

NAME AND ADDRESS OF ATTORNEY:	TELEPHONE NO.:	FOR COURT USE ONLY
ATTORNEY FOR:		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO <input type="checkbox"/> Central District, 351 North Arrowhead Avenue, San Bernardino, CA 92415-0210 <input type="checkbox"/> West District, 8303 Haven Avenue, Rancho Cucamonga, CA 91730 <input type="checkbox"/> Desert District, 14455 Civic Drive, Victorville, CA 92392 <input type="checkbox"/> North Desert District, 235 East Mountain View, Barstow, CA 92311		
TITLE OF CASE (ABBREVIATED) UPON THE PETITION OF PETITIONER		
AND CONCERNING		CASE NUMBER:
RESPONDENT(S)		
PETITION FOR CONCILIATION		

To the Conciliation Court:

Name of Petitioner or Petitioners

allege . . . as follows:

(a) That a controversy exists between the parents herein, and request . . . the aid of said Court to effect a reconciliation or an amiable settlement of the controversy.

(b) That the name and age of each minor child whose welfare may be affected by the said controversy is as follows:

Name	Age
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(c) That the name and address of each petitioner is as follows:

Name	Address	Telephone
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(d) That the (husband) (wife) of the petitioner is:

Name	Street	City	State
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_____ ; and that said (husband) (wife) is named as respondent.
 Telephone Number _____

(e) That _____ whose address is _____

has relation to said controversy within the meaning of Section 1763, Code of Civil Procedure, (Statutes 1939, Chap. 737) and is hereby also named as respondent herein.

Dated _____ by _____