



# Superior Court of California, County of Solano

## Tentative Ruling Request for Oral Argument

All fields are required. If you fail to provide all information needed, your request will be denied.

Department Four (Judge Nelson)

Case Number: \_\_\_\_\_

Case Name: \_\_\_\_\_

Party Requesting Argument: \_\_\_\_\_

Opposing Counsel Notified?  Yes  No

Attorney: \_\_\_\_\_

Attorney Bar #: \_\_\_\_\_

Email: \_\_\_\_\_

**If you do not have a standalone email program, e.g. Outlook, Thunderbird, or Apple Mail, you can save a copy of your completed form and attach it to your web-based email (Gmail, Yahoo! Mail, etc.). Send the completed and attached form to [D4ROA@solano.courts.ca.gov](mailto:D4ROA@solano.courts.ca.gov).**