SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	*FOR COURT USE ONLY*
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	
REVIEW OF COMMISSIONER'S FINDINGS OF FACT AND RECOMMENDATION	CASE NUMBER:

1. HEARING WAS HELD BEFORE Commissioner *(name):*
   on *(date):*

2. The *Findings and Recommendation of Commissioner* was filed on *(date):*

3. ☐ No objection having been filed within 10 court days, the findings of fact and recommended order of the Commissioner are ratified. Each of the parties is ordered to comply with all the terms of the order.

4. a. ☐ An objection was filed on *(date):*   by *(specify):*
      OR
   b. ☐ The *Findings and Recommendation of Commissioner* is in error.

   c. A hearing *de novo* is set for

(1) Date:	Time:	☐ Dept.:	☐ Div.:	☐ Room:

      (2) The address of the court ☐ is shown above ☐ is as follows:

   d. ☐ THE FOLLOWING ARE THE TEMPORARY ORDERS:
      (1) ☐ The recommended orders of the commissioner.
      (2) ☐ Other *(specify):*

            ☐ Continued in Attachment 4d.

Date:

_____
JUDICIAL OFFICER

☐ SIGNATURE FOLLOWS LAST ATTACHMENT

5. Number of additional pages attached: _____

**REVIEW OF COMMISSIONER'S FINDINGS OF FACT AND RECOMMENDATION
(Governmental)**

PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	
OTHER PARENT:	

CLERK'S CERTIFICATE OF MAILING

I certify that I am not a party to this cause and that a true copy of the *Review of Commissioner's Findings of Fact and Recommendation* was mailed first class, postage fully prepaid, in a sealed envelope addressed as shown below, and that the form was mailed at *(place):*   California, on *(date):*

Date: _____   Clerk, by _____, Deputy

FL-667 [Rev. January 1, 2003]

**REVIEW OF COMMISSIONER'S FINDINGS
OF FACT AND RECOMMENDATION
(Governmental)**