r or counties filling a separate dependency petition for each child of	Tor counties using Addition	
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):		FOR COURT USE ONLY
_		
TELEPHONE NO.: FAX NO. (Optional):  E-MAIL ADDRESS (Optional):		
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF		
STREET ADDRESS:		
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME: CHILD'S NAME:		
of the Soft while.		
JUVENILE DEPENDENCY PETITION (VERSIO	N ONE)	CASE NUMBER:
(Welf. & Inst. Code, § 300 et seq.)		44
	87—Supplemental	RELATED CASES (if any):
Petitioner on information and belief alleges the following:		
a. The child named below comes within the jurisdiction of the juve		
Welfare and Institutions Code (check applicable boxes; see at (a) (b) (c) (d) (e)		
b. Child's name:		g)
5. 6.116.6.16.16.1	<b>0.</b>	igo. a. Dato of Diffit.
f. Name: mother	g. Name:	mother
Address: father	Address:	father
guardian unknown		guardian unknown
If mother or father <i>(check all that apply):</i> legal biological presumed alleged	If mother or father legal	(check all that apply):  biological presumed alleged
h. Name: mother	i. Other (state n	ame, address, and relationship to child):
Address: father		
guardian		
unknown		
If mother or father (check all that apply):	No known	parent or guardian resides within this state. This adult
legal biological presumed alleged		es in this county or is closest to this court.
j. Prior to intervention, child resided with	k. Child is	
parent (name):	not deta	<u> </u>
parent (name): guardian (name):		d time of detention: place of detention (address):
Indian custodian (name):	Odirent	place of determon (address).
other (state name, address, and relationship to child):		
	Relative	Shelter/foster care Other
I have asked about Indian ancestry for this child and have comple	ated and attached th	e required Indian Child Inquiry Attachment
form ICWA-010(A). (If this is a subsequent filing and there is no n		

(See important notice on page 2.)

CHILD'S NAME:	CASE NUMBER:		
3. 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 forego	ing and all attachments are true and correct.		
Date:			
<b>•</b>			
(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 Additional Children Attachment (form JV-101(A))			
— NOTICE —			

## **TO PARENT**

Your parental rights may be permanently terminated. To protect your rights, you must appear in court and answer this petition.

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

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.