ATTORNEY OR PARTY WITHOUT ATTORNI	EY STATE BAR NUMBER:	FOR COURT USE ONLY	
NAME:			
FIRM NAME:			
STREET ADDRESS:			
CITY:	STATE: ZIP CODE:		
TELEPHONE NO.:	FAX NO.:		
E-MAIL ADDRESS:			
ATTORNEY FOR (name):			
SUPERIOR COURT OF CALIFOR	RNIA. COUNTY OF		
STREET ADDRESS:			
MAILING ADDRESS:			
CITY AND ZIP CODE:			
BRANCH NAME:			
PLAINTIFF/PETITIONER:			
DEFENDANT/RESPONDENT:			
OTHER PARENT/PARTY:			
OTHER PARENT/PARTT.		SUPERIOR COURT CASE NUMBER:	
RESPONSE TO APP	ELLANT'S PROPOSED SETTLED STATEMENT		
	(UNLIMITED CIVIL CASE)	COURT OF APPEAL CASE NUMBER (if known):	
	Amended (If applicable, specify 1st, 2nd, 3rd, etc. amended form.)	,	
N. C. H. H. H. G. H. L.		46	
	pare a response to Appellant's Proposed Settled Staten on on Appeals Procedures for Unlimited Civil Cases (for		
for Proposed Settled Statem		marr-voi-ini o, and information sheet	
701 1 10posed Gened Gatem	ion (ionii Ai i o i a iii o).		
Important! Do not use this fo	rm if you elect to provide a reporter's transcript instead	of proceeding with a settled statement.	
1 SHMMARY OF THE DART	IES' TESTIMONY AND OTHER EVIDENCE		
		. (1.1)	
a. I do not request changes to item 3 of Appellant's Proposed Settled Statement (Unlimited Civil Case) (form APP-014).			
b. I request the following changes to item 3 of Appellant's Proposed Settled Statement (Unlimited Civil Case)			
(form APP-014) (specify):		
c. I request the above	ve changes for the following reasons (specify):		
	3 (1)/		
		Attachment 4	
		Attachment 1	

APP-020

PLAINTIFF/PETITIONER:	SUPERIOR COURT CASE NUMBER:
DEFENDANT/RESPONDENT:	COURT OF ARREAU CAOF NUMBER ((1)
OTHER PARENT/PARTY:	COURT OF APPEAL CASE NUMBER (if known):
2. SUMMARY OF NONPARTY WITNESS TESTIMONY AND OTHER EVIDENCE	
a. I do not request changes to item 4 of Appellant's Proposed Settled Statemen	nt (Unlimited Civil Case) (form APP-014).
b. I request the following changes to item 4 of Appellant's Proposed Settled Sta	atement (Unlimited Civil Case)
(form APP-014) (specify):	
c. I request the above changes for the following reasons (specify):	
	Attachment 2
3. TRIAL COURT'S FINDINGS	Attachment 2
a. I do not request changes to item 5 of Appellant's Proposed Settled Statemen	nt (Unlimited Civil Case) (form APP-014).
b. I request the following changes to item 5 of Appellant's Proposed Settled Sta	atement (Unlimited Civil Case)
(form APP-014) (specify):	
c. I request the above changes for the following reasons (specify):	
	Attachment 3

	A11-020
PLAINTIFF/PETITIONER:	SUPERIOR COURT CASE NUMBER:
DEFENDANT/RESPONDENT:	
OTHER PARENT/PARTY:	COURT OF APPEAL CASE NUMBER (if known):
4. SUMMARY OF MOTIONS	,
 a.	
c. I request the above changes for the following reasons (specify).	:
5 QUIMMA DV OF HUDY INCTDUCTIONS	Attachment 4
5. SUMMARY OF JURY INSTRUCTIONS	tlad Statement / Inlimited Civil Coop (form ADD 014)
 I do not request changes to item 7 of Appellant's Proposed Sett I request the following changes to item 7 of Appellant's Propose (form APP-014) (specify): 	
c. I request the above changes for the following reasons (specify):	:
Date:	Attachment 5
	•
(TYPE OR PRINT NAME)	(SIGNATURE)