

ATTORNEY (Name, State Bar number, and address):		
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:		
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT: OTHER:		CASE NUMBER:
<b>ORDER OF EXEMPTION FROM ELECTRONIC FILING AND SERVICE</b>		

The court has reviewed the request for exemption and makes the following orders:

- ☐ The court **grants** the request for exemption. The applicant may:  
☐ file ☐ serve all documents in this case in paper form.
- ☐ The court **denies** the request for exemption for the following reason: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- ☐ The court needs more information to decide whether to grant the application request. The applicant must appear in court on the date below:

Name and address of court if different from above:

<b>Hearing Date</b>	Date: _____	Time: _____	_____
	Dept.: _____	Room: _____	_____
	_____		

Date: \_\_\_\_\_

\_\_\_\_\_  
JUDICIAL OFFICER

### Clerk's Certificate of Service

I certify that I am not a party to this action and (check one):

- ☐ A certificate of mailing is attached.
- ☐ I handed a copy of this order to the applicant listed above, at the court, on the date below.
- ☐ This order was mailed first class, postage paid, to the applicant at the address listed above,  
 from (city): \_\_\_\_\_, California on the date below.

Date: \_\_\_\_\_

By: \_\_\_\_\_  
DEPUTY CLERK