

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	<i>FOR COURT USE ONLY</i>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT: OTHER PARENT/CLAIMANT:	CASE NUMBER:
<b>ORDER ON COMPLETION OF LIMITED SCOPE REPRESENTATION</b>	

1. The proceeding on the party's (name): \_\_\_\_\_ objection to the attorney's (name): \_\_\_\_\_  
 proposed *Notice of Completion of Limited Scope Representation* (form FL-955) was heard
  - a. on (date): \_\_\_\_\_ at (time): \_\_\_\_\_ in Dept.: \_\_\_\_\_ Room: \_\_\_\_\_  
 by Judge (name): \_\_\_\_\_  Temporary Judge
  - b. The following persons were present at the hearing:
 

<input type="checkbox"/> Petitioner	<input type="checkbox"/> Attorney (name): _____
<input type="checkbox"/> Respondent	<input type="checkbox"/> Attorney (name): _____
<input type="checkbox"/> Other Parent/Claimant	<input type="checkbox"/> Attorney (name): _____
2. **THE COURT FINDS**
  - a.  The attorney demonstrated that he or she has completed the services that the party and attorney agreed that the attorney would perform in the *Notice of Limited Scope Representation* (form FL-950).
  - b.  The party demonstrated that the attorney has not completed the services that the party and the attorney agreed would be performed in the *Notice of Limited Scope Representation* (form FL-950).
  - c.  Other (specify): \_\_\_\_\_
3. **THE COURT ORDERS**
  - a.  The request of the attorney to be relieved of limited scope representation is denied.
  - b.  The attorney is relieved as the limited scope attorney of record for the party/client.
    - (1)  effective immediately.
    - (2)  effective upon the filing of the proof of service of this signed order on the client.
    - (3)  effective on (specify date): \_\_\_\_\_
  - c.  The court further orders (specify): \_\_\_\_\_
  - d.  All legal documents and notices must be served directly on the party using the following address or contact information:  
 Mailing address: \_\_\_\_\_  
 Telephone number: \_\_\_\_\_ E-mail address: \_\_\_\_\_
  - e. Unless otherwise directed by the court, the attorney must serve copies of this order on the parties and their attorneys of record and and file the proof of service with the court.

Date: \_\_\_\_\_

\_\_\_\_\_  
JUDGE OF THE SUPERIOR COURT

**NOTICE TO PARTY/CLIENT:** If the court relieved the limited scope attorney as your attorney of record, **you now represent yourself in the case**. You may wish to seek other legal counsel to represent you. You must keep the court and the other parties in your case informed of your current mailing address and contact information. You may use *Notice of Change of Address or Other Contact Information* (form MC-040) for this purpose.