMENT OF DAMAGES
<input type="checkbox"/> APPOINTMENT OF A SPECIAL MASTER
<input type="checkbox"/> CONFIRM ARBITRATION
<input type="checkbox"/> DECLARATORY JUDGMENT
<input type="checkbox"/> ENTRY OF JUDGMENT
<input type="checkbox"/> EVIDENTIARY HEARING
<input type="checkbox"/> FIRST AND FINAL REPORT
<input type="checkbox"/> FORECLOSURE OF RIGHT OF REDEMPTION
<input type="checkbox"/> FRIENDLY SUIT
<input type="checkbox"/> APPOINTMENT OF PERMANENT RECEIVER
<input type="checkbox"/> MOTION TO ATTACH
<input type="checkbox"/> MOTION FOR ATTORNEYS FEES
<input type="checkbox"/> MOTION TO COMPEL RECEIVER
<input type="checkbox"/> MOTION TO DEFAULT
<input type="checkbox"/> MOTION FOR ENTRY OF FINAL JUDGMENT
<input type="checkbox"/> MECHANIC'S LIEN
<input type="checkbox"/> MOTION FOR APPROVAL
<input type="checkbox"/> MANDATORY INJUNCTION
<input type="checkbox"/> MOTION TO ADJUDGE IN CONTEMPT
<input type="checkbox"/> OTHER FORMAL MATTER (EXPLAIN) _____
<input type="checkbox"/> OTHER BUSINESS MATTER (EXPLAIN) _____ | <input type="checkbox"/> MOTION FOR PROTECTIVE ORDER
<input type="checkbox"/> MOTION TO RECONSIDER
<input type="checkbox"/> ORAL PROOF OF CLAIM
<input type="checkbox"/> PETITION TO ALLOW SECURED CLAIM
<input type="checkbox"/> PETITION TO APPOINT TEMPORARY RECEIVER
<input type="checkbox"/> PROOF OF CLAIM
<input type="checkbox"/> PETITION TO ENFORCE
<input type="checkbox"/> PETITION FOR INSTRUCTIONS
<input type="checkbox"/> PRELIMINARY INJUNCTION
<input type="checkbox"/> APPOINTMENT OF PERMANENT SPECIAL MASTER
<input type="checkbox"/> PETITION TO RECLAIM
<input type="checkbox"/> PARTITION PROCEEDINGS
<input type="checkbox"/> PETITION TO SELL
<input type="checkbox"/> RECEIVERSHIP PROCEEDINGS
<input type="checkbox"/> SHOW CAUSE HEARING
<input type="checkbox"/> SUPPLEMENTARY PROCEEDINGS
<input type="checkbox"/> TITLE PROCEEDINGS
<input type="checkbox"/> TEMPORARY RESTRAINING ORDER
<input type="checkbox"/> TRUSTEE PROCEEDINGS
<input type="checkbox"/> VACATE ARBITRATION
<input type="checkbox"/> WRIT OF MANDAMUS
<input type="checkbox"/> WRIT OF REPLEVIN |
|--|--|

If you require witnesses, state the estimated time frame of said hearing and attach a witness list and expected testimony to this form.

DISPOSITIVE MOTION CALENDAR

- | | |
|---|--|
| <input type="checkbox"/> MOTION TO DISMISS, UNDER RULE 12
<input type="checkbox"/> MOTION FOR ENTRY OF JUDGMENT ON PLEADINGS
<input type="checkbox"/> OTHER DISPOSITIVE MOTION: (EXPLAIN) _____ | <input type="checkbox"/> MOTION FOR PARTIAL SUMMARY JUDGMENT
<input type="checkbox"/> MOTION FOR SUMMARY JUDGMENT |
|---|--|

HEARING DATE:

APPROVED BY:

Failure to fill out this form properly may result in your hearing date not being approved.

Signature of Attorney or Self-represented Litigant
/s/ _____

Address:

Rhode Island Bar Number:

Office Telephone Number:

Date: