ATTORNEY OR PARTY WITHOUT ATTORNEY	STATE BAR NO.:		FOR COURT USE ONLY
NAME:			
FIRM NAME: STREET ADDRESS:			
CITY:	STATE:	ZIP CODE:	
TELEPHONE NO.:	JIAIL.	ZII GODE.	
E-MAIL ADDRESS:			
ATTORNEY FOR (name):			
SUPERIOR COURT OF CALIFORNIA, O JUSTICE CENTER:	OUNTY OF OR	ANGE	
☐ Central - 700 Civic Center Dr West, Santa Ana, CA 92701-4045			
☐ Civil Complex Center - 751 W. Santa Ana Blvd, Sana Ana, CA 92701-4512			
☐ Costa Mesa Justice Complex - 3390 Harbor Blvd, Costa Mesa, CA 92626-1554			
☐ Harbor - 4601 Jamboree Rd, Newport Beach, CA 92660-2595			
☐ Lamoreaux - 341 The City Dr, Orange, CA 92868-3205			
☐ North - 1275 N. Berkeley Ave, Fullerton, CA 92838-0500			
☐ West - 8141 13 <sup>th</sup> St, Westminster, CA 9268	83-4593		
PLAINTIFF / PETITIONER:			
DEFENDANT / RESPONDENT:			
REQUEST FOR EXEMPTION F	ROM USE O	F MANDATORY	CASE NUMBER:
ELECTRONIC EVI	DENCE POR	TAL	
evidentiary hearing.  1. I, (name): the Electronic Evidence Portal because  a. I do not readily have access to a cor  b. Other (please specify):	e:	·	e exempt from the requirements to use
declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.			
Date:			
(TYPE OR PRINT NAME)			(SIGNATURE OF DECLARANT)