

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): TELEPHONE NO.: _____ FAX NO. (<i>Optional</i>): _____ E-MAIL ADDRESS (<i>Optional</i>): _____ ATTORNEY FOR (<i>Name</i>): _____	FOR COURT USE ONLY <div style="border: 2px solid red; padding: 5px; color: red; text-align: center;"> To keep other people from seeing what you entered on your form, please press the Clear This Form button at the end of the form when finished. </div>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SOLANO STREET ADDRESS: 600 Union Avenue 321 Tuolumne Street MAILING ADDRESS: P.O. Caller 5000 321 Tuolumne Street CITY AND ZIP CODE: Fairfield, CA 94533 Vallejo, CA 94590	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/CLAIMANT:	
<input type="checkbox"/> PETITIONER'S <input type="checkbox"/> RESPONDENT'S <input type="checkbox"/> OTHER _____ <div style="text-align: center;"> STATUS CONFERENCE REPORT NO. _____ DATE OF STATUS CONFERENCE: _____ </div>	CASE NUMBER: _____

Complete all questions, check-boxes, and blanks that apply. Use extra pages if needed. You must serve this on the opposing attorney or party (and DCSS if applicable) and file a Proof of Service with the court.

1. PETITION:

The Petition for Establishment of Parental Relationship was filed on (*date*) _____.

2. SERVICE AND RESPONSE (ALL CASES):

- Respondent **was served** with the Petition on (*date*) _____, by (*which method*):
 personal service substituted service publication notice/acknowledgement of receipt
 other _____.
- Respondent **has not been served** with the Petition.
 Respondent **filed a Response** on (*date*) _____.
 Respondent **has not filed a Response** with the court.

3. DISCOVERY:

The following documents have been served on the opposing party:

- Income and Expense Declaration** (FL-150) Date yours was last filed and served: _____
 Other discovery is needed on: _____

4. BASIC LIST OF THE ISSUES—CHECK ALL THAT APPLY (ALL CASES):

- Parentage of Minor Child Child Custody and Visitation Child Support Attorney Fees and Costs
 Other: _____

5. CHILDREN:

Number of children of this relationship: _____. **Age(s)** of child(ren): _____.
 The parties last engaged in child custody mediation on (*date*) _____ with Mediator _____.

My **Declaration Under The UCCJEA** (FL-105) has been filed.
 All Child Custody and Visitation issues have been resolved.
 Further mediation might help.
 A child custody evaluation is needed, to be paid for as follows: _____.
 It should address the following issues: _____.

STATUS CONFERENCE REPORT – FAMILY LAW (UNIFORM PARENTAGE ACT)

6. CHILD SUPPORT:

- All **Child Support** issues have have not been resolved.
- Adequate financial information including FL-150's has been exchanged to hold meaningful settlement talks, or trial.
- More information** must be obtained before the parties can hold a meaningful settlement conference or trial.
- An **expert witness** must be retained before the parties can hold a meaningful settlement conference or trial.
- What kind of information or expert?: _____

- The **Department of Child Support Services** ("DCSS") of _____ County is involved in this case.

7. ALTERNATIVE DISPUTE RESOLUTION ("ADR"):

- I agree to engage in The parties have engaged in There should be ADR or further ADR in this case **in addition to** any Court-required child custody/visitation mediation that may have already occurred. I suggest:
- Arbitration Collaborative Law Private Judge Further custody/visitation mediation
- Mediation on these subjects: _____ Other: _____
- If there has been or should be no further ADR, why not? _____

8. SETTLEMENT CONFERENCE AND/OR TRIAL:

This case should be ready by these dates for: Settlement Conference _____ Trial _____

I am am not requesting a trial date at this time. My estimate of the total duration of trial is _____ hours.

9. SPECIAL CONSIDERATIONS:

- I reside more than one hundred miles from the courthouse.
- I need an interpreter for the following language _____. I can provide this interpreter.
- I need the following special access (e.g., wheelchair) to the courts: _____

10. OTHER INFORMATION:

Other information the Judicial Officer needs to know about the case in order to handle the upcoming status conference. _____

- The name of the other party's attorney is _____
- Are there other court cases between or involving the parties? No Yes: (List county and court file number): _____
- Additional page is attached concerning item(s) numbered: _____.

Date: _____

Signature of Party or Attorney for Party