

PARTY WITHOUT ATTORNEY OR ATTORNEY		STATE BAR NUMBER:	<b>FOR COURT USE ONLY</b>	
NAME:				
FIRM NAME:				
STREET ADDRESS:				
CITY:	STATE:	ZIP CODE:		
TELEPHONE NO.:		FAX NO.:		
E-MAIL ADDRESS:				
ATTORNEY FOR (name):				
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b>				
STREET ADDRESS:				
MAILING ADDRESS:				
CITY AND ZIP CODE:				
BRANCH NAME:				
PETITIONER:				
RESPONDENT:				
OTHER PARTY:				
<b>ORDER AFTER HEARING ON MOTION TO CANCEL (SET ASIDE)</b>				
<b>VOLUNTARY DECLARATION OF PARENTAGE OR PATERNITY</b>				
CASE NUMBER:				



Date:

JUDICIAL OFFICER

Approved as conforming to court order:  
Date:

(TYPE OR PRINT NAME)

**SIGNATURE OF ATTORNEY FOR**

PETITIONER  
 OTHER PART

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