

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                |                    |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------|--------------------|
| PARTY WITHOUT ATTORNEY OR ATTORNEY<br>NAME: CHRISTINE PAGE<br>FIRM NAME:<br>STREET ADDRESS: 1320 CABELAS DR #132<br>CITY: BUDA<br>TELEPHONE NO.: 4084392833<br>EMAIL ADDRESS: CHRISTINEPAGE23@GMAIL.COM<br>ATTORNEY FOR (name): PRO SE                                                                                                                                                                                                                                                       |  | STATE BAR NUMBER:<br><br>STATE: TX ZIP CODE: 78610<br>FAX NO.: | FOR COURT USE ONLY |
| <b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b><br>STREET ADDRESS: 201 N FIRST ST<br>MAILING ADDRESS: 199 N FIRST ST<br>CITY AND ZIP CODE: SAN JOSE CA 95113<br>BRANCH NAME: FAMILY JUSTICE CENTER COURTHOUSE                                                                                                                                                                                                                                                                                 |  |                                                                |                    |
| PETITIONER: CHRISTINE PAGE<br>RESPONDENT: SHAUN PAGE<br>OTHER PARENT/PARTY:                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                |                    |
| <b>REQUEST FOR ORDER</b> <input type="checkbox"/> CHANGE <input type="checkbox"/> TEMPORARY EMERGENCY ORDERS<br><input type="checkbox"/> Child Custody <input type="checkbox"/> Visitation (Parenting Time) <input type="checkbox"/> Spousal or Partner Support<br><input type="checkbox"/> Child Support <input type="checkbox"/> Property Control <input type="checkbox"/> Attorney's Fees and Costs<br><input checked="" type="checkbox"/> Other (specify): SHORTENED TIME BEFORE HEARING |  |                                                                | CASE NUMBER:       |

Note: Read form FL-300-INFO for information about how to complete this form. To ask to change or end an order that was granted in a Restraining Order After Hearing (form DV-130 or JV-255), read form FL-300-INFO and form DV-300-INFO.

### NOTICE OF HEARING

1. TO (name): SHAUN PAGE

Petitioner  Respondent  Other Parent/Party  Other (specify):

2. A COURT HEARING WILL BE HELD AS FOLLOWS:

|                            |                                                         |                                               |                                 |
|----------------------------|---------------------------------------------------------|-----------------------------------------------|---------------------------------|
| a. Date: <b>02/19/2026</b> | Time: <b>1:30P</b>                                      | <input checked="" type="checkbox"/> Dept.: 74 | <input type="checkbox"/> Room.: |
| b. Address of court        | <input checked="" type="checkbox"/> same as noted above | <input type="checkbox"/> other (specify):     |                                 |

3. **WARNING to the person served with the Request for Order:** The court may make the requested orders without you if you do not file a *Responsive Declaration to Request for Order* (form FL-320), serve a copy on the other parties at least nine court days before the hearing (unless the court has ordered a shorter period of time), and appear at the hearing. (See form FL-320-INFO for more information.)

### COURT ORDER

(FOR COURT USE ONLY)

4.  Time  for service  until the hearing is shortened. Service must be on or before (date):
5.  A *Responsive Declaration to Request for Order* (form FL-320) must be served on or before (date):
6.  The parties must attend an appointment for child custody mediation or child custody recommending counseling as follows (specify date, time, and location):
7.  The orders in *Temporary Emergency (Ex Parte) Orders* (form FL-305) apply to this proceeding and must be personally served with all documents filed with this *Request for Order*.
8.  Other (specify):

Date:

JUDICIAL OFFICER