

STATE OF NORTH CAROLINA		<i>File No</i>
CHATHAM County		In The General Court Of Justice Superior Court Division
<i>Additional File Numbers:</i>		SECURED LEAVE FORM <i>Rule 26</i> The General Rules of Practice for the Superior and District Courts
<i>Name/Address Of Attorney:</i>		
	<i>Telephone Number</i>	
<i>Email Address:</i>		
<i>Attorney Bar Number:</i>		
<i>Name/Address Of Opposing Counsel:</i>		<i>Trial date:</i>
	<i>Telephone Number</i>	<i>Opposing Counsel email address:</i>

STATEMENT OF ATTORNEY:

I hereby certify that the secured leave period designated below is not being designated for the purpose of delaying, hindering or interfering with the timely disposition of any matter in any pending action or proceeding.
I further certify that no action or proceeding in which I have entered an appearance has been scheduled, peremptorily set or noticed for trial, hearing, deposition or other proceeding during the designated leave period.

	Designated Leave Beginning Date:	
	Designated Leave Ending Date:	Calendar Year: 2009 2010
	Designated Leave Beginning Date:	
	Designated Leave Ending Date:	Calendar Year: 2009 2010
	Designated Leave Beginning Date:	
	Designated Leave Ending Date:	Calendar Year: 2009 2010
<input type="checkbox"/>	There are no other secure leave periods that have been previously designated by the undersigned for this calendar year.	
<input type="checkbox"/>	I have indicated all previously designated Secure Leave periods during the current calendar year that have been previously designated pursuant to Rule 26 below:	
	Designated Leave Beginning Date:	
	Designated Leave Ending Date:	Calendar Year: 2009 2010
	Designated Leave Beginning Date:	
	Designated Leave Ending Date:	Calendar Year: 2009 2010

CERTIFICATE OF SERVICE:

I hereby certify that a copy of the foregoing Designation of Secured Leave has been served by regular US Mail, postage prepaid, upon the following parties/attorneys:
(Counsel may attach additional Certificate of Service)

<i>Name and Address of Opposing Counsel or Party</i>		
		<i>Telephone Number</i> 919-967-8989
<i>Date</i>	<i>Name Of Attorney</i>	<i>Signature Of Attorney</i>