

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, state bar number, and address):</i> TELEPHONE NO.: _____ FAX NO. <i>(Optional):</i> _____ E-MAIL ADDRESS <i>(Optional):</i> _____ ATTORNEY FOR <i>(Name):</i> _____	FOR COURT USE ONLY
SUPERIOR COURT OF SAN LUIS OBISPO COUNTY Civil Court Operations <input type="checkbox"/> San Luis Obispo Branch , County Government Center, 1035 Palm Street, Rm 385, San Luis Obispo, CA 93408 <input type="checkbox"/> Grover Beach Branch , 214 South 16th Street, Grover Beach, CA 93433 <input type="checkbox"/> Paso Robles Branch , 901 Park Street, Paso Robles, CA 93446	
Plaintiff/Petitioner: Defendant/Respondent:	
REQUEST FOR DEFAULT SETTING (Domestic Relations & Civil Actions)	CASE NUMBER: _____

TO THE CLERK OF THE COURT:

Request is hereby made that the within matter for (check appropriate box)

- | | |
|---------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> CIVIL ACTION | <input type="checkbox"/> UNLAWFUL DETAINER |
| <input type="checkbox"/> DISSOLUTION | <input type="checkbox"/> NULLITY/LEGAL SEPARATION |

be set on the default calendar as set forth below for the following:

- | | |
|------------------------------------------------|------------------------------------|
| <input type="checkbox"/> for entry of default* | <input type="checkbox"/> testimony |
|------------------------------------------------|------------------------------------|

DATE:

TIME:

DEPT:

DATED:

SIGNED: _____

ATTORNEY FOR MOVING PARTY OR PARTY WITHOUT ATTORNEY

*default not entered by clerk