ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO. (Optional):	
E-MAIL ADDRESS (Optional):	
ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF KERN	
Street Address:	
Mailing Address:	
City and Zip Code:	
Branch Name:	_
PLAINTIFF/PETITIONER:	
T LAWYII I // LITTIONER.	
DEFENDANT/RESPONDENT:	
	CASE NUMBER:
LINE AMERICATION CUIDDI EMENICAL COMED CHEETE	
UNLAWFUL DETAINER SUPPLEMENTAL COVER SHEET	
Plaintiff must file this supplemental cover sheet in addition to the Civil Case Cover Sheet (Judicial Council	
form CM-010).	
1. This action seeks possession of real property that is:	
1 1 2	
,	
b)   Commercial	
2. (Complete only if paragraph 1(a) is checked)	
This action is based, in whole or in part, on an alleged default in payment of rent or other charges.	
	ment of fent of other charges.
,	
b) □ No	
3. Specific basis or authority under the new legislation that permits this particular action to proceed:	
5. Specific basis of authority under the new legislation that permits this particular action to proceed.	
Date:	
Type or print name Signature of Pa	rty or Attorney for Party