

**Appendix H**

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**San Francisco ACCESS Courtroom Referral**



# ACCESS Courtroom Referral

PLEASE TAKE THIS SLIP TO ROOM 208 AND SIGN IN TO GET HELP.

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

DEPT #: \_\_\_\_\_ CASE #: \_\_\_\_\_ PRIMARY LANGUAGE: \_\_\_\_\_

TYPE OF CASE:  Small Claims  Civil Harass.  Name Change  Eviction

**ISSUE:**

- |  |   |
|--|---|
| <input type="checkbox"/> Service problems          | <input type="checkbox"/> Improper naming of party       |
| <input type="checkbox"/> Needs reissuance of OSC   | <input type="checkbox"/> Prepare Order After Hearing    |
| <input type="checkbox"/> Does not understand order | <input type="checkbox"/> Information on enforcing order |
| <input type="checkbox"/> Other: _____              | <input type="checkbox"/> Needs to republish OSC         |

**RESULT:**

- MUST RETURN to Courtroom by \_\_\_\_\_
- Matter continued/reissued to \_\_\_\_\_
- Matter taken off calendar

