

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, state bar number, and address):</i> <hr style="width: 20px; margin-left: 0;"/> TELEPHONE NO.: _____ FAX NO.: _____ ATTORNEY FOR <i>(Name):</i> _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
CHILD'S NAME:	
FACSIMILE FILING COVER SHEET—JUVENILE	CASE NUMBER:

TO THE COURT:

1. Please file the following transmitted documents:
 - a. Petition (with any attachments and proof of service) under Welfare and Institutions Code section:

<input type="checkbox"/> 300	<input type="checkbox"/> 342	<input type="checkbox"/> 777
<input type="checkbox"/> 601	<input type="checkbox"/> 387	<input type="checkbox"/> 778
<input type="checkbox"/> 602	<input type="checkbox"/> 388	
 - b. Other *(specify)*:
 - c. Total number of pages transmitted, including this cover sheet: _____

2. I am
 - a. a representative of the county welfare department.
 - b. a representative of the county probation department.
 - c. a named party to the proceeding.
 - d. an attorney of record in the proceeding.
 - e. a representative of the office of the county counsel.
 - f. a representative of the office of the district attorney.
 - g. a Court Appointed Special Advocate (CASA).

NOTE: Under California Rules of Court, rule 1406.5, documents received by fax for filing shall be filed immediately upon receipt and shall not be placed or stored where any person not entitled to access may examine them.

This is confidential information protected by state and federal law, including Welfare and Institutions Code sections 10850 and 827. Further disclosure of this information may violate state and federal restrictions.