

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar Number and Address):  TELEPHONE NUMBER: _____ FAX NUMBER (Optional): _____ EMAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA</b> COURT ADDRESS: 191 North First Street CITY AND ZIP CODE: San José, California 95113 DIVISION: Probate Division	
In the Matter of the Application of:  _____	
<b>FINDINGS AND ORDER AFTER HEARING (RE: QUARANTINE DETENTION)</b>	CASE NUMBER: _____

1. This proceeding was heard  
 on (date): \_\_\_\_\_ at (time): \_\_\_\_\_ in Dept.: \_\_\_\_\_  
 by Judge (name): \_\_\_\_\_
- Petitioner present by telephone
  Attorney for Petitioner present  
 Other (name): \_\_\_\_\_ (name): \_\_\_\_\_  
 Santa Clara County Office of County Counsel (attorney for Santa Clara County Public Health Department)

On the Petition for Writ of Habeas Corpus Re: Quarantine Detention filed (date): \_\_\_\_\_

2. **THE COURT ORDERS**

- The Santa Clara County Public Health Department has submitted a sufficient factual showing to require the isolation or quarantining of the Petitioner and the Writ is discharged.
- The Santa Clara County Public Health Department has not submitted a sufficient factual showing to require the isolation or quarantining of the Petitioner, the Writ is granted, and the Department's order of \_\_\_\_\_ (date) requiring the isolation or quarantining of the Petitioner is set aside.
- Other Orders:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_ Judicial Officer