ATTORNEY OR PARTY WITHOUT ATTORNEY:	STATE BAR N	O.:				,	FOR COURT	JSE ONLY	
NAME:									
FIRM NAME:									
STREET ADDRESS:									
CITY:	STATE:		ZIP CODE:						
TELEPHONE NO.:	FAX NO.:								
E-MAIL ADDRESS:									
ATTORNEY FOR (name):					_				
SUPERIOR COURT OF CALIFORNIA, O	COUNTY OF								
STREET ADDRESS:									
MAILING ADDRESS:									
CITY AND ZIP CODE:									
BRANCH NAME:									
CHILD'S NAME:									
JUVENILE DEPEND	DENCY PETITION	(VERS	ION ONE)		CASE N	IUMBER:			
(Welf. &	Inst. Code, § 300 et	seq.)			DEI ATE	ED CASE (if	anul:		
§ 300—Original §	342—Subsequent		§ 387—Suppleme	ental	KELATE	ED CASE (III	ariy).		
Petitioner on information and bel	ief alleges the followi	ng:							
a. The child named below come	s within the jurisdiction	n of the	juvenile court und	der the	followi	ng subdi	visions of	section	300 of the
Welfare and Institutions Code	(check applicable bo	oxes; se	e attachment 1a fo	or conc	ise sta	tements	of facts):		
(a) (b)(1)	(b)(2) (c)	(d)) (e)	(f)] (g) [(h)	(i)) [j)
b. Child's name:				c. A	rae:	d. Date	of birth:		e. Sex:
b. Child's hame.					.90.	a. 2 a			
c. Name:		mother	d. Name:						mother
Address:		father	Address:						father
		guardia	n						guardian
		unknow	n						unknown
If mother or father (check all that apply	y):		If mother or	father (c	heck all t	that apply):	•		
legal biological	presumed	allege			_	ogical [umed	alleged
e. Name:		mother	f. Other (sta		no ada	droce on	d rolation	chin to c	
Address:			i. Other (see	ale Hall	ne, auc	iiess, aii	u relation	SHIP IO C	rilia).
Address.		father							
		guardia	n						
		unknow	n						
If mother or father (check all that apply	y):		l No.				sides within	this state 7	Thin adult
legal biological	presumed	allege					closest to th		THIS duult
g. Prior to intervention, child res	ided with		h. Child is						
parent (name):				detaine	he		etained		
parent (name):			Date and				Clairieu		
guardian (name):							, ,		
Indian custodian (name)).		Current p	nace of	aeteni	tion (add	iress):		
other (state name, addre		to child	.						
Uniter (State flame, addre	soo, anu relalionship	io crilia)	·						
				_4:		1 C b - !! -	/faata:		¬ 04
			Rela	ative		Sneiter	/foster ca	re	Other
2. I have asked about Indian ances	try for this child and h	nave cor	mpleted and attack	ned the	requir	ed <i>India</i>	n Child In	quiry Atta	achment,

form ICWA-010(A). (If this is a subsequent filing and there is no new information, form ICWA-010(A) is not required.)

(See important notice on page 2.)

CHILD'S NAME:	CASE NUMBER:						
 Petitioner requests that the court find these allegations to be true. I declare under penalty of perjury under the laws of the State of California that the foregoin Date: 	g and all attachments are true and correct.						
(TYPE OR PRINT NAME)	(SIGNATURE OF PETITIONER)						
Address and telephone number (if different person signing than listed in caption above):							
Number of pages attached: Other children are listed on <i>Additional Children Attachment</i> (form JV-101(A))							
— NOTICE —							
TO PARENT							

TO PARENTS OR OTHERS LEGALLY RESPONSIBLE FOR THE SUPPORT OF THE CHILD

Your parental rights may be permanently terminated. To protect your rights, you must appear

You and the estate of your child may be jointly and severally liable for the cost of the care, support, and maintenance of your child in any placement or detention facility, the cost of legal services for you or your child by a public defender or other attorney, and the cost of supervision of your child by order of the juvenile court.

in court and answer this petition.