

SUPERIOR COURT OF THE STATE OF CALIFORNIA, COUNTY OF PLACER

ATTORNEY OR UNREPRESENTED PARTY <i>(Name, State Bar Number, and Address):</i> TELEPHONE NO.: EMAIL ADDRESS <i>(Optional)</i> : ATTORNEY FOR <i>(Name)</i> :	FOR COURT USE ONLY
Superior Court of California, County of Placer 11270 B Avenue Auburn, CA 95603	
In the Matter of:	
DECLARATION REGARDING NOTICE TO ALL PARTIES OF: REQUEST FOR EMERGENCY HEARING AND TEMPORARY ORDERS	CASE NUMBER:

1. I am counsel for _____ _____ in this action.
2. An Emergency Hearing has been scheduled on the date, time, and location indicated below:

Date: _____ Time: _____ Dept: _____ Address of court: <input type="checkbox"/> Same as noted above. <input type="checkbox"/> Other: _____
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3. A §388 petition has been filed by _____ concurrently with this request for an ex-parte hearing. For the reasons stated in the §388 petition, it is necessary that the court make an emergency **temporary** order. *(set forth the exact nature of the temporary order requested)*

Continued on Attachment

4. I have given notice of this Request for Emergency Hearing Request for Order Shortening Time to the following counsel and parties by the stated method and delivered a copy of such notice as stated below:

Attorney: _____ For: _____
 Email Phone Fax Text In Person on _____ at _____ unable to notice
 Notice delivered by: _____ (date) _____ (time)
 Email Mail Fax In Person on (date) _____ at (time) _____ unable to deliver

Attorney: _____ For: _____
 Email Phone Fax Text In Person on _____ at _____ unable to notice
 Notice delivered by: _____ (date) _____ (time)
 Email Mail Fax In Person on (date) _____ at (time) _____ unable to deliver

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Attorney: _____ For: _____
 Email Phone Fax Text In Person on _____ at _____ unable to notice
Notice delivered by: _____ (date) _____ (time)
 Email Mail Fax In Person on (date) _____ at (time) _____ unable to deliver

Parent: _____
 Email Phone Fax Text In Person on _____ at _____ unable to notice
Notice delivered by: _____ (date) _____ (time)
 Email Mail Fax In Person on (date) _____ at (time) _____ unable to deliver

Parent: _____
 Email Phone Fax Text In Person on _____ at _____ unable to notice
Notice delivered by: _____ (date) _____ (time)
 Email Mail Fax In Person on (date) _____ at (time) _____ unable to deliver

Parent: _____
 Email Phone Fax Text In Person on _____ at _____ unable to notice
Notice delivered by: _____ (date) _____ (time)
 Email Mail Fax In Person on (date) _____ at (time) _____ unable to deliver

Tribe: _____
 Email Phone Fax Text In Person on _____ at _____ unable to notice
Notice delivered by: _____ (date) _____ (time)
 Email Mail Fax In Person on (date) _____ at (time) _____ unable to deliver

Other: _____
 Email Phone Fax Text In Person on _____ at _____ unable to notice
Notice delivered by: _____ (date) _____ (time)
 Email Mail Fax In Person on (date) _____ at (time) _____ unable to deliver

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signed at _____ (city), California on _____ (date).

Type or Print Name

Signature of Declarant