

SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	FOR COURT USE ONLY
PEOPLE OF THE STATE OF CALIFORNIA v. DEFENDANT:	
CAPITAL CASE ATTORNEY LIST OF MOTIONS	
<input type="checkbox"/> Pretrial <input type="checkbox"/> Trial	CASE NUMBER:

Instructions: For each motion you make in a case in which the death penalty may be imposed, including any ex parte motions, provide the date the motion was made, the department in which it was made, and a brief description of the motion. For pretrial motions, check the box if the motion is awaiting resolution.

Date	Court Dept./Div.	Description	Awaiting Resolution
			<input type="checkbox"/>

(continued on reverse)

Page 1 of 2

PEOPLE OF THE STATE OF CALIFORNIA v. DEFENDANT:	CASE NUMBER:
--	--------------

Date	Court Dept./Div.	Description	Awaiting Resolution
			<input type="checkbox"/>

Check here if you need more space. Attach a sheet of paper and write "CR-603, List of Motions" for a title.

Date:

_____, attorney for _____
 (TYPE OR PRINT NAME) (PARTY)



(SIGNATURE OF ATTORNEY)