CONCENSION TO PRAFTY WITHOUT (ALLEPONIA, TOWN OR ATTORNEY OR PARTY WITHOUT (ALLEPONIA, COUNTY OF STREET ADDRESS (DAYONG): ATTORNEY FOR PARTY WITHOUT OF COUNTY OF STREET ADDRESS (DAYONG): ATTORNEY FOR PARTY WITHOUT OF CALLEORNIA, COUNTY OF STREET ADDRESS (DAYONG): ATTORNEY FOR PARTY INTER (DAYONG): BRANCH NAME       CASE NUMBER: COUNT OF COUNT OF CALLEORNIA, COUNTY OF STREET ADDRESS (DAYONG): ATTORNEY FOR PARTY INTER (DAYONG): BRANCH NAME         If the Support order is based on presumed income, you may file this motion and ask the court to cancel (set aside) the support order. If the court agrees with you, the court will issue another order based on the actual income, earning capacity, or income allowable by law. You must file the original of this motion and the attachments with the court clerk within one year from the date the first collection of support was made and Serve a copy on all other parties in this case. Keep a copy of this motion for your records.         1. To:       Pettioner/Plaintiff       Respondent/Defendant       Local child support agency       Other (specify):         A hearing on this motion will be held as follows (see instructions on how to get a hearing date):       I. To:       Room:       Div:       Room:         b. Address of court:       Is amake as noted above       I other (specify):       A hearing date):       I. amaking the court to cancel (set aside) the child support order in this case.       I. amaking the court to cancel (set aside) the child support order in this case.      I. amaking the court to issue another order		FL-6
TELEPRIONE NO.:       FXX NO. (Queene):         EMAL ADDRESS (Queene):       ************************************		FOR COURT USE ONLY
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E-MAIL ADDRESS (Optimal):         ATTORNEY FOR (IDAN):         SUPERIOR COURT OF CALIFORNIA, COUNTY OF         STREET ADDRESS:         MAIL ADDRESS:         MILE ADDRESS:		
ATTOMEST FOR (Number         SUPERIOR COURT OF CALIFORNIA, COUNTY OF         STITEET ADDRESS:         MALING ADDRESS:         MALING ADDRESS:         CITY AND 2P CODE         BRANCH MARE:         PETITIONER/PLAINTIFF:         RESPONDENT/DEFENDANT:         OTHER PARENT:         NOTICE AND MOTION TO CANCEL (SET ASIDE) SUPPORT ORDER         CASE NUMBER:         BASED ON PRESUMED INCOME         If the support order is based on presumed income, you may file this motion and ask the court to cancel (set aside) the support order. If the court agrees with you, the court will sisue another order based on the actual income, earning capacity, or income allowable by law. You must file the original of this motion and the attachments with the court clerk within one year from the date the first collection of support was made and serve a copy on all other parties in this case. Keep a copy of this motion for your records.         1. To:       Petitioner/Plaintiff       Respondent/Defendant       Local child support agency       Other (specify):         A hearing on this motion will be held as follows (see instructions on how to get a hearing date):       In Div.:       Room:       In address of court:       Is am asking the court to asued (set aside) the child support order in this case.       I. I an asking the court to asue another order because the current order is based on a presumed income that is different from the actual income.         1. I an asking the court to issue another order because the current	TELEPHONE NO.: FAX NO. (Optional):	
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This case may be referred to a court commissioner for hearing. By law, court commissioners do not have the authority to issue final orders and judgments in contested cases unless they are acting as temporary judges. The court commissioner in your case will act as a temporary judge unless, before the hearing, you or any other party objects to the commissioner acting as a temporary judge. The court commissioner may still hear your case to make findings and recommendations to a judge. However, if you object to the commissioner acting as a temporary judge, an order will not be made until a judge reviews your case.

FL-0	640
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	CASE NUMBER:
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT:	
OTHER PARENT:	
PROOF	OF SERVICE
1. At the time of service I was at least 18 years of age and not a p	party to the legal action.
2. My residence or business address is (specify):	
3. I served a copy of the foregoing <i>Notice and Motion to Cancel (</i> ( <i>Governmental</i> ) and all attachments as follows ( <i>check either a</i> ,	
a. Personal delivery. I personally delivered a copy and	all attachments as follows:
(1) Name of party or attorney served:	(2) Name of local child support agency served:
(a) Address where delivered:	(a) Address where delivered:
(b) Date delivered:	(b) Date delivered:
(c) Time delivered:	(c) Time delivered:
b. <b>Mail.</b> I am a resident of or employed in the county where (1) I and a convint on employed in the county where (1)	here the mailing occurred.
<ul> <li>(1) I enclosed a copy in an envelope and</li> <li>(a) deposited the sealed envelope with the</li> </ul>	e U.S. Postal Service with the postage fully prepaid.
	mailing on the date and at the place shown below, following our
ordinary business practices. I am readi correspondence for mailing. On the sar	Ity familiar with this business's practice for collecting and processing me day that correspondence is placed for collection and mailing, it is iness with the U.S. Postal Service in a sealed envelope with
(2) Name of party or attorney served:	(3) Name of local child support agency served:
(a) Address:	(a) Address:
(b) Date mailed:	(b) Date mailed:
(c) Place of mailing (city and state):	(c) Place of mailing (city and state):
(3) Address Verification (please specify):	
which included an address verification	ustody, visitation, or child support judgment or permanent order, n declaration ( <i>Declaration Regarding Address Verification</i> — nild Custody, Visitation, or Child Support Order (form FL-334) may
(b) The address for each individual identi	fied in items 3a and 3b was
(i) verified by the California Child address on file.	Support Enforcement System (CSE) as the current primary mailing
(ii) other (specify):	
c. Other (specify code section):	
Additional page is attached.	
I declare under penalty of perjury under the laws of the State of Cal	ifornia that the foregoing is true and correct.
Date:	
540.	
(TYPE OR PRINT NAME)	(SIGNATURE OF PERSON WHO SERVED MOTION)
· · · ·	
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