

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address): TELEPHONE NO.: _____ FAX NO.: _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO <input type="checkbox"/> COUNTY COURTHOUSE, 220 W. BROADWAY, SAN DIEGO, CA 92101-3814 <input type="checkbox"/> FAMILY COURT BUILDING, 1555 6TH AVE., SAN DIEGO, CA 92101-3294 <input type="checkbox"/> MADGE BRADLEY BUILDING, 1409 4TH AVE., SAN DIEGO, CA 92101-3105 <input type="checkbox"/> NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081-6651 <input type="checkbox"/> EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020-3941 <input type="checkbox"/> SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910-5649	<input type="checkbox"/> Dissolution <input type="checkbox"/> Legal Separation <input type="checkbox"/> Nullity <input type="checkbox"/> Paternity <input type="checkbox"/> Custody <input type="checkbox"/> Reserved Issues <input type="checkbox"/> Other
PLAINTIFF(S)/PETITIONER(S)	
DEFENDANT(S)/RESPONDENT(S)	
MEMORANDUM THAT FAMILY LAW CASE IS AT ISSUE	CASE NUMBER _____

1. What date was the petition/complaint filed? _____
2. What date was the response/answer filed? _____
3. All parties have been served with process or have appeared.
4. The case is entitled to preference pursuant to code section _____

EITHER ITEM 5 OR ITEM 6 BELOW MUST BE COMPLETED, NOT BOTH!

5. The trial will take 5 hours or less. Estimated time in hours _____. The undersigned agrees the case may be set on the short cause calendar on any Friday (Monday in East County, Thursday or Friday in North County) except: _____
 _____ (List Thursday/**Friday/Monday** dates at least four months into the future).

For all short cause trials, counsel are reminded of the meet and confer requirement as set forth in the local rules.

6. The trial will take _____ days.
7. Indicate below, names of party being represented and trial counsel:

Petitioner _____	Respondent _____
Attorney _____	Attorney _____
Firm _____	Firm _____
Address _____	Address _____
_____	_____
Telephone _____	Telephone _____

Any party not in agreement with any of the above shall, within 10 days of service thereof, file it's own memorandum with the court.

Dated: _____

Signature of Trial Counsel/Petitioner or Respondent

	CASE NUMBER:
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DECLARATION OF SERVICE BY MAIL

I, _____ declare that: I am over the age of 18 years and not a party to the case; I am employed in, or am a resident of, the County of San Diego, California; _____; where the mailing occurred; and my business address is: _____.

(NO., STREET) (CITY) (STATE)

I served the **MEMORANDUM THAT FAMILY LAW CASE IS AT ISSUE** by placing true copies thereof in separate envelopes addressed to each addressee, respectively, as follows:

I then sealed each envelope and, with the postage thereon fully prepaid, placed each for deposit in the United States Postal Service at _____.

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

Dated: _____ Signature _____