

<b>Attorney or Party without Attorney</b>  <b>Name:</b>  <b>Street Address:</b>  <b>Mailing Address:</b>  <b>City and Zip Code:</b>  <b>Telephone No:</b> _____ <b>Fax No:</b> _____  <b>Attorney for: (Name)</b> <b>SUPERIOR COURT OF CALIFORNIA,</b> <b>COUNTY OF MERCED</b> STREET ADDRESS: <b>2260 N Street</b> MAILING ADDRESS: <b>627 W. 21<sup>ST</sup> Street</b> CITY AND ZIP CODE: <b>Merced, CA 95340</b> Branch Name: <b>Family Law Division</b>	<i>FOR COURT USE ONLY</i>
PETITIONER:  RESPONDENT:  CLAIMANT:	
<b>EX PARTE REQUEST AND ORDER RE: DISQUALIFICATION OF CCRC OR EVALUATOR</b>	<b>Case Number:</b> _____

- 1.) I am the    Petitioner    Respondent  Other: \_\_\_\_\_ in the action herein.
- 2.) I move to disqualify \_\_\_\_\_ to act as Child Custody Recommending Counselor (CCRC) 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.

Date: \_\_\_\_\_

\_\_\_\_\_ PETITIONER/RESPONDENT/OTHER

**EX-PARTE REQUEST AND ORDER RE: DISQUALIFICATION OF CCRC OR EVALUATOR**

PETITIONER: RESPONDENT: CLAIMANT:	CASE NUMBER:
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**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 or CCRC 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 \_\_\_\_\_ in \_\_\_\_\_, California.

\_\_\_\_\_  
 Printed Name

\_\_\_\_\_  
 Signature

**EX-PARTE REQUEST AND ORDER RE: DISQUALIFICATION OF CCRC OR EVALUATOR**