

Berea Municipal Court 11 Berea Commons, Berea, OH 44017 Phone (440) 826-5862 Fax (440) 234-2768 www.bereamunicipalcourt.org

MOTION FOR CONTINUANCE

Date

Defendant	*
	*
	*
	*
Case Number	*

I, the below named Defendant herein moves this Honorable Court for a continuance of the hearing currently scheduled for . The reason for this request is _____

L I furthermore, knowingly, intelligently and voluntarily waive my constitutional and statutory right to a Speedy Trial pursuant to Ohio

Revised Code 2945.71 understanding that this does not mean the Defendant waives their right to have a trial, only that the Defendant waives the right to be tried within the limits set forth in Ohio Revised Code 2945.74 and consents to the scheduling of this case in a manner convenient to the Berea Municipal Court. *

X Signature of Defendant

Defendant's Address

City, State, Zip

Defendant's Daytime Phone Number

Defendant's Evening Phone Number

Defendant's Cell Phone Number

Defendant's Email Address* *By providing an E-mail address, I acknowledge I wish to receive notices via email



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CERTIFICATE OF SERVICE

A copy of the foregoing Motion for Continuance has been sent via regular U.S. Mail, postage prepaid to:

Prosecuting Attorney Name

Attorney Address

On this ______day of ______, 20_____.

X Signature of Defendant