PARTY WITHOUT ATTORNEY OR ATTORNEY	STATE BAR NUMBER	FOR COURT USE ONLY
NAME		
NAME: FIRM NAME:		
STREET ADDRESS:		
CITY:	STATE: ZIP CODE:	
TELEPHONE NO:	FAX NO:	
E-MAIL ADDRESS:		
ATTORNEY FOR (name):		_
SUPERIOR COURT OF CALIFORNIA, COUNTY O	FYUBA	
215 5TH STREET, SUITE 200		
MARYSVILLE, CA 95901-5737 (530) 740-1800		
PETITIONER/PLAINTIFF:		-
RESPONDENT/DEFENDANT:		
OTHER PARENT/PARTY:		
NOTICE OF CONTINUANO	CE OF HEARING	CASE NUMBER:
(FAMILY LA		
(17111121 271	•••,	
To: Datitionar/Dagmandant		
To: Petitioner/Respondent	(Name)	
	,	
Please take notice that the hearing on the	fi	led on
	(Type of Hearing)	(Date)
originally set for hearing onat _	in Department 5 of the	Yuba County Superior Court has
(Date)	(Time)	raba county caponer countries
(Dato)	(Time)	
been continued to at	in Department 5 of the Yu	ha County Superior Court
(Date) (Tin	in Department 3 of the Tu ne)	ba County Superior Court.
(54.6)	,	
Under the laws of the State of Califor	nia, I declare under penalty of per	rjury that the foregoing is true.
Date:		
Print Name	Signature of Petition	ner Respondent
I IIII INGIIIG	Signature of Lifetition	ICI I IVESPONUEIII
Name of Attorney	Signature of Attorney for	or Petitioner Respondent

Pursuant to CCP 1010 et.seq., all parties must be served with a copy of this notice (see back side)

	TITLE:		CASE NUMBER:
		PROOF OF SERVICE	
I am at le	ast 18 years of age a	nd not a party to this action.	
My reside	ence or business add	ress is:	
		<del>_</del>	
On		_, I served the foregoing documents (s) d	
	(Date)		(Title of Document)
on		erved)	
	(Name of party s	served)	ates mail in a sealed envelope with
BY M	(Name of party s MAIL by placing a true e postage fully prepa	erved) copy of each document in the United Statid, as follows:	
BY M	(Name of party s MAIL by placing a true e postage fully prepa	erved) copy of each document in the United Sta	
BY M the a. b.	(Name of party s  ### AIL by placing a true e postage fully prepa  Date of Mailing:  Place of Mailing (ci	ecroed) e copy of each document in the United Station, as follows: ty and state):	
BY M the a. b.	(Name of party s  ### AIL by placing a true e postage fully prepa  Date of Mailing:  Place of Mailing (ci	ecroed) copy of each document in the United State id, as follows:	
BY M the a. b. c.	(Name of party s  MAIL by placing a true e postage fully prepa Date of Mailing: Place of Mailing (ci Addressed as follow	ecroed) e copy of each document in the United Station, as follows: ty and state):	
BY M the a. b. c.	(Name of party s  MAIL by placing a true e postage fully prepa Date of Mailing: Place of Mailing (ci Addressed as follow PERSONAL SERVICE	e copy of each document in the United Statid, as follows:  ty and state):  ws:  by personally delivering copies to the personal state persona	erson served as follows:
BY M the a. b. c.	(Name of party solution)  (Name of party sol	e copy of each document in the United Statid, as follows:  ty and state):  ws:  by personally delivering copies to the personal state persona	erson served as follows:
BY M the a. b. c. BY P a. b.	(Name of party solution)  (Name of Mailing at true of party solution)  (Name of party solution)	e copy of each document in the United Statid, as follows:  ty and state):  ws:  by personally delivering copies to the personal state persona	erson served as follows:
BY M the a. b. c. BY P a. b. c.	(Name of party solution)  (Name of party sol	e copy of each document in the United Statid, as follows:  ty and state):  ws:  by personally delivering copies to the personal copies to the personal copies.	erson served as follows:
BY M the a. b. c. BY P a. b. c. At the tim	(Name of party solution)  (Party of Mailing)  (City Addressed as follow)  (Party of Mailing)  (City Addressed as follow)  (Party of Service)  (Party of Mailing)  (P	e copy of each document in the United Statid, as follows:  ty and state):  ws:  by personally delivering copies to the personal copies to the personal copies.	erson served as follows:

Printed Name

Signature