

NAME, ADDRESS AND TELEPHONE NUMBER OF ATTORNEY OR PARTY WITHOUT ATTORNEY:		STATE BAR NUMBER	<i>Reserved for Clerk's File Stamp</i>
ATTORNEY FOR (NAME):		EMAIL:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES			
COURT HOUSE ADDRESS:			
PETITIONER / PLAINTIFF			
RESPONDENT / DEFENDANT			
OTHER			CASE NUMBER:
Parentage Action Request to Inspect and Copy			

Pursuant to Family Code section 7643, I am requesting to inspect and/or obtain copies of documents that are part of the permanent record of the court contained in the above-entitled parentage action.

Information of person making the request to inspect and/or copy if not a party to the action: (Please print)

Name: _____
 Status: Attorney for: Petitioner Respondent
 Agent for: _____
 Address: _____ Telephone: () _____

Person authorizing the request to inspect and/or copy documents in the court file: (Please print)

Name: _____
 Status: Party Attorney for: Petitioner Respondent
 Address: _____ Telephone: () _____

I have obtained the consent of the party to this action to authorize an agent to inspect the permanent record.

I declare under penalty of perjury under the laws of the State of California that I am a party or attorney of record authorized to allow the above-mentioned requestor to inspect and/or copy documents in the above-entitled parentage action, pursuant to Family Code section 7643.

Date: _____ Signature: _____

FOR COURT USE ONLY

I have verified the requesting party's identification prior to releasing the court file.

Date: _____
 By: _____
SHERRI R. CARTER, Executive Officer/Clerk
Deputy Clerk