

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