

AUTHORIZED FAX FILER	<i>FOR COURT USE ONLY</i>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA STREET ADDRESS: 201 North First Street, San José, CA 95113 MAILING ADDRESS: 191 North First Street CITY AND ZIP CODE: San José, California 95113 BRANCH NAME: Family Justice Center	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	
GUN VIOLENCE PREVENTION FACSIMILE TRANSMISSION COVER SHEET	CASE NUMBER:

TO THE COURT:

Please find the following transmitted documents marked below:

<u>Document Name</u>	<u>Form No.</u>
<input type="checkbox"/> Firearms Emergency Protective Order	EPO-002
<input type="checkbox"/> Petition for Firearms Restraining Order	GV-100
<input type="checkbox"/> Notice of Court Hearing	GV-109
<input type="checkbox"/> Temporary Firearms Restraining Order	GV-110
<input type="checkbox"/> Confidential CLETS Information	CLETS-001
<input type="checkbox"/> Request to Continue Court Hearing for Firearms Restraining Order	GV-115
<input type="checkbox"/> Notice of New Hearing Date	GV-116
<input type="checkbox"/> Proof of Personal Service	GV-200
<input type="checkbox"/> Proof of Service by Mail	GV-250
<input type="checkbox"/> Firearms Restraining Order after Hearing	GV-130
<input type="checkbox"/> Request to Renew Firearms Restraining Order	GV-700
<input type="checkbox"/> Notice of Hearing on Request to Renew Firearms Restraining Order	GV-710
<input type="checkbox"/> Order on Request to Renew Firearms Restraining Order	GV-730
<input type="checkbox"/> Proof of Firearms Turned In, Sold or Stored	GV-800
<input type="checkbox"/> Request for Sheriff to Serve and Sheriff's Fee Statement	FM-1041
<input type="checkbox"/> Other:	
<input type="checkbox"/> CHECK HERE IF RESUBMITTING DOCUMENTS	

NUMBER OF PAGES ATTACHED _____