

1 **MOT**

2 Name: _____

3 Bar #: _____

4 Address: _____

5 City, State, Zip: _____

6 Phone: _____

7 **Attorney for Defendant**

Print legibly in the section above

8 **IN THE MUNICIPAL COURT IN THE CITY OF LAS VEGAS,**
9 **COUNTY OF CLARK, STATE OF NEVADA**

10 CITY OF LAS VEGAS, NEVADA

11 Plaintiff,

12 vs.

13 Defendant

MOTION TO QUASH BENCH WARRANT

CASE NUMBER(s) _____

DEPARTMENT _____

14 Comes now the Attorney, _____, for the Defendant, _____,
15 in the above entitled matters files this motion with the request that the bench warrant be quashed for the
16 following reasons:
17 _____
18 _____

19 DATED this _____ day of _____, _____.

20 Respectfully Submitted by,

21 _____
22 Attorney Signature and Bar Number

23 _____
24
25 RECEIPT OF COPY of the above Motion to Quash Bench Warrant is hereby acknowledged on this
26 _____ day of _____, _____.

27 _____
28 CITY ATTORNEY – Receipt of copy