CM 015

	CM-015			
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY			
——-				
TELEPHONE NO.: FAX NO. (Optional):				
E-MAIL ADDRESS (Optional):				
STREET ADDRESS:				
CITY AND ZIP CODE:				
BRANCH NAME:				
PLAINTIFF/PETITIONER:	CASE NUMBER:			
DEFENDANT/RESPONDENT:	JUDICIAL OFFICER:			
	DEPT.:			
NOTICE OF RELATED CASE				
The following case or cases are related to the above-captioned case:				
1. a. Title:				
b. Court: same as above other (name and address): ——				
c. Caso number:				
c. Case number: ——— d. Filing date: ———				
e. Relationship to this case: ——				
f If the related access is pending in the same sourt on this access evaluin why the accism	mont of the encode to a			
f. If the related case is pending in the same court as this case, explain why the assignment of the cases to a single judge is likely to result in efficiencies: ——				
Additional evaluation is attached in Attachment 1				
Additional explanation is attached in Attachment 1.				
2. a. Title: ——				
b. Court: Same as above other (name and address): ——				
c. Case number: ——				
d. Filing date: ——				
e. Relationship to this case: ——				
f. If the related case is pending in the same court as this case, explain why the assign	ment of the cases to a			
single judge is likely to result in efficiencies: ——				
Additional explanation is attached in Attachment 2.				
 Additional related cases are described in Attachment Date: —— 				
//				
(TYPE OR PRINT NAME OF PARTY OR ATTORNEY) (SIGNATURE OF PART	Y OR ATTORNEY) Page 1 of 2			
Form Approved for Optional Use NOTICE OF RELATED CASE	electronic form © 2005-7Cal. Builds of Court, rule 2.20			



			CASE NUMBER:		
1					
DEF	ENDANT:				
	PROOF OF SERVICE BY FIRST-CLASS MAIL				
NOTICE OF RELATED					
CASE					
(NOTE: You cannot serve the Notice of Related Case if you are a party in the action. The person who served the notice must complete this proof of service.)					
	I am at least 18 years old and not a party to this action. I am a resident of or employed in the county where the mailing took place, and my residence or business address is <i>(specify):</i> ———				
_					
	. I served a copy of the <i>Notice of Related Case</i> by enclosing it in a sealed envelope with postage fully prepaid and <i>(check one):</i>				
a	 a. deposited the sealed envelope with the United States Postal Service. b. placed the sealed envelope for collection and processing for mailing, following this business's usual practices, with which I am readily familiar. On the same day correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service. 				
b					
3. Т	. The Notice of Related Case was mailed:				
a	. on (date):				
b	. from (city and state): ——				
4. The envelope was addressed and mailed as follows:					
а	. Name of person served: ——	c. Name of person served:			
	Street address: ——	Street address: ——			
	City:	City:			
	State and zip code: ——	State and zip code: ——	_		
b	Name of person served:	d. Name of person served:			
	Street address: ——	Street address: ——			
	City:	City: ——			
	State and zip code: ——	State and zip code: ——	_		
	Names and addresses of additional persons served a	are attached. (You may use a	form POS-030(P).)		
I dec	lare under penalty of perjury under the laws of the State	e of California that the forego	ing is true and correct.		
Date					
Date: ——					
		-			
	(TYPE OR PRINT NAME OF DECLARANT)	(SIG	NATURE OF DECLARANT)		

NOTICE OF RELATED CASE