

REQUEST FOR TRIAL SETTING



**LEGAL AID
FOUNDATION
OF LOS ANGELES**

Forms

Self-Help Legal Access Centers

Santa Monica	Inglewood	Torrance	Long Beach
1725 Main St., Room 210 Santa Monica, CA 90401	1 East Regent St., Room 107 Inglewood, CA 90301	825 Maple Ave., Room 160 Torrance, CA 90503	275 Magnolia Ave., Room 3101 Long Beach, CA 90802

March 2020

This guide is designed to help you fill out the forms yourself. It is not intended to provide legal advice nor strategy as to how to complete the case. The information provided in this packet only presents options and examples. This is not a substitute for professional legal advice from an attorney.

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intentionally blank.**

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address): TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	RESERVED FOR CLERK'S FILE STAMP
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES	
COURTHOUSE ADDRESS:	
PETITIONER/PLAINTIFF:	
RESPONDENT/DEFENDANT:	
REQUEST FOR TRIAL SETTING FAMILY LAW <input type="checkbox"/> FIRST <input type="checkbox"/> COUNTER <input type="checkbox"/> AMENDED	CASE NUMBER: _____ DATE PETITION FILED: _____

I hereby represent to the court that this case is ready for trial, and request that it be set for trial.

1) TYPE OF ISSUE(S): (Check all that apply)

- Dissolution Nullity Legal Separation Paternity Visitation Injunctive Order
 Child Custody Child Support Spousal Support Division of Property Attorney Fees and Costs
 Other (specify): _____

2) Time estimate for trial: _____ hours _____ days.
 No case will be set for trial as a short cause matter unless ALL PARTIES join in estimate of trial time of 5 hours (1 day) or less.
 Silence will be deemed as joining.

3) If child custody or visitation is an issue in this proceeding, Family Code Section 3170 requires mediation before or concurrently with the hearing.

Parties have been ordered to attend child custody mediation services as follows:

Date: _____ Time: _____ Address: _____

4) All attorneys of record or parties representing themselves are listed below: (indicate whether attorney for Petitioner/Plaintiff or Respondent/Defendant)

ATTORNEY FOR / OR PLAINTIFF / PETITIONER	TRIAL ATTORNEY _____	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	STATE BAR NUMBER
	NAME OF FIRM _____		TELEPHONE
	ADDRESS _____		
ATTORNEY FOR / OR DEFENDANT / RESPONDENT	TRIAL ATTORNEY _____	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	STATE BAR NUMBER
	NAME OF FIRM _____		TELEPHONE
	ADDRESS _____		
ATTORNEY FOR	TRIAL ATTORNEY _____	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	STATE BAR NUMBER
	NAME OF FIRM _____		TELEPHONE
	ADDRESS _____		

(NAME) PETITIONER/PLAINTIFF:	CASE NUMBER:
(NAME) RESPONDENT/DEFENDANT:	
OTHER PARENT:	

PROOF OF SERVICE OF REQUEST FOR TRIAL SETTING FAMILY LAW

GENERAL INFORMATION

- 1) Any party not in agreement with the information or estimates given in a Request for Trial Setting shall, within 10 days after the service thereof, serve and file a Request for Trial Setting on his/her own behalf.
- 2) Motions to Strike a defective or premature Request for Trial Setting, supported by Affidavit or Declaration, shall be made on regular notice for hearing, in the court designated to hear such motions, and shall be served and filed within 10 days after service of the Request for Trial Setting.

In Central District: Such motions are usually heard in the assigned direct calendar department. See Local Rules for dates and time to set hearing and for exceptions thereto.

In All Other Districts: Verify local practice with staff in the particular district as to the appropriate department, day, place and hour for hearing of such motions.

The undersigned represents that all essential parties have been served with process or have appeared herein.

Dated: _____
(SIGNATURE)

Attorney for:

PROOF OF SERVICE BY MAIL

I am over the age of eighteen years and not a party to the within entitled action; my residence/employment address where the mailing referenced herein occurred is:

I am familiar with the business practices for collection and processing of correspondence for mailing with the United States Postal Service at the aforementioned address, and a true copy of the within Request for Trial Setting was placed in a sealed envelope, postage prepaid, and deposited for collection and mailing on _____, following such business practices, and in such manner as to cause it to be deposited with the United States Postal Service that same day in the ordinary course of business addressed to all attorneys or parties representing themselves shown in Part 4. I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on

(TYPED OR PRINTED NAME)
(SIGNATURE)