This	box	for	Court	use	ONLY

IN THE COURT OF THE GILA RIVER INDIAN COMMUNITY STATE OF ARIZONA

Sacaton Court: 721 W. Seed Farm Road, P.O. Box 368, Sacaton, Arizona 85147 520-562-9860 (P), 520-562-9867 (F)

Westend Judicial Center: 4751 W. Pecos Road, Laveen, Arizona 85339 520-562-9862 (P), 520-562-9869 (F)

E-mail: courtpublicmailbox@gric.nsn.us

REQUEST TO CLEAR BENCH WARRANT

<u>DO NOT</u> use this form to clear arrest warrants.

Please provide all the requested information and print clearly.

Defendant's Full Name:	Date of Birth:
Defendant's Case Number(s):	
Defendant's Mailing Address:	
Defendant's Physical Address:	
Defendant's Home and/or Cell Phone Number:	
Defendant's E-mail Address (if available):	
I will appear at the: Sacaton Court Westend Judicial Center	

I acknowledge that I have a bench warrant in the above case(s) issued by the Gila River Court. I request the Court to clear/quash the bench warrant. I understand that I must complete this form and appear in Court at the assigned date and time. I understand if I fail to appear in Court, the Court will not grant my request to clear/quash the bench warrant and the bench warrant will remain in effect. If my bench warrant is cleared/quashed, I promise to appear at my next Court date. If I fail to appear at my next Court date, I understand my bench warrant may not be cleared/quashed in the future.

SIGNATURE: I declare under penalty that the foregoing is true and correct.

Signature	Date	
	COURT USE ONLY - DO NOT WRITE BELOW THIS LINE	
DATE OF BENCH WARRAN	IT:	
IT IS ORDERED that the requ	uest is: GRANTED DENIED	
IT IS FURTHER ORDERED:		
Dated:	Judge of the Community Court:	
	Clerk of the Community Court:	