

# SUPERIOR COURT OF CALIFORNIA, COUNTY OF ALAMEDA

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar Number, Address)		FOR COURT USE ONLY
TELEPHONE NO: E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):  Hayward Hall of Justice 24405 Amador St. Hayward, CA 94544		FAX NO.(Optional):
<b>PETITIONER:</b>		
<b>RESPONDENT:</b>		
<b>REQUEST FOR STATUS CONFERENCE (FAMILY LAW)</b>		<b>CASE NUMBER:</b>

I/We hereby request a status conference in this matter.

Dated:

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(TYPE OR PRINT NAME)

(SIGNATURE OF PETITIONER)

Dated:

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(TYPE OR PRINT NAME)

(SIGNATURE OF RESPONDENT)

## ORDER

This matter is set for a status conference on (date) \_\_\_\_\_ at (time) \_\_\_\_\_ in Dept. \_\_\_\_\_.

**Good cause appearing, it is so ordered.**

Dated: \_\_\_\_\_

\_\_\_\_\_  
Judge of the Superior Court