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CASE PARTICIPANT NAME:	STATE BAR NO:	FOR COURT USE ONLY
FIRM NAME:	SINIE BARNO.	
ADDRESS:		
CITY:	STATE: ZIP CODE:	
E-MAIL ADDRESS: (must be legible)	TELEPHONE NO.:	
ATTORNEY FOR (Name):	FAX NO. (Optional):	
NAME OF COURT		
NAME OF COURT: STREET ADDRESS:		
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME:		
PETITIONER/PLAINTIFF:		
RESPONDENT/DEFENDANT:		
CLAIMANT:		
FAMILY LAW CASE PARTICIPANT E PARTY	NROLLMENT FORM	CASE NUMBER:
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 Once the court has created your subscription instructions in that email to complete the presence of the complete of the presence of the presence	ocess. vill receive an email notification each time a	an order or report is added to your case.
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I declare under penalty of perjury under the laws of t	the State of California that the foregoing is	true and correct.
Date:		

(TYPE OR PRINT NAME)

(SIGNATURE OF DECLARANT)