

ATTORNEY OR UNREPRESENTED PARTY (NAME AND ADDRESS): ATTORNEY(S) FOR:	TELEPHONE NO.:	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO		
Plaintiff(s)/Petitioner: Defendant(s)/Respondent:		
REQUEST TO SET UNCONTESTED MATTER		CASE NUMBER:

NOTE: Counsel shall file this form with the Clerk of the Court at least 10 days prior to the desired date.

TO THE CLERK OF THE COURT: Request is hereby made that the within matter for (check appropriate block)

- Dissolution
 Nullity
 Legal Separation
 Adoption
 Free From Custody
 Compromise of Minor's Disputed Claim
 Change of Name
 Declaration and Order for Appearance of Judgment Debtor
 Other: _____

which is uncontested and ready for hearing to be set on the uncontested matters calendar for hearing on:

Date:	Time:	Dept.:
Address:		

This may be heard as an uncontested matter because:

- Petition/Complaint and Summons were served on _____
 Default of _____ was entered on _____
 Appearance and Waiver was filed by _____ on _____
 Response and Waiver was filed by _____ on _____
 Other _____

Please note your suggested hearing date(s). _____

Signature and date: _____