PLEASE TYPE

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Court address: Court address:				
Court address:				
Phone Number:				
In Re:	-		_	
Petitioner:				
Respondent/Co-Petitione	r -			
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Attorney or Party Without Attorney (Name and Address):			Case Number:	
Automey of Farty Williout A	Morrie y (Name and Addre	3 55).	Case Number	71.
Phone Number:	E-mail:		Division	Courtroom
FAX Number:	Atty.Reg.#	Order	Division	Courtroom
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THIS MATTER comes bef Petitioner (check one.). The fully advised, makes the follo	e Court has considere	d the motion, any re		
DATE:				
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		District Co		
		■ District Co	ourt Magistrate	