ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and address) Attorney for (Name):	*FOR COURT USE ONLY*
SUPERIOR COURT OF CALIFORNIA, COUNTY OF MERCED STREET ADDRESS: ☐ 2260 N Street ☐ 1159 G Street MAILING ADDRESS 627 W. 21st Street 1159 G Street CITY AND ZIP CODE: Merced, CA 95340 Los Banos, CA 93635 BRANCH NAME: Family Law Division	
PETITIONER: RESPONDENT:	Hearing Date: _____ Time: _____ Courtroom: _____
STIPULATION TO VACATE CCRC AND/OR FURTHER HEARING DATE	CASE NUMBER:

The parties hereto agree to vacate ☐ the CCRC date of _____ ☐ and the Further

Hearing re: Custody scheduled for _____ on _____.
(Time) (Date)

Date _____ Signed: _____

Print Name: _____

Date _____ Signed: _____

Print Name: _____

Good cause appearing therefor, it is so ordered.

Date: _____ _____
JUDICIAL OFFICER