

Attorney or Party without attorney (Name, state bar number, and address)	For Court Use Only
Telephone Number: Attorney For	
Superior Court of California, County of San Bernardino	
<input type="checkbox"/> San Bernardino District, 351 North Arrowhead Ave. San Bernardino, CA 92415 <input type="checkbox"/> Rancho Cucamonga District 8303 Haven Avenue, Rancho Cucamonga, CA 91730 <input type="checkbox"/> Victorville District, 14455 Civic Drive, Victorville, CA 92392 <input type="checkbox"/> Barstow District, 235 East Mountain View, Barstow, CA 92311 <input type="checkbox"/> Joshua Tree District, 6527 White Feather road, Joshua Tree, CA 92252 <input type="checkbox"/> Big Bear District, P. O. Box 2806, Big Bear Lake, CA 92315	
Petitioner	
Respondent	
REQUEST TO ADVANCE FAMILY LAW CASE MANAGEMENT CONFERENCE	CASE NUMBER

A Response has been filed, and the Petitioner Respondent requests that the Case Management Conference currently set for _____ be advanced to an earlier date.

1. Time estimated for trial _____ days. If the estimate of trial time is 2 hours or less, and all parties join in the estimate of trial time (silence will be deemed as joining), this case will be set for trial as a short cause matter.

3. Case entitled to preference? Yes No

4. Indicate party being represented:

Petitioner: _____
 Attorney: _____
 Firm: _____
 Address: _____
 Telephone: _____

Respondent: _____
 Attorney: _____
 Firm: _____
 Address: _____
 Telephone: _____

I hereby represent to the Court that the above is true and correct.

 Date

 Signature of Party/Attorney for Party

DECLARATION OF SERVICE

I served a copy of the Request to Advance Family Law Case Management Conference.

Person Served: _____

Type of Service

Personal

I personally delivered copies to the person served as follows:

Date _____ Time _____

Address _____

Mail

I placed a true copy of this document in the United States mail, in a sealed envelope with postage fully prepaid as follows:

Date of Deposit _____

Place of Deposit (city and state) _____

Addressed as follows: (name and address)

I am over the age of 18 and not a party to this action. I am a resident of or employed in the county where the mailing occurred. My residence or business address is:

Name: _____

Address: _____

Telephone: _____

I declare under penalty of perjury that the foregoing is true and correct and that this declaration is executed on _____, at _____, California.
(date) (city)

Type or Print Name

Signature of Declarant