

TO: LOS ANGELES SUPERIOR COURT

ATTORNEY OF PARTY WITHOUT ATTORNEY (Name, State Bar Number and Address) _____, Public Defender _____, Head Deputy TELEPHONE NUMBER: _____ FAX NO. (Optional): _____ ATTORNEY FOR: _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
In the Matter of the Application of: DOB:	
PETITION FOR WRIT OF HABEAS CORPUS	CASE NUMBER: ZW

Petitioner is _____. The Petitioner respectfully alleges as follows: _____
 is being illegally confined in the custody of _____ in the County of Los Angeles, State of California on
 a _____ commitment because he/she does not fall within the following Lanterman-Petris-Short (LPS) criteria:
(14-day, 30-day or T-Con)

**THE PETITIONER DEMANDS THE RIGHT TO A COURT REVIEW AS PROVIDED
 IN SECTION 5275 AND 5353 WELFARE AND INSTITUTIONS CODE**

No other application for a WRIT OF HABEAS CORPUS has been made on the above ground, by or on behalf of said person in regard
 to said restraint, except as follows: _____
 WHEREFORE, your petitioner prays that a WRIT OF HABEAS CORPUS be issued directed to the _____,
 commanding him/her to have Said Person before this court at the specified time and place stated below.

I certify (or declare) under penalty of perjury that the foregoing is true and correct and that this petition is executed in Los Angeles
 County on this ____ day of _____, 20_____.

 (PETITIONER SIGNATURE)

The Clerk is directed to issue a Writ of Habeas Corpus returnable before said Superior Court in Department _____, fl,
 Courthouse, _____, Los Angeles, CA _____, on the ____ day of
 _____, 20_____ at 8:30 a.m.

 DATE

 Judge of the Superior Court

WRIT OF HABEAS CORPUS

THE PEOPLE OF THE STATE OF CALIFORNIA, TO _____
(AGENCY DETAINING SAID PERSON)

We command you, to have the body of _____, a person in your custody, power or restraint, as it is said,
 together with the time and cause of such custody, power or restraint and **all treatment records** pertaining to said person, before the
 Honorable _____, Judge of the Superior Court, County of Los Angeles, State of California, at the courtroom of
 Department _____, located at _____ Courthouse, _____, fl,
 Los Angeles, CA _____, on the ____ day of _____, 20_____, at 8:30 a.m. to do and receive what shall then and there be
 considered concerning the Said Person; and have you then and there with this Writ. Given under my hand with the Seal of Said Court,
 this ____ day of _____, 20_____.



SHERRI R. CARTER, Executive Officer/Clerk of Court

By: _____ Deputy Clerk

CERTIFICATE OF SERVICE

I hereby certify that I received and served the above Writ on the _____ day of _____, _____, by delivering said Writ
 to _____ on _____
(Person) (Unit / Ward)

 (SIGNATURE)

 (PRINT NAME)

 (TITLE AND TELEPHONE NUMBER)