

SUPERIOR COURT OF THE STATE OF CALIFORNIA, COUNTY OF PLACER

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar Number, and Address): TELEPHONE NO.: _____ FAX NO.: _____ EMAIL ADDRESS: _____ ATTORNEY FOR: _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF PLACER <input type="checkbox"/> 10820 Justice Center Drive <input type="checkbox"/> 2501 N. Lake Blvd. P.O. Box 619072 P.O. Box 5669 Roseville, CA 95661-9072 Tahoe City, CA 96145 Fax to: (916) 408-6285 Fax to: (530) 584-3471	
PETITIONER: _____ RESPONDENT: _____	
CONTINUE/DROP FORM	CASE NUMBER: _____

ALLOW UP TO 24 HOURS FOR FAXED REPLY

THIS FORM/PROCESS MAY NOT BE USED FOR CONTEMPT OR RESTRAINING ORDERS.

- If the parties agree to a continuance or drop, please check appropriate box below and attach a written agreement or a letter confirming agreement to this form when it is submitted.
- When the responding party has not been served, and a continuance is granted, a copy of this filed document must be served on the Responding party with the original hearing's moving papers.

*Form and attachment must be received by the Court before
Noon (12 p.m.), two (2) court days before the hearing.*

Today's Date: _____ FAX Number (REQUIRED): _____

Hearing Date/Time: _____ Hearing Department: _____

Phone Number: _____ Email Address: _____

*When continuing a court date, please request alternative agreed upon dates 4 to 8 weeks after the current court date.
(See court matrix at www.placer.courts.ca.gov).*

- CONTINUE hearing; or DROP hearing;
- Written agreement or letter confirming agreement between the parties attached; or,
 Responding party has not been served.

Continuance dates requested, in order of preference: *(Please provide a minimum of three dates.)*

- | | |
|-----------------------------|-----------------------------|
| 1. _____ at _____ a.m./p.m. | 4. _____ at _____ a.m./p.m. |
| 2. _____ at _____ a.m./p.m. | 5. _____ at _____ a.m./p.m. |
| 3. _____ at _____ a.m./p.m. | 6. _____ at _____ a.m./p.m. |

The selected date and time set for the continued hearing will be faxed back to the submitting party.

FOR COURT USE ONLY	
<input type="checkbox"/> Drop confirmed on: _____	
<input type="checkbox"/> Hearing continued to: _____	
	Clerk Initials: _____