Appendix A – Waiver of Orientation

Appendix A – Waiver of Orientation

SUPERIOR COURT OF CALIFORNIA, COUNTY OF MERCED
FAMILY COURT SERVICES

FORMAL REQUEST FOR: ☐ WAIVER OF ORIENTATION HEARING

CASE NAME: _____ CASE NUMBER: _____

I. Request for Waiver of Orientation Hearing
Date for Orientation Hearing as currently set by the Court: _____
I, _____, submit this written request for the Court's approval for waiver of orientation ***with the request to be submitted to the Clerk's Office no later than 4PM the day prior to your scheduled date of Orientation Hearing***.

This request is made for the following reason:
☐ Party lives over 250 miles away Address: _____
☐ Party has been to orientation within the last 18 months. Date last attended: _____
☐ Telephone Number to confirm waiver of Orientation Hearing _____
Telephone Number including area code

Date: _____ _____
Signature of Party

FORMAL REQUEST FOR: ☐ TELEPHONIC MEDIATION

II. Request to Participate by Telephone for Mediation
I, _____, submit this written request for the Court's approval to conduct the currently scheduled Mediation. I understand that if granted, Mediation shall be conducted by the Mediator and I shall be advised of the possible Six (6) hour period in which the Mediator shall be able to contact me. The telephone number provided below is the number that I can be reached at throughout that time period. I am requested to participate by telephone for Mediation for the following reasons:_____
_____

III. Telephone Number of Party Requesting to Appear Telephonically
I, _____, submit that this is a true and correct telephone number of where I can be reached for the purpose of Court contact and Mediation:_____
Telephone Number including area code

Date: _____ _____
Signature of Party

If Orientation Hearing is waived, it is the party's responsibility to contact the Court office to find out the date and time for Mediation and Further Hearing by contacting the Clerk's Office at (209) 725-4117.

Based on the above statement, the request for: ☐ Telephonic Mediation ☐ Waiver of Orientation is/are hereby: ☐ **GRANTED** ☐ **DENIED**

Date: _____ _____
Judge of the Superior Court

Gave party info/Left msg for party OR Gave copy to party/attorney: _____ by _____
(Date) (Court Clerk's Inintals)

4/09 AAV

Appendix B – Ex-Parte Application for Release

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, state bar number, and address)*:	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR *(Name)*:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF MERCED STREET ADDRESS: **2260 "N" Street** MAILING ADDRESS: **627 West 21st Street** CITY AND ZIP CODE: **MERCED, CALIFORNIA 95340** BRANCH NAME:	
PETITIONER: RESPONDENT:	
EX-PARTE APPLICATION FOR RELEASE OF MEDIATOR'S RATIONALE OR EVALUATOR'S RATIONALE/REPORT OR MINORS COUNSEL REPORT AND ORDER THEREON	CASE NUMBER:

APPLICATION and DECLARATION

☐ **MEDIATOR'S RATIONALE OR** ☐ **EVALUATOR'S RATIONALE/REPORT OR** ☐ **MINORS COUNSEL REPORT**

☐ PETITIONER ☐ RESPONDENT REQUESTS release of the Rationale or Report for the Recommendation filed on the following date: which is reasonably necessary for me to understand the recommendation.

I declare under penalty of perjury that the foregoing is true.

Date:

DECLARANT'S NAME (PRINT) SIGNATURE OF DECLARANT

(Continued on reverse)

Appendix B – (page 2of 2)

ORDER

GOOD CAUSE APPEARING THEREFOR IT IS ORDERED:

☐ THE REQUEST IS DENIED. THE CLERK SHALL SET THE MATTER FOR HEARING AND NOTIFY THE PARTIES:

☐ THE RATIONALE SHALL BE RELEASED WITHOUT RESTRICTION, OTHER THAN THOSE SET FORTH BELOW.

☐ THE RATIONALE SHALL BE EXAMINED BY THE PARTIES OR ATTORNEYS FOR THE PARTIES IN THE CLERK'S OFFICE.

☐ THE RATIONALE SHALL BE RELEASED TO THE ATTORNEYS FOR THE PARTIES WHO SHALL NOT MAKE ANY COPIES OF IT, BUT MAY REVIEW THE CONTENTS THEREOF WITH THE PARTIES.

☐ THE RATIONALE SHALL BE RELEASED TO THE PARTIES WITHOUT RESTRICTION AFTER THE COURT HAS REDACTED PARTS WHICH IT DEEMS SENSITIVE OR HAVING THE POSSIBILITY OF CREATING FURTHER CONFLICT.

☐ THE RATIONALE SHALL BE RELEASED WITH THE FOLLOWING CONDITIONS:

NOTICE

- **IN ALL CASES THE INFORMATION AND REPORTS ARE CONFIDENTIAL AND MAY BE REVIEWED ONLY BY THE PARTIES AND THEIR ATTORNEYS.**
- **NO COPIES OF THE REPORT SHALL BE PUBLISHED OR OTHERWISE DISTRIBUTED.**
- **THIS IS A COURT ORDER AND IS SUBJECT TO ENFORCEMENT BY CRIMINAL PROCEEDINGS OR CIVIL CONTEMPT.**

DATE: _____

JUDGE OF THE SUPERIOR COURT

Appendix C – Objection to Recommended Order

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, state bar number, and address)* :	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO.*(Optional)*: ATTORNEY FOR *(Name)*:	
NAME OF COURT: Merced Superior STREET ADDRESS: 2260 "N" Street MAILING ADDRESS: 627 West 21st Street CITY AND ZIP CODE: Merced, California 95340 BRANCH NAME: Family Law	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	
PETITIONER'S ☐ **RESPONDENT'S** ☐ **OBJECTIONS TO** ☐ **FAMILY COURT SERVICES EVALUATION** ☐ **FAMILY COURT SERVICES ASSESSMENT** ☐ **MINOR'S COUNSEL'S RECOMMENDATION**	CASE NUMBER:

THE ABOVE PARTY OBJECTS TO THE FOLLOWING PROVISIONS OF THE RECOMMENDED ORDER:

FACTS SUPPORTING OBJECTIONS:

PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	CASE NUMBER:

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

(TYPE OR PRINT NAME) ▶ (SIGNATURE OF DECLARANT)

☐ Petitioner/Plaintiff: ☐ Respondent/Defendant ☐ Attorney
☐ Other *(specify)* :

Appendix D – Ex-Parte Request-Disqualification

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, state bar number, and address)*:	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO.*(Optional)*: E-MAIL ADDRESS *(Optional)*: ATTORNEY FOR *(Name)*:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF MERCED STREET ADDRESS: **2260 "N" Street** MAILING ADDRESS: **627 West 21st Street** CITY AND ZIP CODE: **MERCED, CALIFORNIA 95340** BRANCH NAME: FAMILY LAW FACILITY	
PETITIONER: RESPONDENT: CLAIMANT:	
EX-PARTE REQUEST AND ORDER RE: DISQUALIFICATION OF MEDIATOR OR EVALUATOR	CASE NUMBER:

1) I am the ☐ Petitioner ☐ Respondent ☐ Other in the action herein.

2) I move to disqualify to act as Mediator or Evaluator in the matter herein for the following reasons:

   a) Conflict of Interest. Please state all facts which support this claim. You may attach additional pages as needed.

   b) Other. Please state all facts which support this claim. You may attach additional pages as needed.

Dated: _____
PETITIONER/RESPONDENT/OTHER

Order

The Court hereby:

Denies the Order requested: ☐

Grants the Order requested: ☐

It is so ordered.

Dated: _____
JUDGE/COMMISSIONER OF THE SUPERIOR COURT

PROOF OF SERVICE BY MAIL

On I served the above Ex-Parte Request and Order Re: Disqualification of Mediator or Evaluator by depositing a copy thereof, enclosed in a sealed envelope, with postage prepaid, in the United States mail to the following parties and/or their attorney of record at the following addresses:

At the time of service, I was at least 18 years of age and **not** a party to the action.
My address is:

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and this declaration is executed on , at , California.

_____

Appendix E

Appendix E – Declaration in Support of Ex-Parte Application

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):	FOR COURT USE ONLY
TELEPHONE NO.: ( ) - FAX NO.: ( ) - E-MAIL ADDRESS: ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF MERCED STREET ADDRESS: 2260 "N" Street MAILING ADDRESS: 627 West 21st Street CITY AND ZIP CODE: MERCED, CALIFORNIA 95340 BRANCH NAME: Family Law Division	
PETITIONER: RESPONDENT: CLAIMANT/OTHER PARENT:	
DECLARATION IN SUPPORT OF EX PARTE APPLICATION FOR ORDERS	FSD NUMBER: CASE NUMBER:

I, the undersigned declare:

1. I am (choose one)
   - ☐ attorney for Petitioner ☐ attorney for Respondent ☐ attorney for child(ren)
   - ☐ self-represented Petitioner ☐ self-represented Respondent ☐ self-represented Other Parent
   - ☐ other (explain)
2. The opposing party is represented by an attorney: ☐ Yes ☐ No
   (If you checked "Yes", fill in attorney's name, address and telephone number. If you checked "No," fill in the other party's name, address, and telephone number.)
   Party/Attorney Name
   Address/Telephone number:
3. OTHER CASES
   - ☐ The parties to this action have been involved in another Family, Probate or Juvenile Court case. (If there has been another case, fill in the case number and court name.)
   - ☐ A previous request for the same relief was denied. (Give details)
4. NOTICE
   - A. I HAVE given notice of this ex parte application to the other party and/or their attorney by the following method:
     - ☐ personal delivery ☐ overnight carrier ☐ Fax ☐ Telephone ☐ Other (explain):
     - Date and time of notice
     - I have received confirmation that the other party has received my papers as follows (check one)
     - ☐ In person/telephone (describe)
     - ☐ Confirmation of receipt.
   - B. I HAVE NOT given notice of the present application for ex parte orders because (Check all that apply. You must explain below):
     - ☐ This is an application for Domestic Violence Prevention Act (DVPA) restraining orders.
     - ☐ Great or irreparable injury will result to me before the matter can be heard on notice.
     - ☐ The other party agrees to the orders requested
     - ☐ No significant burden or inconvenience to the responding party will result from the orders requested.
     - ☐ It is impossible to give notice. (Explain)
     - ☐ Other
   - C. Explanation:
     - ☐ A hearing between the parties is already set. I am asking that this motion be heard at the same time.
     - ☐ I am unable to serve the other party 21 days before the hearing.
     - ☐ I fear for my physical safety (and that of my children, if applicable).
     - ☐ Other

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct, at Merced, California, Date:

PRINT NAME OF DECLARANT SIGNATURE OF DECLARANT

Appendix F – Determining the Visitation Percentage

DETERMINING THE VISITATION PERCENTAGE

Page 4 of the Income and Expense Declaration (Item #2) will ask you for the percentage of custody/visitation you have with your child/ren. To calculate that figure, use a calendar to determine the number of days each month that you had the child/ren with you. Enter that amount in the last column on the applicable line for each month.

MONTH	DAYS IN THE MONTH	DAYS IN THE MONTH THAT YOU HAD THE CHILD/REN
January	31	
February	28 - 29	
March	31	
April	30	
May	31	
June	30	
July	31	
August	31	
September	30	
October	31	
November	30	
December	31	
TOTALS	365 - 366	

Divide the total number of days in the year that you had the child/ren (last column) by 365 for a regular year and 366 for a leap year to obtain the visitation percentage.

_____ divided by 365 or 366 = _____%

If you are calculating the visitation percentage based on a period that is less than a the full year, divide the total number of days that you had the child/ren in that period by the total number of days for the period being used.

_____ divided by _____ = _____%

NOTE: SHOULD THERE BE A DISCREPANCY BETWEEN THE PERCENTAGE OF VISITATION CLAIMED BY EACH PARENT, PLEASE BE PREPARED TO SHOW DOCUMENTATION TO PROVE THE PERCENTAGE OF VISITATION YOU ARE CLAIMING.

THE BACK OF THIS FORM HAS A SCHEDULE OF SOME OF THE MOST COMMON VISITATION ARRANGEMENTS. IF YOUR VISITATION ARRANGEMENT MATCHES ONE OF THOSE LISTED ON THE SCHEDULE, THE VISITATION PERCENTAGE WILL ALREADY BE CALCULATED FOR YOU IN THE LAST COLUMN.

Date:_____ _____ _____

Print Your Name Sign Your Name

Appendix F

Appendix F – (page 2 of 2)

SCHEDULE OF MOST COMMON VISITATION ARRANGEMENTS

VISITATION ARRANGEMENT	EQUIVALENT DAYS OF VISITATION IN THE YEAR	VISITATION PERCENTAGE
1 weekend per month	26	7.1
1 long weekend per month	38	10.4
2 weekends per month	49	13.4
1 night per week	52	14.2
Alternate weekends	55	15.1
Alternate weekends + 1/2 month in the summer	67	18.4
Alternate weekends + alternate holidays + 1/2 month in the summer	73	20.0
2 long weekends per month	75	20.1
Alternate weekends + alternate holidays + 1 month in the summer	85	22.2
1 weekend per month + 1 night per week	90	24.7
Alternate weekends + alternate holidays + 1/2 month in the summer	94	25.8
2 days per week	104	28.5
Alternate weekends + 1 evening per week + alternate holidays plus 1 month in the summer	111	30.4
All no-school time	112	30.7
Alternate weekends + 1 evening per week + 1/2 no-school time	125	34.2
Alternate weekends + 1 night per week + alternate holidays + 1 month in the summer	137	37.5
Alternate weekends + 1 night per week + 1/2 no-school time	151	41.4
Alternate weekends + 1 evening per week + all summer	153	41.9
3 days per week	156	42.7
Alternate weekends + 1 night per week + all summer	179	49.0
Alternate 3 days/4days	182	50.0

DEFINITIONS:
Weekend (2 days) = 5-7 PM Friday to 5-7 PM Sunday (or to 5-7 on major holiday Mondays)
Long weekend (3 days) = After school Friday to beginning of next school day.
One evening per week (1/2 day) = After school to after dinner.
One night per week (1 day) = After school and overnight.
Holidays (12 days per year) = New Year's, President's, Memorial, Mother's or Father's Day, Independence, Labor, Veteran's, Thanksgiving (2), Christmas and birthdays of child and non-custodial parent.
Summer (84 days per year) = Twelve weeks from 2nd week in June through next to last week in August.
No-school time = Time child is not in school.

Appendix F

Appendix G

Appendix G – Standard Orders Attachment

STANDARD ORDERS ATTACHMENT

(TO ORDER RE: CHILD SUPPORT)

THE FOLLOWING IS MADE A PART OF THE COURT'S ORDER:

1. All payments must be made to: **MERCED COUNTY DEPARTMENT OF CHILD SUPPORT SERVICES P.O. BOX 3199 MERCED, CA 95344**

2. Child support payments are payable by *Order/Notice to Withhold Income for Child Support* (form FL-195). **An *Order/Notice to Withhold Income for Child Support* (form FL-195) will issue.**

3. The non-custodial parent/obligor must (a) provide and maintain health insurance coverage for the children as obligated by law; (b) within 20 days of the Merced County Department of Child Support Services request, complete and return a *Health Insurance Form*. Each party is responsible for one-half (1/2) of all medically necessary uninsured medical costs. ***A Health Insurance Coverage Assignment* (form FL-470) will issue.**

4. No provision of this judgment/order may operate to limit any right to collect the principal (total amount of unpaid support) or to charge and collect interest and penalties as allowed by law. Interest will accrue on the entire principal balance owing and not on each installment as it becomes due. All payments ordered are subject to modification.

5. The non-custodial parent/obligor must notify the ***Merced County Department of Child Support Services*** within 5 days in writing of any change in residence, income, or employment.

6. The non-custodial parent/obligor is responsible for paying all child support and reimbursement payment obligations as of the effective date of the order and shall be responsible for making voluntary payments during any period of time when payments are not being made by an *Order/Notice to Withhold Income for Child Support*.

7. Current child support shall be modified and set at $0.00 per month starting on the 1st day of the month following the incarceration of an obligor, if that incarceration is for 30 or more days consecutive. Current child support shall resume as previously set by court order on the 1st day of the 2nd month after the obligor's release from incarceration.

8. Current child support shall be modified and set at $0.00 per month starting on the 1st day of the month following the entrance of an obligor into a live-in drug or alcohol treatment program that lasts for at least 30 days consecutively and which prevents obligor from earning income other than that which is paid to the program as a term of that program. This reduction shall only apply if obligor successfully completes the treatment program. Current child support shall resume as previously set by court order on the 1st day of the 2nd month after obligor's leaving the live-in program.

9. The Court reserves jurisdiction to retroactively modify and set child support for any periods that obligor is incarcerated or in a live-in program if the Court determines that while incarcerated or while in the live-in program the obligor had an ability to pay current child support.

NOTICE: Any party required to pay child support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent.

APPENDIX G

Appendix H – Electronic Exhibits

Uniform Instructions for Presentation of Electronic Exhibits

The Merced Superior Court will not provide technical assistance for the prosecution, defense in criminal matters, or counsel in civil matters with the presentation, playback, review or submission of electronic exhibits and/or electronic evidence at any hearing, court trial, or jury trial. Electronic exhibits include, but are not limited to VHS videotapes, DVD's, power point presentations, audio tapes and digital images.

Electronic exhibits presented in court shall conform to the following standards:

1. Electronic exhibits presented as evidence shall contain only the content that is to be viewed and heard by the judicial officer and the jury.

2. In an effort to protect both the prosecution and defense in criminal cases and counsel in civil cases, the court will not provide an IT staff member to playback and/or review electronic exhibits.

3. Static digital images, such as photographs and power point style presentations must be submitted in both electronic and printed format. Other types of media must be submitted in a format compatible with those authorized by the court. A list of compatible formats is maintained on the court website and listed below.

4. Any equipment required to view and/or listen to electronic exhibits including laptops, projectors, DVD/CD players is the responsibility of the party who presents the evidence.

5. Some audio-video presentation equipment may be available through the court upon request, provided the court receives the Audio-Video Request Form two (2) court days prior to the scheduled court date and time. The form (sample below) and a list of available audio-video equipment are on the court website www.merced.courts.ca.gov.

Cassette Tapes

1. standard audio cassette tape

CD-ROM/CD-R/CD-RW

1. music CD
2. video CD format
3. MP3 audio tracks and JPEG image files of format conforming to ISO 9660 Level 1/Level 2, or its extended format, Joliet
4. KODAK Picture CD format

DVD-ROM/DVD+RW/DVD+R/DVD-RW/DVD-R*

1. MP3 audio tracks and JPEG image files of format conforming to ISO 9660 Level 1/Level 2, or its extended format, Joliet
2. S8 cm DVD+RW, DVD-RW, and DVD-R recorded with a DVD Video camera

   * Following formats are not acceptable:
   a. Formats not listed above.
   b. PHOTO CD format
   c. Data part of CD-Extras
   d. DVD Audios
   e. HD layer on Super Audio CD's
   f. DVD-RAM's
   g. DVD VIDEO's with a different region code
   h. A disc recorded in a color system other than NTSC
   i. A non-standard shaped disc (e.g. card, heart)

Documents

1. PDF-A
2. Microsoft Office compatible format

Images

1. JPEG
2. GIF
3. PNG
4. TIFF

FOR COURT IT PURPOSES ONLY. NOT TO BE PLACED IN COURT FILE

COURT AUDIO-VIDEO EQUIPMENT REQUEST FORM

Superior Court of California

Scheduling Information

Date:		Time:		Location:	

Contact Information

Name	
Organization	
Work Phone	
Cell Phone	
E-Mail Address	

Requested Equipment

☐	**Audio-Video Cart** (DVD/VCR Player with LCD TV)
☐	**CD/Cassette Player** (portable)
☐	**DVD Player**

Comments

Signature

I understand that that this document must be complete and submitted at least 2 court days in advance. Changes to scheduling information or requested equipment requires the submission of an amended form at least 2 court days prior to the scheduled date.

Name (printed) _____

Signature _____

Date _____

Appendix I – Stipulated Discovery Order

FILED
MERCED COUNTY
00 APR 12 AM 10:47
CLERK OF THE SUPERIOR COURT
BY RENEE LORD
DEPUTY

IN THE SUPERIOR COURT
COUNTY OF MERCED, STATE OF CALIFORNIA

PEOPLE OF THE STATE OF CALIFORNIA Plaintiff vs. CHARGED DEFENDANTS	DISCOVERY IN FELONY CASES: RECITALS, STIPULATION AND ORDER

1. The parties to the below stipulation are: (1) as attorney for the prosecution, the District Attorney of the County of Merced, (2) as attorneys for individual criminal defendants, the Public Defender of the County of Merced, Deborah Bennett, David Capron, William A. Davis, Dominic Falasco, Marc Garcia, Vangi Garza, C. Logan McKechnie, Casey Oliver, Thomas Pfeiff, and Russell Whiting.

2. The below stipulation shall apply to any felony case filed in the Superior Court of the County of Merced following the issuance of a holding order pursuant to the provisions of California Penal Code section 872 in which the above parties are attorneys of record for the prosecution and defense, respectively.

3. It is the intention of the parties that the below stipulation is supplemental to, and not in place of, the informal discovery procedures provided by Section 1054.5 of the California Penal Code.

4. It is the intention of the parties that nothing in the below stipulation abrogates

recourse by any party in any case to any of the discovery procedures provided by Part 2, Title 6 of the California Penal Code, commencing at section 1054, or any other discovery remedy or procedure provided by law.

5. "Discovery" means the disclosure of materials and information as described by Part 2, Title 6 of the California Penal Code, commencing at section 1054.

6. The attorney for the prosecution may withdraw from the below stipulation at any time by providing written notice to the Presiding Judge of the Superior Court of the County of Merced and to each of the defense attorneys named in paragraph 1 above.

7. Any defense attorney may withdraw from the below stipulation at any time by providing written notice to the Presiding Judge of the Superior Court of the County of Merced and to the prosecuting attorney.

STIPULATION

It is stipulated by and between the parties hereto that at the time of arraignment for plea upon the Information, the court may enter an order in the minutes directing the parties to provide discovery to the opposing side in accordance with the following schedule:

a. By the prosecution to the defense: One week prior to the time of the pretrial readiness conference, which is customarily scheduled for seven to ten days prior to the date scheduled for trial.

b. By the defense to the prosecution: At the time of the pretrial readiness conference, which is customarily scheduled for seven to ten days prior to the date scheduled for trial.

DATED: 4/4/00

PUBLIC DEFENDER

DEBORAH BENNETT

DAVID CAPRON

WILLIAM A. DAVIS

DOMINIC FALASCO

MARC GARCIA

VANGI GARZA

CASEY OLIVER

RUSSELL WHITING

C. LOGAN MCKECHNIE

THOMAS PFEIFF

GORDON SPENCER
DISTRICT ATTORNEY

By: Assistant District Attorney

IT IS SO ORDERED.

DATED: APR 1 2 2000

JUDGE OF THE SUPERIOR COURT

1 APRIL 4, 2000

2 NEW RULES ON DISCOVERY AS ANNOUNCED BY JUDGE CORNELL:

3 -oOo-

4 THE COURT: I want to announce that we have now arrived at
5 a stipulated discovery order and this will be at Maria's desk
6 for all the defense attorneys to see. It is essentially
7 something that's been worked out with Mr. Eisenhart and
8 Mr. Tresidder and I want to thank Mr. Eisenhart for his work on
9 this.

10 What we will do is after there's a holding order, there
11 will be a standing discovery order in statutory form for both
12 sides, and it will be self-executing in that the prosecution
13 will have to provide its discovery one week prior to the time of
14 the Readiness Conference and the defense will have to provide it
15 at the time of the readiness conference, so we can do away with
16 having to file all these motions.

17 What will happen is at the time of the initial arraignment,
18 once this is all signed and in effect, then the judge who
19 handles the arraignment will make a notation that will go on the
20 Minute Order that the standing discovery order is in effect, and
21 if you get a stipulation after a prelim that the complaint will
22 be the information, make sure to ask the judge to put on the
23 order that the standing discovery order is in effect. Then if
24 the discovery order is not complied with, you don't file a
25 motion for a discovery order; you file a motion to compel
26 compliance because you already have a discovery order.

1 It is likely we will run into bumps in the road on this
2 thing but we'll try to work them out. From what I understand
3 from Mr. Tresidder, this is the first county in the state that's
4 tried to do something like this, so we will try to do our best
5 to make sure we can handle the bumps.
6 All the defense attorneys on contract, including those in
7 juvenile court, have indicated their willingness to go along
8 with this, including the public defender. Please stop by
9 Maria's desk and sign it after you've read it. The original on
10 this will be on file together with the transcript of what I'm
11 telling you right now, so I'll ask a transcript be prepared and
12 be attached to this and this will be on file so everyone will
13 know where it is and what it contains. So go to the clerk's
14 desk and sign it, and she'll let me know when it's all been
15 signed, and we'll move it into effect.
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