SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE INDIO 46-200 Oasis St., Indio, CA 92201 BLYTHE 265 N. Broadway, Blythe, CA 92225 HEMET 880 N. State St., Hemet, CA 92543 RIVERSIDE 4175 Main St., Riverside, CA 92501 RI-FL306 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): PETITIONER: CASE NUMBER: RESPONDENT: Hearing Date: Department: STIPULATION AND ORDER FOR CONTINUANCE OF HEARING **REQUEST** (FAMILY LAW) A separate form is required for each family law hearing for which a continuance is being requested. Name of person making the request: Petitioner Respondent Other Claimant This request is being made by way of stipulation (agreement) of the parties. Type of family law hearing being continued: Request for Order (or motion) that was filed on and requested relief for: ☐ Child Support Spousal/Partner Support ☐ Attorney Fees Property/ Restraint Control Discovery Sanctions Other: ☐ Case Status Conference ☐ Mandatory Settlement Conference ☐ Trial/Evidentiary Hearing Number of times any party has applied for a continuance of the hearing: 3. ☐ I ☐ have ☐ have not contacted the opposing party(s) about this request. 4. ☐ The opposing party (s) indicated that they ☐ do ☐ do not object to this request. It is unknown whether or not the opposing party objects to this request. The Child Custody Recommending Counseling appointment scheduled for at a.m. p.m. also needs to be continued. I am requesting an advance Child Custody Recommending Counseling appointment prior to the hearing date. (Riverside Cases Only - Part of Triage Pilot Program) 6. Reason for Continuance: 7. ☐ The Request for Order (or motion) ☐ does ☐ does not include temporary emergency orders, an order to appear, an order to attend Child Custody Recommending Counseling, an order shortening time or

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Rules of Court, rule 5.94.

other court orders of any kind which requires the court to reissue the order in accordance with California

PETITIO	NER:	CASE NUMBER:
RESPON	IDENT:	
8. I (we) understand and agree that:		
a. b. c. d. e.	 b. The statutory continuance fee must be paid with each continuance request. c. Submission through the clerk is not an automatic grant of continuance. d. If a continuance is denied, the requesting party (or stipulated parties) will be notified by the clerk. 	
9.	I (we) suggest the following alternative hearing dates if the continuar	nce is granted:
I (we) declare under penalty of perjury under the laws of the State of California that the information above is true and correct. Date:		
	(TYPE OR PRINT NAME) (SIGNATURE OF ATTOR	NEY FOR PETTITIONER PETITIONER)
Date:		
	(TYPE OR PRINT NAME) (SIGNATURE OF ATTORI	NEY FOR RESPONDENT
ORDER		
The Request Stipulation for a Continuance of the hearing noted on page 1 is: GRANTED. Good cause having been shown the continuance is granted. DENIED. Good cause having not been shown the continuance is denied. OTHER ORDERS:		
IT IS SO ORDERED.		
Date:		
	(JU	JDICIAL OFFICER)
EOD COLIDT LISE ONLY		
FOR COURT USE ONLY Hearing continued to at a.m p.m. in Department Child Custody Recommending Counseling appointment set for/continued to at a.m p.m. Requesting Party All Parties (stipulation) were notified on of the granting denial of continuance by telephone in person by mail in court. Continuance Fee paid.		