

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): TELEPHONE NO: ATTORNEY FOR: (Name)	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SACRAMENTO STREET ADDRESS: 3341 Power Inn Road MAILING ADDRESS: Same CITY AND ZIP CODE: Sacramento, CA 95826	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT:	
PETITION FOR PRIVATE CHILD CUSTODY RECOMMENDING COUNSELING	CASE NUMBER:

1. A Request for Order re: child custody and /or child visitation is set for hearing on _____, at _____, in department _____.
2. Have you been to mediation before? Yes No
 If yes, mediation was provided by Family Court Services and/or Private Child Custody Recommending Counselor. What is the date of the most recent mediation held?
 _____.
3. Do you currently have an appointment with Family Court Services? Yes No
 If so, what is the date and time? _____ at _____.
4. List the names and ages of the children for whom custody and/or visitation is sought:

5. I request that one of the following Private Child Custody Recommending Counselors be appointed:

NOTICE: A Declaration of Private Child Custody Recommending Counselor Regarding Qualifications, local form (FL/E/FR-411), must be attached for each recommending counselor proposed.

Declarant shall advance the cost of Private Child Custody Recommending Counseling subject to the court reserving the right to order reimbursement from the other party.

I declare under penalty of perjury under the laws of the State of California that the foregoing information is true and correct.

Date: _____

 Signature of the Declarant

STIPULATION RE: PRIVATE CHILD CUSTODY RECOMMENDING COUNSELING

Parties agree that _____ (Private Child Custody Recommending Counselor) shall mediate issues concerning custody and/or visitation of the children identified in section #4 above.

Parties stipulate to allocate all fees, _____% payable by Petitioner and _____% payable by Respondent.

Date: _____
_____ Petitioner

Date: _____
_____ Respondent

Date: _____
_____ Attorney for Petitioner

Date: _____
_____ Attorney for Respondent

PROOF OF PERSONAL SERVICE

1. I am at least 18 years old, not a party to this action, and not a protected person listed in any of the orders.

2. Person served (name):

3. I served copies of the following documents (specify):

- Petition for Private Child Custody Recommending Counseling
- Response to the Petition for Private Child Custody Recommending Counseling
- _____

4. By personally delivering copies to the person served, as follows:

- a. Date: _____ b. Time: _____
- c. Address: _____

5. I am

- a. not a registered California process server.
- b. a registered California process server.
- c. an employee or independent contractor of a Registered California process server.
- d. exempt from registration under Business Code section 22350(b).
- e. a California sheriff or marshal.

6. My name, address, and telephone number and, if applicable, county of registration and number (specify):

7. I declare under penalty of perjury under the law of the State of California that the foregoing is true and correct.

8. I am a California sheriff or marshal and I certify that the foregoing is true and correct.

Date:

PRINT NAME OF PERSON WHO SERVED THE PAPERS

SIGNATURE OF PERSON WHO SERVED THE PAPERS