

PARTY WITHOUT ATTORNEY OR ATTORNEY NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	
DECLARATION REGARDING NOTICE AND SERVICE OF REQUEST FOR TEMPORARY EMERGENCY (EX PARTE) ORDERS	CASE NUMBER:

NOTICE: Do not use this form to ask for domestic violence restraining orders. Before completing this form, read your court's local procedures for requesting temporary emergency orders and obtaining the information needed to complete item 2 of this form. Courts may grant temporary emergency orders with or without an emergency hearing. Find local rules at courts.ca.gov/3027.htm.

1. I am (specify) attorney for petitioner respondent other parent/party
 not a party in the case (name and title/relationship to party):

2. I did did not give notice that
 there will be an emergency court hearing on a request for temporary emergency (ex parte) orders.
 papers will be submitted to the court asking a judicial officer to grant temporary emergency orders without a hearing.
 on the date, time, and location indicated below:

a. Date:	Time:	<input type="checkbox"/> Dept.:	<input type="checkbox"/> Room:
b. Address of court: <input type="checkbox"/> same as noted above <input type="checkbox"/> other (specify):			

3. **NOTICE** (If you gave notice, complete item 3a. If you did not give notice complete item 3b or 3c.)

a. I gave notice as described in items (1) through (5):

(1) I gave notice to (select all that apply)

- | | |
|---|--|
| <input type="checkbox"/> petitioner | <input type="checkbox"/> petitioner's attorney |
| <input type="checkbox"/> respondent | <input type="checkbox"/> respondent's attorney |
| <input type="checkbox"/> other parent/party | <input type="checkbox"/> other parent's/party's attorney |
| <input type="checkbox"/> child's attorney | <input type="checkbox"/> Other (specify): |

(2) I gave notice

- | | | | |
|--|----------------|------------------|--|
| <input type="checkbox"/> personally on (date): | at (location): | , California; at | <input type="checkbox"/> a.m.
<input type="checkbox"/> p.m. |
| <input type="checkbox"/> by telephone on (date): | telephone no.: | at | <input type="checkbox"/> a.m.
<input type="checkbox"/> p.m. |
| <input type="checkbox"/> by voicemail on (date): | voicemail no.: | at | <input type="checkbox"/> a.m.
<input type="checkbox"/> p.m. |
| <input type="checkbox"/> by fax on (date): | fax no.: | at | <input type="checkbox"/> a.m.
<input type="checkbox"/> p.m. |

(3) I gave notice (select one):

- by 10 a.m. the court day before this emergency hearing.
 after 10 a.m. the court day before this emergency hearing because of the following exceptional circumstances (specify):

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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3. a. (4) I notified the person in 3a(1) that the following temporary emergency orders are being requested (specify):

(5) The person in 3a(1) responded as follows: Attachment 3a(5)

(6) I do do not believe that the person in 3a(1) will oppose the request for temporary emergency orders.

- b. **Request for waiver of notice.** I did not give notice about the request for temporary emergency orders. I ask that the court waive notice to the other party to help prevent an immediate (identify the exceptional circumstances)
- (1) danger or irreparable harm to myself (or my client) or to the children in the case.
 - (2) risk that the children in the case will be removed from the state of California.
 - (3) loss or damage to property subject to disposition in the case.
 - (4) Other exceptional circumstances (specify):

Facts in support of the request to waive notice (specify): Attachment 3b.

c. **Unable to provide notice.** I did not give notice about the request for temporary emergency orders. I used my best efforts to tell the opposing party when and where this hearing would take place but was unable to do so. The efforts I made to inform the other person were (specify below): Attachment 3c.

4. **SERVICE OF FORMS**

a. An unfiled copy of *Request for Order* (form FL-300) for temporary emergency orders, *Temporary Emergency (Ex Parte) Orders* (form FL-305), and related documents were served on

petitioner petitioner's attorney other parent/party other parent/party's attorney

respondent respondent's attorney child's attorney

Other (specify):

b. Method of service:

Personal service on (date): _____ at (location): _____, California; at a.m. p.m.

Fax on (date): _____ fax no.: _____ at a.m. p.m.

Overnight mail or other overnight carrier

c. **Documents were not served on the opposing party** due to the exceptional circumstances specified in 3b, above 3c, above Attachment 4c.

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

Date: _____

 (TYPE OR PRINT NAME) ▶ _____
(SIGNATURE)