ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):			FOR COURT USE ONLY		
TELEPHONE NO.: FAX NO. (Optional):					
E-MAIL ADDRESS (Optional):					
ATTORNEY FOR (Name):					
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS:					
MAILING ADDRESS:					
CITY AND ZIP CODE:					
BRANCH NAME:			_		
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT:					
OTHER PARTY:					
			CASE NUMBER:		
FINDINGS AND ORDER AFTER HEARING			ONCE NOWIDER.		
This proceeding was heard					
	time):	in Dept.:	Room	:	
by Judge (name): Temporary Judge					
On the order to show cause, notice of motion or request for order filed (date):				by (name):	
a. Petitioner/plaintiff present	Attor	ney present <i>(name):</i>			
b. Respondent/defendant present		ney present (name):			
c. Other party present	<u></u>	ney present (name):			
THE COURT ORDERS		,			
2. Custody and visitation/parenting time:	As attached	on form FL-341	Other	Not applicable	
3. Child support:	As attached	on form FL-342	Other	Not applicable	
4. Spousal or family support:	As attached	on form FL-343	Other	Not applicable	
5. Property orders:	As attached	on form FL-344	Other	Not applicable	
6. Attorney's fees:	As attached	on form FL-346	Other	Not applicable	
7. Other orders:	As attached Not applicable				
8. All other issues are reserved until further order of court.					
9. This matter is continued for further	hearing on (date):	á	at (time):	in Dept.:	
on the following issues:	•				
Date:		•			
			JUDICIAL OFF	ICER	
Approved as conforming to court order					
Approved as conforming to court order.					
>					
SIGNATURE OF ATTORNEY FOR PETITIONER / PLAI	NTIFF RESPONDENT	/DEFENDANT OTH	ER PARTY		
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Form Adopted for Mandatory Use Judicial Council of California FL-340 [Rev. January 1, 2012]