

ATTORNEY FOR PARTY (Name, State Bar Number, and Address)

TELEPHONE NO:
FAX NUMBER:
E-MAIL:
ATTORNEY FOR (Name):

FOR COURT USE ONLY

CASE NUMBER:

SUPERIOR COURT OF CALIFORNIA COUNTY OF LOS ANGELES

COURTHOUSE ADDRESS

Department:

IN THE MATTER OF:

ORDER APPOINTING EXPERT - 730EC

TO: APPOINTMENT IS PURSUANT TO EVIDENCE CODE §730 TO EXAMINE THE FOLLOWING PERSONS / RELATIONSHIP

- | | |
|------------------|------------------|
| 1. _____ / _____ | 4. _____ / _____ |
| 2. _____ / _____ | 5. _____ / _____ |
| 3. _____ / _____ | 6. _____ / _____ |

You are ordered to address the issue set forth in this Order. The original copy of your report is due in Department _____ NO LATER THAN THREE COURT DAYS prior to the next court hearing, which is: _____.

Please notify the clerk of this court or the child's social worker (CSW) if you encounter any problems. DCFS shall forward a copy of the petition and all relevant police and DCFS reports to you within five calendar days of this order. The name, address, and telephone number of the CSW is:

You are further ordered to provide a copy of the completed report to the CSW named above. If you are unable to meet this deadline or have any other questions, please contact this Court immediately. Your fee for the appointment shall not exceed the court-approved rates set forth in the current fee schedule, which is available online at www.lacourt.org.

Please address the following issue(s):

(DATED)

JUDICIAL OFFICER