

ATTORNEY OR PARTY WITHOUT AN ATTORNEY (Name, State Bar number, and address): NAME: ADDRESS: CITY, STATE, ZIP: TELEPHONE NO: FAX NO. (Optional): EMAIL ADDRESS (Optional): ATTORNEY FOR (Name):	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA COUNTY OF SANTA CRUZ 1 Second Street, Room 300 Watsonville, CA 95076 Watsonville Branch	
PLAINTIFF/PETITIONER: vs. DEFENDANT/RESPONDENT:	
ORDER TO <input type="checkbox"/> REMOVE ATTACHMENTS <input type="checkbox"/> SEAL <input type="checkbox"/> REDACT	CASE NUMBER:

The following paperwork was filed on _____

- Exhibit(s) _____
- Attachment(s) _____
- Tax Return
- Report of the Family Court Investigator
- Psychological Report/Custody Evaluation of _____
- Medical Records
- Financial Records
- Other _____

The paperwork noted above includes information that is:

- Confidential
- Deemed sensitive and subject to identity theft
- Not able to be scanned
- Already in the court file
- Other _____

Good Cause appearing therefore, IT IS HEREBY ORDERED that the above-referenced document(s) or information therein shall be:

- Removed and returned to the submitting party
- Removed and placed in the court's sealed, confidential envelope
- Redacted
- Other _____

DATED: _____ Commissioner JANA KAST-DAVIDS

CLERK'S CERTIFICATE OF MAILING

I certify that I am not a party to this cause and that a true copy of this Order to Remove/Seal Attachment/s on the following parties by:

- Returning true and correct copies thereof to the submitting party in open court on _____
- Depositing true and correct copies thereof, enclosed in sealed envelopes with postage thereon in the United States Post Office mail box in Watsonville, California, addressed to the address on record with the Court.

This certificate was executed at Watsonville, California on _____

DATED: _____ ALEX CALVO, Clerk

By _____
Deputy Clerk