ATTORNEY OR PARTY WITHOUT ATTORNEY (Nai	me, Address, and Telephone No.):	FOR COURT USE ONLY
ATTORNEY FOR: ATTORN	EY BAR #:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	-	
Street Address: County Civic Center	South County Justice Center	
Mailing Address: 211 S. Mooney Blvd. Of City and Zip code: Visalia, CA 93291	R 300 E. Olive Ave. Porterville, CA 93257	
IN THE MATTER OF THE ADOPTION PETITION OF	:	
(Adopting stepparent/domestic partner))	
CITATION FOR FREEDOM CUSTODY AND C		CASE NUMBER:
The People of the State of California		
To (name)	::	
YOU ARE advised that you are required to a	appear in the Superior Court of the	e State of California, for the County of
Tulare, at the County Courthouse, Departme	ent, located at 221 S. Mo	oney Blvd., Visalia, CA 93291 on
at	_ a.m. to show cause, if any you h	ave, why (name/s)
		, minor/s
should not be declared free from parental cu	ustody and control (for the purpose	e of adoption) as requested in the petition.
You are advised that if the parent/s are press requested, may explain the effect of the gran contained therein and the nature of the proc matter for not more than 30 days for the app	nting of the petition and, if request eeding, its procedures and possib	ed, shall explain any term or allegation le consequences, and may continue the
The court may appoint counsel to represent appears and is unable to afford counsel, the such representation is knowingly and intellig	court shall appoint counsel to rep	
If you wish to seek the advice of an attorney be filed on time.	in this matter, you should do so p	promptly so that your pleading, if any, may
	Stephanie C CLERK OF THE SU	ameron PERIOR COURT
Date: by		, Deputy
The above citation was called in open court at the date and time therein set forth (with)		
(without) response.	Stephanie C CLERK OF THE SU	
Ву		, Deputy

IN THE MATTER OF THE ADOPTION PETITION OF:

CASE No.

1.	I serv	/ed the person cited (name):		
	with	he citation and petition as follows:		
	a.	by serving		
		(1) Person cited		
	b.	(2) Person and title or relationship to person cited (name, etc.): Delivery at: home business		
	5.	(1) Date:		
		(2) Time:		
	C.	(3) Address: Mailing		
	0.	(1) Date:		
		(2) Time:		
		(3) Address:		
2.		ner of service: (check proper type)		
	a. b.	(Personal service). By personally delivering copies (CCP 415.10) (Substituted service on natural person, minor, incompetent or candidate). By leaving copies		
	D.	at the dwelling houseusual place of business of person cited in the presence		
		of: (name), who was informed of the		
		general nature of the papers, and thereafter mailing by first class mail, postage prepaid, copies to		
		the person cited at the place where the copies were left (CCP 415.20(b)). (Attach separate declaration or affidavit stating acts relied on to establish reasonable diligence in first attempting		
		personal service.)		
	C.	(Mail and acknowledgement service). By mailing by first-class mail copies to the person		
		cited, together with two copies of the form Notice and Acknowledgement of Receipt and a return		
		envelope, postage prepaid, addressed to the sender (CCP 415.30). (Attach completed Acknowledgement of Receipt form.)		
	d.	(Return receipt requested mail service). By mailing to address outside California, with return		
		Receipt requested, copies to the person cited (CCP 415.40). Attach signed return receipt or		
	-	other evidence of actual delivery to the person served.)		
	e.	(Other—CCP 413.10, 413.30). Attach separate page if necessary: Additional page is attached.		
3.	At the	At the time of service I was at least 18 years of age and not a party to this case.		
4.	Fee f	e for service is: \$		
5.	Name, address and telephone number of person serving:			
	a.	Not a registered California process server (CCP 417.40 and exempt (Bus & P Code 22350)		
	b.	Registered: Number: County:		
	c.	California sheriff, marshal or constable		
		(1) Title:(2) County:		
		(3) Municipal or Justice Court District:		

Date	Typed or printed name	Signature