Cost $5.00

PETITION TO ESTABLISH PARENTAL RELATIONSHIP PACKET

Updated: July 1, 2016

"Establishing parentage" means saying who the legal parents of a child are if the parents are not married when the child was born.

If the parents were married when the child was born, the law usually considers the husband to be the father.

Parents who are not married when a child is born can sign a Voluntary Declaration of Paternity before they leave the hospital, or after. When people who are not married can't agree about parentage, the court can order genetic testing.

Usually a child's parentage must be established before you can get child support or custody and visitation orders. You can ask the judge for child support or custody and visitation as part of a case that establishes the parentage of a child.

ALERT! If a person is established as a legal parent of a child, that person MUST support the child. It's a crime for a legal parent to fail to support his or her child. A legal parent also has the right to get custody and/or visitation rights related to the child.

After parentage is established, each parent has:

- An equal responsibility to support the child, and
- An equal right to custody of the child

If a parent does not meet the support obligation, the custodial parent, guardian, or local child support agency can ask the court to enforce the support orders. If a parent violates the support orders, the judge can order a fine of up to $1,000 and 5 days in county jail for each violation.

Parentage and related support issues are complicated. Talk to your local child support agency, a lawyer, or the family law facilitator.

The local child support agency can bring an action to establish the parentage of your child. As part of this action, they will ask for a child support order. **This service is free.** Your local child support agency is part of the state Department of Child Support Services. Every county has a local child support agency. The local agencies and the department help parents support and provide health insurance for their children.

If you want to handle your own case to establish parentage, you will need to fill out, have the papers served, and file several court forms. You may also need to have a trial before a judge.

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, state bar number, and address)*.	*FOR COURT USE ONLY*
TELEPHONE NO. *(Optional)*: FAX NO. *(Optional)*: E-MAIL ADDRESS *(Optional)*: ATTORNEY FOR *(Name)*:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF TRINITY STREET ADDRESS: 11 Court Street MAILING ADDRESS: PO Box 1258 CITY AND ZIP CODE: Weaverville, CA 96093 BRANCH NAME:	
PETITIONER: RESPONDENT:	
PETITION TO ESTABLISH PARENTAL RELATIONSHIP ☐ **Child Support** ☐ **Child Custody** ☐ **Visitation** ☐ **Other *(specify)*:**	CASE NUMBER:

1. Petitioner is
   a. ☐ the mother.
   b. ☐ the father.
   c. ☐ the child or the child's personal representative *(specify court and date of appointment)*:
   d. ☐ other *(specify)*:

2. The children are
   a. Child's name | Date of birth | Age | Sex

   b. ☐ a child who is not yet born.

3. The court has jurisdiction over the respondent because the respondent
   a. ☐ resides in this state.
   b. ☐ had sexual intercourse in this state, which resulted in conception of the children listed in item 2.
   c. ☐ other *(specify)*:

4. The action is brought in this county because *(you must check one or more to file in this county)*:
   a. ☐ the child resides or is found in the county.
   b. ☐ a parent is deceased and proceedings for administration of the estate have been or could be started in this county.

5. Petitioner claims *(check all that apply)*:
   a. ☐ respondent is the child's mother.
   b. ☐ respondent is the child's father.
   c. ☐ parentage has been established by Voluntary Declaration of Paternity *(attach copy)*.
   d. ☐ respondent who is child's parent has failed to support the child.
   e. ☐ *(name)*: has furnished or is furnishing the following reasonable expenses of pregnancy and birth for which the respondent as parent of the child is obligated:
      Amount | Payable to | For *(specify)*:

   f. ☐ public assistance is being provided to the child.
   g. ☐ other *(specify)*:

6. A completed *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA))* (form FL-105) is attached.

Form Approved for Optional Use
Judicial Council of California
FL-200 [Rev. January 1, 2003]

PETITION TO ESTABLISH PARENTAL RELATIONSHIP
(Uniform Parentage)

Family Code, § 7630
www.courtinfo.ca.gov

PETITIONER:	CASE NUMBER:
RESPONDENT:	

Petitioner requests the court to make the determinations indicated below.

7. PARENT-CHILD RELATIONSHIP
   a. ☐ Respondent b. ☐ Petitioner
   c. ☐ Other *(specify):* is the parent of the children listed in item 2.

8. CHILD CUSTODY AND VISITATION

	Petitioner	Respondent	Joint	Other
a. Legal custody of children to	☐	☐	☐	☐
b. Physical custody of children to	☐	☐	☐	☐

   c. Visitation of children:
      (1) ☐ None
      (2) ☐ Reasonable visitation.
      (3) ☐ Petitioner ☐ Respondent should have the right to visit the children as follows:

      (4) ☐ Visitation with the following restrictions *(specify):*

   d. Facts in support of the requested custody and visitation orders are *(specify):*
      ☐ Contained in the attached declaration.
   e. ☐ I request mediation to work out a parenting plan.

9. REASONABLE EXPENSES OF PREGNANCY AND BIRTH:

	Petitioner	Respondent	Joint
Reasonable expenses of pregnancy and birth be paid by as follows:	☐	☐	☐

10. FEES AND COSTS OF LITIGATION

	Petitioner	Respondent	Joint
a. Attorney fees to be paid by	☐	☐	☐
b. Expert fees, guardian ad litem fees, and other costs of the action or pretrial proceedings to be paid by	☐	☐	☐

11. NAME CHANGE
    ☐ Children's names be changed, according to Family Code section 7638, as follows *(specify):*

12. CHILD SUPPORT
    The court may make orders for support of the children and issue an earnings assignment without further notice to either party.

13. I have read the restraining order on the back of the *Summons* (FL-210) and I understand it applies to me when this Petition is filed.

I 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 PETITIONER)

A blank *Response to Petition to Establish Parental Relationship* (form FL-220) must be served on the Respondent with this Petition.

NOTICE: If you have a child from this relationship, the court is required to order child support based upon the income of both parents. Support normally continues until the child is 18. You should supply the court with information about your finances. Otherwise, the child support order will be based upon information supplied by the other parent.
Any party required to pay child support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent.

FL-210

SUMMONS

(Parentage—Custody and Support)

CITACIÓN (Paternidad—Custodia y Manutención)

NOTICE TO RESPONDENT *(Name):*

AVISO AL DEMANDADO (Nombre):

You have been sued. Read the information below and on the next page.
Lo han demandado. Lea la información a continuación y en la página siguiente.

Petitioner's name:
El nombre del demandante:

FOR COURT USE ONLY
(SOLO PARA USO DE LA CORTE)

CASE NUMBER: *(Número de caso)*

You have **30 calendar days** after this *Summons* and *Petition* are served on you to file a *Response* (form FL-220 or FL-270) at the court and have a copy served on the petitioner. A letter, phone call, or court appearance will not protect you.	*Tiene **30 dias de calendario** después de habir recibido la entrega legal de esta* Citación *y* Petición *para presentar una* Respuesta *(formulario FL-220 o FL-270) ante la corte y efectuar la entrega legal de una copia al demandante. Una carta o llamada telefónica o una audiencia de la corte no basta para protegerlo.*
If you do not file your *Response* on time, the court may make orders affecting your right to custody of your children. You may also be ordered to pay child support and attorney fees and costs.	*Si no presenta su* Respuesta *a tiempo, la corte puede dar órdenes que afecten la custodia de sus hijos. La corte también le puede ordenar que pague manutención de los hijos, y honorarios y costos legales.*
For legal advice, contact a lawyer immediately. Get help finding a lawyer at the California Courts Online Self-Help Center *(www.courts.ca.gov/selfhelp)*, at the California Legal Services website *(www.lawhelpca.org)*, or by contacting your local bar association.	*Para asesoramiento legal, póngase en contacto de inmediato con un abogado. Puede obtener información para encontrar un abogado en el Centro de Ayuda de las Cortes de California (www.sucorte.ca.gov), en el sitio web de los Servicios Legales de California (www.lawhelpca.org), o poniéndose en contacto con el colegio de abogados de su condado.*
NOTICE: ***The restraining order on page 2*** *remains in effect against each parent until the petition is dismissed, a judgment is entered, or the court makes further orders. This order is enforceable anywhere in California by any law enforcement officer who has received or seen a copy of it.*	**AVISO:** ***La órden de protección que aparecen en la pagina 2*** *continuará en vigencia en cuanto a cada parte hasta que se emita un fallo final, se despida la petición o la corte dé otras órdenes. Cualquier agencia del orden público que haya recibido o visto una copia de estas orden puede hacerla acatar en cualquier lugar de California.*
FEE WAIVER: If you cannot pay the filing fee, ask the clerk for a fee waiver form. The court may order you to pay back all or part of the fees and costs that the court waived for you or the other party.	***EXENCIÓN DE CUOTAS:*** *Si no puede pagar la cuota de presentación, pida al secretario un formulario de exención de cuotas. La corte puede ordenar que usted pague, ya sea en parte o por completo, las cuotas y costos de la corte previamente exentos a petición de usted o de la otra parte.*

[SEAL]

1. The name and address of the court are: *(El nombre y dirección de la corte son:)*
   Trinity County Superior Court
   PO Box 1258, 11 Court Street
   Weaverville, CA 96093

2. The name, address, and telephone number of petitioner's attorney, or petitioner without an attorney, are: *(El nombre, la dirección y el número de teléfono del abogado del demandante, o del demandante si no tiene abogado, son:)*

Date (Fecha): _____ Clerk, by *(Secretario, por)* _____, Deputy *(Asistente)*

Form Adopted for Mandatory Use
Judicial Council of California
FL-210 [Rev. January 1, 2015]

Family Code, §§ 232, 233, 7700;
Cal. Rules of Court, rule 5.50
www.courts.ca.gov

STANDARD RESTRAINING ORDER
(Parentage—Custody and Support)

ORDEN DE RESTRICCIÓN ESTÁNDAR
(Paternidad—Custodia y Manutención)

Starting immediately, you and every other party are restrained from removing from the state, or applying for a passport for, the minor child or children for whom this action seeks to establish a parent-child relationship or a custody order without the prior written consent of every other party or an order of the court.

This restraining order takes effect against the petitioner when he or she files the petition and against the respondent when he or she is personally served with the *Summons* and *Petition* OR when he or she waives and accepts service.

This restraining order remains in effect until the judgment is entered, the petition is dismissed, or the court makes other orders.

This order is enforceable anywhere in California by any law enforcement officer who has received or seen a copy of it.

En forma inmediata, usted y cada otra parte tienen prohibido llevarse del estado a los hijos menores para quienes esta acción judicial procura establecer una relación entre hijos y padres o una orden de custodia, ni pueden solicitar un pasaporte para los mismos, sin el consentimiento previo por escrito de cada otra parte o sin una orden de la corte.

Esta orden de restricción entrará en vigencia para el demandante una vez presentada la petición, y para el demandado una vez que éste reciba la notificación personal de la Citación *y* Petición, *o una vez que renuncie su derecho a recibir dicha notificación y se dé por notificado.*

Esta orden de restricción continuará en vigencia hasta que se emita un fallo final, se despida la petición o la corte dé otras órdenes.

Cualquier agencia del orden público que haya recibido o visto una copia de esta orden puede hacerla acatar en cualquier lugar de California.

NOTICE—ACCESS TO AFFORDABLE HEALTH INSURANCE Do you or someone in your household need affordable health insurance? If so, you should apply for Covered California. Covered California can help reduce the cost you pay toward high-quality, affordable health care. For more information, visit *www.coveredca.com.* Or call Covered California at 1-800-300-1506.	***AVISO—ACCESO A SEGURA DE SALUD MÁS ECONOMICO*** *Necessita seguro de salud a un costo asequible, ya sea para usted o alguien en su hogar? Si es asi, puede presentar una solicitud con Covered California. Covered California lo puede ayudar a reducir al costo que paga por seguro de salud asequible y de alta calidad. Para obtener más información, visite www.coveredca.com. O llame a Covered California al 1-800-300-0213.*

FL-115

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 TRINITY STREET ADDRESS: 11 Court Street MAILING ADDRESS: PO Box 1258 CITY AND ZIP CODE: Weaverville, CA 96093 BRANCH NAME:	
PETITIONER: RESPONDENT:	
PROOF OF SERVICE OF SUMMONS	CASE NUMBER:

1. At the time of service I was at least 18 years of age and not a party to this action. **I served the respondent with copies of:**
   a. ☐ Family Law—Marriage: *Petition—Marriage* (form FL-100), *Summons* (form FL-110), and blank *Response—Marriage* (form FL-120)

   –or–

   b. ☐ Family Law—Domestic Partnership: *Petition—Domestic Partnership* (form FL-103), *Summons* (form FL-110), and blank *Response—Domestic Partnership* (form FL-123)

   –or–

   c. ☐ Uniform Parentage: *Petition to Establish Parental Relationship* (form FL-200), *Summons* (form FL-210), and blank *Response to Petition to Establish Parental Relationship* (form FL-220)

   –or–

   d. ☐ Custody and Support: *Petition for Custody and Support of Minor Children* (form FL-260), *Summons* (form FL-210), and blank *Response to Petition for Custody and Support of Minor Children* (form FL-270)

   and

   e. ☐ (1) ☐ Completed and blank *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act* (form FL-105)
   (2) ☐ Completed and blank *Declaration of Disclosure* (form FL-140)
   (3) ☐ Completed and blank *Schedule of Assets and Debts* (form FL-142)
   (4) ☐ Completed and blank *Income and Expense Declaration* (form FL-150)
   (5) ☐ Completed and blank *Financial Statement (Simplified)* (form FL-155)
   (6) ☐ Completed and blank *Property Declaration* (form FL-160)
   (7) ☐ *Request for Order* (form FL-300), and blank *Responsive Declaration to Request for Order* (form FL-320)
   (8) ☐ Other *(specify)*:

2. Address where respondent was served:

3. I served the respondent by the following means *(check proper box)*:
   a. ☐ **Personal service.** I personally delivered the copies to the respondent (Code Civ. Proc., § 415.10) on *(date)*: at *(time)*:
   b. ☐ **Substituted service.** I left the copies with or in the presence of *(name)*: who is *(specify title or relationship to respondent)*:
      (1) ☐ **(Business)** a person at least 18 years of age who was apparently in charge at the office or usual place of business of the respondent. I informed him or her of the general nature of the papers.
      (2) ☐ **(Home)** a competent member of the household (at least 18 years of age) at the home of the respondent. I informed him or her of the general nature of the papers.

Form Approved for Optional Use
Judicial Council of California
FL-115 [Rev. July 1, 2012]

PROOF OF SERVICE OF SUMMONS
(Family Law—Uniform Parentage—Custody and Support)

Code of Civil Procedure, § 417.10
www.courts.ca.gov

PETITIONER:	CASE NUMBER:
RESPONDENT:	

3. b. *(cont.)* on *(date):* *at (time):*

I thereafter mailed additional copies (by first class, postage prepaid) to the respondent at the place where the copies were left (Code Civ. Proc., § 415.20b) on *(date):*

A **declaration of diligence** is attached, stating the actions taken to first attempt personal service.

c. ☐ **Mail and acknowledgment service.** I mailed the copies to the respondent, addressed as shown in item 2, by first-class mail, postage prepaid, on *(date):* from *(city):*

(1) ☐ with two copies of the *Notice and Acknowledgment of Receipt* (form FL-117) and a postage-paid return envelope addressed to me. **(Attach completed *Notice and Acknowledgment of Receipt* (form FL-117).)** (Code Civ. Proc., § 415.30.)

(2) ☐ to an address outside California (by registered or certified mail with return receipt requested). **(Attach signed return receipt or other evidence of actual delivery to the respondent.)** (Code Civ. Proc., § 415.40.)

d. ☐ **Other** *(specify code section):*

☐ Continued on Attachment 3d.

4. The "NOTICE TO THE PERSON SERVED" on the *Summons* was completed as follows (Code Civ. Proc., §§ 412.30, 415.10, 474):

a. ☐ As an individual **or**

b. ☐ On behalf of respondent who is a

(1) ☐ minor. (Code Civ. Proc., § 416.60.)

(2) ☐ ward or conservatee. (Code Civ. Proc., § 416.70.)

(3) ☐ other *(specify):*

5. **Person who served papers**

Name:

Address:

Telephone number:

This person is

a. ☐ exempt from registration under Business and Professions Code section 22350(b).

b. ☐ not a registered California process server.

c. ☐ a registered California process server: ☐ an employee or ☐ an independent contractor

(1) Registration no.:

(2) County:

d. **The fee** for service was *(specify):* $

6. ☐ **I declare** under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

–or–

7. ☐ **I am a California sheriff, marshal, or constable,** and I certify that the foregoing is true and correct.

Date:

(NAME OF PERSON WHO SERVED PAPERS)

(SIGNATURE OF PERSON WHO SERVED PAPERS)

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 TRINITY STREET ADDRESS: 11 Court Street MAILING ADDRESS: PO Box 1258 CITY AND ZIP CODE: Weaverville, CA 96093 BRANCH NAME:	
PETITIONER: *(This section applies only to family law cases.)* RESPONDENT: OTHER PARTY:	
(This section applies only to guardianship cases.) GUARDIANSHIP OF *(Name)*: Minor	CASE NUMBER:

DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)

1. I am a party to this proceeding to determine custody of a child.
2. ☐ My present address and the present address of each child residing with me is confidential under Family Code section 3429 as I have indicated in item 3.
3. There are *(specify number)*: minor children who are subject to this proceeding, as follows:
   (Insert the information requested below. The residence information must be given for the last FIVE years.)

a. Child's name	Place of birth	Date of birth	Sex

Period of residence	Address	Person child lived with *(name and complete current address)*	Relationship
to present	☐ Confidential	☐ Confidential	
to	Child's residence *(City, State)*	Person child lived with *(name and complete current address)*	
to	Child's residence *(City, State)*	Person child lived with *(name and complete current address)*	
to	Child's residence *(City, State)*	Person child lived with *(name and complete current address)*	

b. Child's name	Place of birth	Date of birth	Sex

☐ Residence information is the same as given above for child a. *(If NOT the same, provide the information below.)*

Period of residence	Address	Person child lived with *(name and complete current address)*	Relationship
to present	☐ Confidential	☐ Confidential	
to	Child's residence *(City, State)*	Person child lived with *(name and complete current address)*	
to	Child's residence *(City, State)*	Person child lived with *(name and complete current address)*	
to	Child's residence *(City, State)*	Person child lived with *(name and complete current address)*	

c. ☐ Additional residence information for a child listed in item a or b is continued on attachment 3c.

d. ☐ Additional children are listed on form *FL-105(A)/GC-120(A). (Provide all requested information for additional children.)*

Form Adopted for Mandatory Use
Judicial Council of California
FL-105/GC-120 [Rev. January 1, 2009]

Family Code, § 3400 et seq.;
Probate Code, §§ 1510(f), 1512
www.courtinfo.ca.gov

SHORT TITLE:	CASE NUMBER:

4. Do you have information about, or have you participated as a party or as a witness or in some other capacity in, another court case or custody or visitation proceeding, in California or elsewhere, concerning a child subject to this proceeding?
☐ Yes ☐ No *(If yes, attach a copy of the orders (if you have one) and provide the following information):*

Proceeding	Case number	Court *(name, state, location)*	Court order or judgment *(date)*	Name of each child	Your connection to the case	Case status
a. ☐ Family						
b. ☐ Guardianship						
c. ☐ Other						

Proceeding	Case Number	Court *(name, state, location)*
d. ☐ Juvenile Delinquency/ Juvenile Dependency		
e. ☐ Adoption		

5. ☐ One or more domestic violence restraining/protective orders are now in effect. *(Attach a copy of the orders if you have one and provide the following information):*

Court	County	State	Case number *(if known)*	Orders expire *(date)*
a. ☐ Criminal				
b. ☐ Family				
c. ☐ Juvenile Delinquency/ Juvenile Dependency				
d. ☐ Other				

6. Do you know of any person who is not a party to this proceeding who has physical custody or claims to have custody of or visitation rights with any child in this case? ☐ Yes ☐ No *(If yes, provide the following information):*

a. Name and address of person	b. Name and address of person	c. Name and address of person
☐ Has physical custody ☐ Claims custody rights ☐ Claims visitation rights	☐ Has physical custody ☐ Claims custody rights ☐ Claims visitation rights	☐ Has physical custody ☐ Claims custody rights ☐ Claims visitation rights
Name of each child	Name of each child	Name of each child

I 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)

7. ☐ Number of pages attached:_____

NOTICE TO DECLARANT: You have a continuing duty to inform this court if you obtain any information about a custody proceeding in a California court or any other court concerning a child subject to this proceeding.

DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)

FL-220

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 TRINITY STREET ADDRESS: 11 Court Street MAILING ADDRESS: PO Box 1258 CITY AND ZIP CODE: Weaverville, CA 96093 BRANCH NAME:	
PETITIONER: RESPONDENT:	
RESPONSE TO PETITION TO ESTABLISH PARENTAL RELATIONSHIP **(Uniform Parentage)**	CASE NUMBER:

1. The children are *(name each)*:

a. Child's name	Date of birth	Age	Sex

b. ☐ A child who is not yet born

2. The petitioner is
   a. ☐ the mother of the children listed above.
   b. ☐ the father of the children listed above.
   c. ☐ not certain whether he or she is the biological parent of the children listed above.
   d. ☐ the child or child's representative *(specify court and date of appointment)*:
   e. ☐ other *(specify)*:
3. The respondent
   a. ☐ lives in the State of California.
   b. ☐ was in California when the listed children were conceived.
   c. ☐ neither a nor b
   d. ☐ other *(specify)*:
4. The children
   a. ☐ live or are in this county.
   b. ☐ are children of a parent who is deceased, and proceedings for administration of the estate have been or could be started in this county.
5. The respondent is
   a. ☐ the father of the children listed in item 1 above.
   b. ☐ the mother of the children listed in item 1 above.
   c. ☐ not certain if he or she is the parent of the children listed in item 1 above.
   d. ☐ not the parent of the children listed in item 1 above.
   e ☐ other *(specify)*:
6. Additional statements
   a. ☐ Parentage has been established by a Voluntary Declaration of Paternity *(attach copy)*.
   b. ☐ Parentage has been established in another case ☐ governmental child support ☐ other *(specify)*:
   c. ☐ Public assistance is being provided to the children.

PETITIONER:	CASE NUMBER:
RESPONDENT:	

The respondent requests that the court make the orders listed below.

7. **Parent-child relationship** *(check all that apply):*
   a. ☐ Respondent ☐ Petitioner ☐ Other *(specify):* is the parent of the children listed in item 1.
   b. ☐ Respondent ☐ Petitioner ☐ Other *(specify):* is not the parent of the children listed in item 1.
   c. ☐ Respondent requests genetic (blood) tests to determine whether the ☐ petitioner ☐ respondent is the parent of the children listed.

8. **Child custody and visitation**
   a. If ☐ Petitioner ☐ Respondent ☐ Other is found to be the parent of the children in listed in item 1:

	Petitioner	Respondent	Joint	Other
b. Legal custody of the children should go to	☐	☐	☐	☐
c. Physical custody of the children should go to	☐	☐	☐	☐

   d. Visitation of the children should be as follows:
      (1) ☐ None
      (2) ☐ Reasonable visitation
      (3) ☐ Petitioner ☐ Respondent should have the right to visit the children as follows *(specify):*
      (4) ☐ Visitation should occur with the following restrictions *(specify):*
      (5) ☐ I request mediation to work out a parenting plan.

9. **Reasonable expenses of pregnancy and birth**

	Petitioner	Respondent	Both
Reasonable expenses of pregnancy and birth should be paid by	☐	☐	☐

10. **Fees and costs of litigation**

	Petitioner	Respondent	Both
a. Attorney fees should be paid by	☐	☐	☐
b. Expert fees, guardian ad litem fees, and other costs of the action or pretrial proceedings should be paid by	☐	☐	☐

11. **Name change.** ☐ The children's names should be changed, according to Family Code section 7638, as follows *(specify old and new names):*

12. **Other orders requested** *(specify):*

13. **Child support.** The court may make orders for support of the children and issue an earnings assignment without further notice to either party.

I have read the restraining order on the back of the *Summons* (form FL-210) and I understand it applies to me.

I 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 RESPONDENT)

NOTICE: If you have a child from this relationship, the court is required to order child support based upon the income of both parents. Support normally continues until the child is 18. You should supply the court with information about your finances. Otherwise, the child support order will be based upon information supplied by the other parent. Any party required to pay child support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent.

FL-150

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address)*	*FOR COURT USE ONLY*
TELEPHONE NO.: E-MAIL ADDRESS *(Optional)*: ATTORNEY FOR *(Name)*:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF TRINITY STREET ADDRESS: 11 Court Street MAILING ADDRESS: PO Box 1258 CITY AND ZIP CODE: Weaverville, CA 96093 BRANCH NAME:	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/CLAIMANT:	
INCOME AND EXPENSE DECLARATION	CASE NUMBER:

1. **Employment** *(Give information on your current job or, if you're unemployed, your most recent job.)*

Attach copies of your pay stubs for last two months (black out social security numbers).

a. Employer:
b. Employer's address:
c. Employer's phone number:
d. Occupation:
e. Date job started:
f. If unemployed, date job ended:
g. I work about hours per week.
h. I get paid $ gross (before taxes) ☐ per month ☐ per week ☐ per hour.

(If you have more than one job, attach an 8½-by-11-inch sheet of paper and list the same information as above for your other jobs. Write "Question 1—Other Jobs" at the top.)

2. **Age and education**
   a. My age is *(specify)*:
   b. I have completed high school or the equivalent: ☐ Yes ☐ No If no, highest grade completed *(specify)*:
   c. Number of years of college completed *(specify)*: ☐ Degree(s) obtained *(specify)*:
   d. Number of years of graduate school completed *(specify)*: ☐ Degree(s) obtained *(specify)*:
   e. I have: ☐ professional/occupational license(s) *(specify)*:
      ☐ vocational training *(specify)*:

3. **Tax information**
   a. ☐ I last filed taxes for tax year *(specify year)*:
   b. My tax filing status is ☐ single ☐ head of household ☐ married, filing separately
      ☐ married, filing jointly with *(specify name)*:
   c. I file state tax returns in ☐ California ☐ other *(specify state)*:
   d. I claim the following number of exemptions (including myself) on my taxes *(specify)*:

4. **Other party's income.** I estimate the gross monthly income (before taxes) of the other party in this case at *(specify)*: $
   This estimate is based on *(explain)*:

(If you need more space to answer any questions on this form, attach an 8½-by-11-inch sheet of paper and write the question number before your answer.) Number of pages attached: _____

I declare under penalty of perjury under the laws of the State of California that the information contained on all pages of this form and any attachments is true and correct.

Date:

(TYPE OR PRINT NAME) ▶ (SIGNATURE OF DECLARANT)

Form Adopted for Mandatory Use
Judicial Council of California
FL-150 [Rev. January 1, 2007]

Family Code, §§ 2030–2032, 2100–2113, 3552, 3620–3634, 4050–4076, 4300–4339
www.courtinfo.ca.gov

PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	
OTHER PARENT/CLAIMANT:	

Attach copies of your pay stubs for the last two months and proof of any other income. Take a copy of your latest federal tax return to the court hearing. ***(Black out your social security number on the pay stub and tax return.)***

5. **Income** *(For average monthly, add up all the income you received in each category in the last 12 months and divide the total by 12.)*

	Last month	Average monthly
a. Salary or wages (gross, before taxes)	$	
b. Overtime (gross, before taxes)	$	
c. Commissions or bonuses	$	
d. Public assistance (for example: TANF, SSI, GA/GR) ☐ currently receiving	$	
e. Spousal support ☐ from this marriage ☐ from a different marriage	$	
f. Partner support ☐ from this domestic partnership ☐ from a different domestic partnership	$	
g. Pension/retirement fund payments	$	
h. Social security retirement (not SSI)	$	
i. Disability: ☐ Social security (not SSI) ☐ State disability (SDI) ☐ Private insurance	$	
j. Unemployment compensation	$	
k. Workers' compensation	$	
l. Other (military BAQ, royalty payments, etc.) *(specify):*	$	

6. **Investment income** *(Attach a schedule showing gross receipts less cash expenses for each piece of property.)*

a. Dividends/interest	$	
b. Rental property income	$	
c. Trust income	$	
d. Other *(specify):*	$	

7. **Income from self-employment, after business expenses for all businesses** $

I am the ☐ owner/sole proprietor ☐ business partner ☐ other *(specify):*

Number of years in this business *(specify):*

Name of business *(specify):*

Type of business *(specify):*

Attach a profit and loss statement for the last two years or a Schedule C from your last federal tax return. Black out your social security number. If you have more than one business, provide the information above for each of your businesses.

8. ☐ **Additional income.** I received one-time money (lottery winnings, inheritance, etc.) in the last 12 months *(specify source and amount):*

9. ☐ **Change in income.** My financial situation has changed significantly over the last 12 months because *(specify):*

10. **Deductions**

	Last month
a. Required union dues	$
b. Required retirement payments (not social security, FICA, 401(k), or IRA)	$
c. Medical, hospital, dental, and other health insurance premiums *(total monthly amount)*	$
d. Child support that I pay for children from other relationships	$
e. Spousal support that I pay by court order from a different marriage	$
f. Partner support that I pay by court order from a different domestic partnership	$
g. Necessary job-related expenses not reimbursed by my employer *(attach explanation labeled "Question 10g")*	$

11. **Assets**

	Total
a. Cash and checking accounts, savings, credit union, money market, and other deposit accounts	$
b. Stocks, bonds, and other assets I could easily sell	$
c. All other property, ☐ real and ☐ personal *(estimate fair market value minus the debts you owe)*	$

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/CLAIMANT:	CASE NUMBER:

12. **The following people live with me:**

Name	Age	How the person is related to me? *(ex: son)*	That person's gross monthly income	Pays some of the household expenses?
a.				☐ Yes ☐ No
b.				☐ Yes ☐ No
c.				☐ Yes ☐ No
d.				☐ Yes ☐ No
e.				☐ Yes ☐ No

13. **Average monthly expenses** ☐ Estimated expenses ☐ Actual expenses ☐ Proposed needs

a. Home:
   (1) ☐ Rent or ☐ mortgage . . . $ _____
   If mortgage:
   (a) average principal: $ _____
   (b) average interest: $ _____
   (2) Real property taxes . . . . . $ _____
   (3) Homeowner's or renter's insurance (if not included above) . . . . . $ _____
   (4) Maintenance and repair . . . . . $ _____
b. Health-care costs not paid by insurance . . . $ _____
c. Child care . . . . . $ _____
d. Groceries and household supplies . . . . . $ _____
e. Eating out . . . . . $ _____
f. Utilities (gas, electric, water, trash) . . . . . $ _____
g. Telephone, cell phone, and e-mail . . . . . $ _____
h. Laundry and cleaning . . . . . $ _____
i. Clothes . . . . . $ _____
j. Education . . . . . $ _____
k. Entertainment, gifts, and vacation . . . . . $ _____
l. Auto expenses and transportation (insurance, gas, repairs, bus, etc.) . . . . . $ _____
m. Insurance (life, accident, etc.; do not include auto, home, or health insurance) . . . $ _____
n. ~~Savings and investments~~ . . . . . $ _____
o. Charitable contributions . . . . . $ _____
p. Monthly payments listed in item 14 *(itemize below in 14 and insert total here)* . . $ _____
q. Other *(specify)*: . . . . . $ _____
r. **TOTAL EXPENSES** (a–q) *(do not add in the amounts in a(1)(a) and (b))* $ _____
s. **Amount of expenses paid by others** $ _____

14. **Installment payments and debts not listed above**

Paid to	For	Amount	Balance	Date of last payment
		$	$	
		$	$	
		$	$	
		$	$	
		$	$	
		$	$	

15. **Attorney fees** *(This is required if either party is requesting attorney fees.)*:
   a. To date, I have paid my attorney this amount for fees and costs *(specify)*: $
   b. The source of this money was *(specify)*:
   c. I still owe the following fees and costs to my attorney *(specify total owed)*: $
   d. My attorney's hourly rate is *(specify)*: $

I confirm this fee arrangement.

Date:

▶ _____
(TYPE OR PRINT NAME OF ATTORNEY) (SIGNATURE OF ATTORNEY)

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/CLAIMANT:	CASE NUMBER

CHILD SUPPORT INFORMATION

(NOTE: Fill out this page only if your case involves child support.)

16. **Number of children**
    a. I have *(specify number):* children under the age of 18 with the other parent in this case.
    b. The children spend percent of their time with me and percent of their time with the other parent.
    (If you're not sure about percentage or it has not been agreed on, please describe your parenting schedule here.)

17. **Children's health-care expenses**
    a. ☐ I do ☐ I do not have health insurance available to me for the children through my job.
    b. Name of insurance company:
    c. Address of insurance company:

    d. The monthly cost for the **children's** health insurance is or would be *(specify):* $
    (Do not include the amount your employer pays.)

18. **Additional expenses for the children in this case** — Amount per month
    a. Child care so I can work or get job training. . . . . $ _____
    b. Children's health care not covered by insurance . . . . . $ _____
    c. Travel expenses for visitation . . . . . $ _____
    d. Children's educational or other special needs *(specify below):* . . . . . $ _____

19. **Special hardships.** I ask the court to consider the following special financial circumstances *(attach documentation of any item listed here, including court orders):*

	Amount per month	For how many months?
a. Extraordinary health expenses not included in 18b.	$ _____	_____
b. Major losses not covered by insurance (examples: fire, theft, other insured loss)	$ _____	_____
c. (1) Expenses for my minor children who are from other relationships and are living with me	$ _____	_____
(2) Names and ages of those children *(specify):*		
(3) Child support I receive for those children.	$ _____	

The expenses listed in a, b, and c create an extreme financial hardship because *(explain):*

20. **Other information I want the court to know concerning support in my case** *(specify):*

FL-155

Your name and address or attorney's name and address: TELEPHONE NO.:	FOR COURT USE ONLY
ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF TRINITY STREET ADDRESS: 11 Court Street MAILING ADDRESS: PO Box 258 CITY AND ZIP CODE: Weaverville, CA 96093 BRANCH NAME:	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	
FINANCIAL STATEMENT (SIMPLIFIED)	CASE NUMBER:

NOTICE: Read page 2 to find out if you qualify to use this form and how to use it.

1. a. ☐ My only source of income is TANF, SSI, or GA/GR.
   b. ☐ I have applied for TANF, SSI, or GA/GR.
2. I am the parent of the following number of natural or adopted children from this relationship .....
3. a. The children from this relationship are with me this amount of time ..... %
   b. The children from this relationship are with the other parent this amount of time ..... %
   c. Our arrangement for custody and visitation is *(specify, using extra sheet if necessary)*:
4. My tax filing status is: ☐ single ☐ married filing jointly ☐ head of household ☐ married filing separately.
5. My current gross income *(before taxes)* per month is ..... $

Attach 1 copy of pay stubs for last 2 months here (cross out social security numbers)

This income comes from the following:

- ☐ Salary/wages: Amount before taxes per month ..... $
- ☐ Retirement: Amount before taxes per month ..... $
- ☐ Unemployment compensation: Amount per month ..... $
- ☐ Workers' compensation: Amount per month ..... $
- ☐ Social security: ☐ SSI ☐ Other Amount per month ..... $
- ☐ Disability: Amount per month ..... $
- ☐ Interest income (from bank accounts or other): Amount per month ..... $

I have no income other than as stated in this paragraph.

6. I pay the following monthly expenses for the children in this case:
   a. ☐ Day care or preschool to allow me to work or go to school ..... $
   b. ☐ Health care not paid for by insurance ..... $
   c. ☐ School, education, tuition, or other special needs of the child ..... $
   d. ☐ Travel expenses for visitation ..... $
7. ☐ There are *(specify number)* _____ other minor children of mine living with me. Their monthly expenses that I pay are ..... $
8. I spend the following average monthly amounts *(please attach proof)*:
   a. ☐ Job-related expenses that are not paid by my employer *(specify reasons for expenses on separate sheet)* $
   b. ☐ Required union dues ..... $
   c. ☐ Required retirement payments (not social security, FICA, 401k or IRA) ..... $
   d. ☐ Health insurance costs ..... $
   e. ☐ Child support I am paying for other minor children of mine who are not living with me ..... $
   f. ☐ Spousal support I am paying because of a court order for another relationship ..... $
   g. ☐ Monthly housing costs: ☐ rent or ☐ mortgage ..... $
      If mortgage: interest payments $_____ real property taxes $_____
9. Information concerning ☐ my current employment ☐ my most recent employment:
   Employer:
   Address:
   Telephone number:
   My occupation:
   Date work started:
   Date work stopped *(if applicable)*: What was your gross income *(before taxes)* before work stopped?:

Form Approved for Optional Use
Judicial Council of California
FL-155 [Rev. January 1, 2004]

Family Code, § 4068(b)
www.courtinfo.ca.gov

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER.

10. My estimate of the other party's gross monthly income *(before taxes)* is ..... $ _____
11. My current spouse's monthly income *(before taxes)* is ..... $ _____
12. Other information I want the court to know concerning child support in my case *(attach extra sheet with the information).*
13. ☐ I am attaching a copy of page 3 of form FL-150, *Income and Expense Declaration* showing my expenses.

I declare under penalty of perjury under the laws of the State of California that the information contained on all pages of this form and any attachments is true and correct.

Date:

_____ (TYPE OR PRINT NAME)

▶ _____ (SIGNATURE OF DECLARANT)

☐ PETITIONER/PLAINTIFF ☐ RESPONDENT/DEFENDANT

INSTRUCTIONS

Step 1: Are you eligible to use this form? *If your answer is YES to any of the following questions, you may NOT use this form:*

- Are you asking for spousal support (alimony) or a change in spousal support?
- Is your spouse or former spouse asking for spousal support (alimony) or a change in spousal support?
- Are you asking the other party to pay your attorney fees?
- Is the other party asking you to pay his or her attorney fees?
- Do you receive money (income) from any source other than the following?
  - Welfare (such as TANF, GR, or GA)
  - Salary or wages
  - Disability
  - Unemployment
  - Interest
  - Workers' compensation
  - Social security
  - Retirement
- Are you self-employed?

If you are eligible to use this form and choose to do so, you do not need to complete the *Income and Expense Declaration* (form FL-150). Even if you are eligible to use this form, you may choose instead to use the *Income and Expense Declaration* (form FL-150).

Step 2: Make 2 copies of each of your pay stubs for the last two months. If you received money from other than wages or salary, include copies of the pay stub received with that money.
Privacy notice: If you wish, you may cross out your social security number if it appears on the pay stub, other payment notice or your tax return

Step 3: Make 2 copies of your most recent federal income tax form.

Step 4: Complete this form with the required information. Type the form if possible or complete it neatly and clearly in black ink. If you need additional room, please use plain or lined paper, 8½-by-11", and staple to this form.

Step 5: Make 2 copies of each side of this completed form and any attached pages.

Step 6: Serve a copy on the other party. Have someone other than yourself mail to the attorney for the other party, the other party, and the local child support agency, if they are handling the case, 1 copy of this form, 1 copy of each of your stubs for the last two months, and 1 copy of your most recent federal income tax return.

Step 7: File the original with the court. Staple this form with 1 copy of each of your pay stubs for the last two months. Take this document and give it to the clerk of the court. Check with your local court about how to submit your return.

Step 8: Keep the remaining copies of the documents for your file.

Step 9: Take the copy of your latest federal income tax return to the court hearing.

It is very important that you attend the hearings scheduled for this case. If you do not attend a hearing, the court may make an order without considering the information you want the court to consider.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

CHILDREN'S HOLIDAY SCHEDULE ATTACHMENT

TO ☐ **Petition** ☐ **Response** ☐ **Request for Order** ☐ **Responsive Declaration to Request for Order**
☐ **Stipulation and Order for Custody and/or Visitation of Children** ☐ **Findings and Order After Hearing or Judgment**
☐ **Visitation Order—Juvenile** ☐ **Other *(specify):***

1. **Holiday parenting.** The following table shows the holiday parenting schedules. Write "Petitioner," "Respondent," "Other Parent," or "Other Party" to specify each parent's (or party's) years—odd or even numbered years or both ("every year")—and under "Times," specify the starting and ending days and times.
   Note: Unless specifically ordered, a child's holiday schedule order has priority over the regular parenting time.

Holidays	**Times (from when to when)** *(Unless noted below, all single-day holidays start at ____ a.m. and end at ____ p.m.)*	**Every Year** *Petitioner/ Respondent/ Other Parent/Party*	**Even Numbered Years** *Petitioner/ Respondent/ Other Parent/Party*	**Odd Numbered Years** *Petitioner/ Respondent/ Other Parent/Party*
December 31 (New Year's Eve)				
January 1 (New Year's Day)				
Martin Luther King's Birthday (weekend)				
February 12 (Lincoln's Birthday)				
President's Day (Weekend)				
President's Week Recess, first half				
President's Week Recess, second half				
Spring Break, first half				
Spring Break, second half				
Mother's Day				
Memorial Day (weekend)				
Father's Day				
July 4th				
Summer Break:				
Labor Day (weekend)				
Columbus Day (weekend)				
Halloween				
November 11 (Veterans Day)				
Thanksgiving Day				
Thanksgiving weekend				
December/January School Break				
Child's birthday *(date):*				
Child's birthday *(date):*				
Child's birthday *(date):*				
Mother's birthday *(date):*				
Father's birthday *(date):*				
Other Parent's/Party's birthday *(date):*				
Breaks for year-round schools:				

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

1. **Holiday parenting** *(continued)*

Other Holidays	**Times (from when to when)** *(Unless noted below, all single-day holidays start at _____ a.m. and end at _____ p.m.)*	**Every Year** *Petitioner/ Respondent/ Other Parent/Party*	**Even Numbered Years** *Petitioner/ Respondent/ Other Parent/Party*	**Odd Numbered Years** *Petitioner/ Respondent/ Other Parent/Party*

☐ Any three-day weekend not specified in item 1 will be spent with the parent or party who would normally have that weekend.
☐ Other *(specify)*:

2. **Vacations**

The ☐ Petitioner ☐ Respondent ☐ Other Parent/Party:

a. May take vacation with the children of up to *(specify number)*: ☐ days ☐ weeks the following number of times per year *(specify)*:

b. Must notify the other parent or party in writing of vacation plans a minimum of *(specify number)*: days in advance and provide the other parent or party with a basic itinerary that includes dates of leaving and returning, destinations, flight information, and telephone numbers for emergency purposes.

(1) ☐ The other parent or party has *(number)*: days to respond if there is a problem with the vacation schedule.

(2) ☐ If the parties cannot agree on the vacation plans (*check all that apply*):

(A) ☐ They must confer to try to resolve any disagreement before filing for a court hearing.

(B) ☐ In even-numbered years, the parties will follow the suggestions of ☐ Petitioner ☐ Respondent ☐ Other Parent/Party for resolving the disagreement.

(C) ☐ In odd-numbered years, the parties will follow the suggestions of ☐ Petitioner ☐ Respondent ☐ Other Parent/Party for resolving the disagreement.

(D) ☐ Other *(specify)*:

c. ☐ This vacation may be outside the state of California.

d. ☐ Any vacation outside ☐ California ☐ the United States requires prior written consent of the other parent or a court order.

e. ☐ Other *(specify)*:

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

CHILDREN'S HOLIDAY SCHEDULE ATTACHMENT

TO ☐ **Petition** ☐ **Response** ☐ **Request for Order** ☐ **Responsive Declaration to Request for Order**
☐ **Stipulation and Order for Custody and/or Visitation of Children** ☐ **Findings and Order After Hearing or Judgment**
☐ **Visitation Order—Juvenile** ☐ **Other *(specify):***

1. **Holiday parenting.** The following table shows the holiday parenting schedules. Write "Petitioner," "Respondent," "Other Parent," or "Other Party" to specify each parent's (or party's) years—odd or even numbered years or both ("every year")—and under "Times," specify the starting and ending days and times.
   Note: Unless specifically ordered, a child's holiday schedule order has priority over the regular parenting time.

Holidays	**Times (from when to when)** *(Unless noted below, all single-day holidays start at ____ a.m. and end at ____ p.m.)*	**Every Year** *Petitioner/ Respondent/ Other Parent/Party*	**Even Numbered Years** *Petitioner/ Respondent/ Other Parent/Party*	**Odd Numbered Years** *Petitioner/ Respondent/ Other Parent/Party*
December 31 (New Year's Eve)				
January 1 (New Year's Day)				
Martin Luther King's Birthday (weekend)				
February 12 (Lincoln's Birthday)				
President's Day (Weekend)				
President's Week Recess, first half				
President's Week Recess, second half				
Spring Break, first half				
Spring Break, second half				
Mother's Day				
Memorial Day (weekend)				
Father's Day				
July 4th				
Summer Break:				
Labor Day (weekend)				
Columbus Day (weekend)				
Halloween				
November 11 (Veterans Day)				
Thanksgiving Day				
Thanksgiving weekend				
December/January School Break				
Child's birthday *(date):*				
Child's birthday *(date):*				
Child's birthday *(date):*				
Mother's birthday *(date):*				
Father's birthday *(date):*				
Other Parent's/Party's birthday *(date):*				
Breaks for year-round schools:				

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

1. **Holiday parenting** *(continued)*

Other Holidays	**Times (from when to when)** *(Unless noted below, all single-day holidays start at _____ a.m. and end at _____ p.m.)*	**Every Year** *Petitioner/ Respondent/ Other Parent/Party*	**Even Numbered Years** *Petitioner/ Respondent/ Other Parent/Party*	**Odd Numbered Years** *Petitioner/ Respondent/ Other Parent/Party*

☐ Any three-day weekend not specified in item 1 will be spent with the parent or party who would normally have that weekend.
☐ Other *(specify)*:

2. **Vacations**

The ☐ Petitioner ☐ Respondent ☐ Other Parent/Party:

a. May take vacation with the children of up to *(specify number)*: ☐ days ☐ weeks the following number of times per year *(specify)*:

b. Must notify the other parent or party in writing of vacation plans a minimum of *(specify number)*: days in advance and provide the other parent or party with a basic itinerary that includes dates of leaving and returning, destinations, flight information, and telephone numbers for emergency purposes.

(1) ☐ The other parent or party has *(number)*: days to respond if there is a problem with the vacation schedule.

(2) ☐ If the parties cannot agree on the vacation plans (*check all that apply*):

(A) ☐ They must confer to try to resolve any disagreement before filing for a court hearing.

(B) ☐ In even-numbered years, the parties will follow the suggestions of ☐ Petitioner ☐ Respondent ☐ Other Parent/Party for resolving the disagreement.

(C) ☐ In odd-numbered years, the parties will follow the suggestions of ☐ Petitioner ☐ Respondent ☐ Other Parent/Party for resolving the disagreement.

(D) ☐ Other *(specify)*:

c. ☐ This vacation may be outside the state of California.

d. ☐ Any vacation outside ☐ California ☐ the United States requires prior written consent of the other parent or a court order.

e. ☐ Other *(specify)*:

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

ADDITIONAL PROVISIONS—PHYSICAL CUSTODY ATTACHMENT

TO ☐ **Petition** ☐ **Response** ☐ **Request for Order** ☐ **Responsive Declaration to Request for Order**
☐ **Stipulation and Order for Custody and/or Visitation of Children** ☐ **Findings and Order After Hearing or Judgment**
☐ **Custody Order—Juvenile—Final Judgment** ☐ **Other** *(specify):*

The additional provisions to physical custody apply to *(specify parties):* ☐ Petitioner ☐ Respondent ☐ Other Parent/Party

1. ☐ **Notification of parties' current address.** ☐ Petitioner ☐ Respondent ☐ Other Parent/Party
must notify all parties within *(specify number):* days of any change in his or her
   a. address for ☐ residence ☐ mailing ☐ work ☐ e-mail
   b. telephone/message number at ☐ home ☐ cell phone ☐ work ☐ the children's schools
   The parties may not use such information for the purpose of harassing, annoying, or disturbing the peace of the other or invading the other's privacy. No residence or work address is needed if a party has an address with the State of California's Safe at Home confidential address program.

2. ☐ **Notification of proposed move of child.** Each party must notify the other *(specify number):* days before any planned change in residence of the children. The notification must state, to the extent known, the planned address of the children, including the county and state of the new residence. The notification must be sent by certified mail, return receipt requested.

3. ☐ **Child care.**
   a. ☐ The children must not be left alone without age-appropriate supervision.
   b. ☐ The parties must let each other know the name, address, and phone number of the children's regular child-care providers.

4. ☐ **Right of first option of child care.** In the event any party requires child care for *(specify number):* hours or more while the children are in his or her custody, the other party or parties must be given first opportunity, with as much prior notice as possible, to care for the children before other arrangements are made. Unless specifically agreed or ordered by the court, this order does not include regular child care needed when a party is working.

5. ☐ **Canceled visitation (parenting time).**
   a. ☐ If the noncustodial party fails to arrive at the appointed time and fails to notify the custodial party that he or she will be late, then the custodial party need wait for only *(specify number):* minutes before considering the visitation (parenting time) canceled.
   b. ☐ If the noncustodial party is unable to exercise visitation (parenting time) on a given occasion, he or she must notify the custodial party *(specify):*
      ☐ at the earliest possible opportunity.
      ☐ Other *(specify):*
   c. ☐ If the children are ill and unable to participate in the scheduled visitation (parenting time), the custodial party must give the noncustodial party *(specify):*
      ☐ as much notice as possible.
      ☐ A doctor's excuse.
      ☐ Other *(specify):*

6. ☐ **Phone contact between parties and children.**
   a. ☐ The children may have telephone access to the parties ☐ and the parties may have telephone access to the children at reasonable times, for reasonable durations.
   b. ☐ The custodial parent must make the child available for the following scheduled telephone contact *(specify child's telephone contact with each party):*
   c. ☐ No party or any other third party may listen to, monitor, or interfere with the calls.

Form Approved for Optional Use
Judicial Council of California
FL-341(D) [Rev. July 1, 2016]

Family Code, §§ 3003, 3024, 3083
www.courts.ca.gov

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

7. ☐ **No negative comments.** The parties will not make or allow others to make negative comments about each other or about their past or present relationships, family, or friends within hearing distance of the children.

8. ☐ **Discussion of court proceedings with children.** Other than age-appropriate discussion of the parenting plan and the children's role in mediation or other court proceedings, the parties will not discuss with the children any court proceedings relating to custody or visitation (parenting time).

9. ☐ **No use of children as messengers.** The parties will communicate directly with each other on matters concerning the children and may not use the children as messengers between them.

10. ☐ **Alcohol or substance abuse.** The ☐ petitioner ☐ respondent ☐ other parent/party may not consume alcoholic beverages, narcotics, or restricted dangerous drugs (except by prescription) within *(specify number):* hours before or during periods of time with the children ☐ and may not permit any third party to do so in the presence of the children.

11. ☐ **No exposure to cigarette or medical marijuana smoke.** The parties will not expose the children to secondhand cigarette or medical marijuana smoke.

12. ☐ **No interference with schedule of any party without that party's consent.** The parties will not schedule activities for the children during the other party's scheduled visitation (parenting time) without the other party's prior agreement.

13. ☐ **Third-party contact.**
    a. ☐ The children will have no contact with *(specify name):*
    b. ☐ The children must not be left alone in the presence of *(specify name):*

14. ☐ **Children's clothing and belongings.**
    a. ☐ Each party will maintain clothing for the children so that the children do not have to make the exchanges with additional clothing.
    b. ☐ The children will be returned to the other party with the clothing and other belongings they had when they arrived.

15. ☐ **Log book.** The parties will maintain a "log book" and make sure that the book is sent with the children between their homes. Using businesslike notes (no personal comments), parties will record information related to the health, education, and welfare issues that arise during the time the children are with them.

16. ☐ **Terms and conditions of order may be changed.** The terms and conditions of this order may be added to or changed as the needs of the children and parties change. Such changes will be in writing, dated and signed by the parties; each party will retain a copy. If the parties want a change to be a court order, it must be filed with the court in the form of a court document.

17. ☐ **Other *(specify):***

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

ADDITIONAL PROVISIONS—PHYSICAL CUSTODY ATTACHMENT

TO ☐ **Petition** ☐ **Response** ☐ **Request for Order** ☐ **Responsive Declaration to Request for Order**
☐ **Stipulation and Order for Custody and/or Visitation of Children** ☐ **Findings and Order After Hearing or Judgment**
☐ **Custody Order—Juvenile—Final Judgment** ☐ **Other *(specify):***

The additional provisions to physical custody apply to *(specify parties):* ☐ Petitioner ☐ Respondent ☐ Other Parent/Party

1. ☐ **Notification of parties' current address.** ☐ Petitioner ☐ Respondent ☐ Other Parent/Party
must notify all parties within *(specify number)*: days of any change in his or her
   a. address for ☐ residence ☐ mailing ☐ work ☐ e-mail
   b. telephone/message number at ☐ home ☐ cell phone ☐ work ☐ the children's schools
   The parties may not use such information for the purpose of harassing, annoying, or disturbing the peace of the other or invading the other's privacy. No residence or work address is needed if a party has an address with the State of California's Safe at Home confidential address program.

2. ☐ **Notification of proposed move of child.** Each party must notify the other *(specify number):* days before any planned change in residence of the children. The notification must state, to the extent known, the planned address of the children, including the county and state of the new residence. The notification must be sent by certified mail, return receipt requested.

3. ☐ **Child care.**
   a. ☐ The children must not be left alone without age-appropriate supervision.
   b. ☐ The parties must let each other know the name, address, and phone number of the children's regular child-care providers.

4. ☐ **Right of first option of child care.** In the event any party requires child care for *(specify number):* hours or more while the children are in his or her custody, the other party or parties must be given first opportunity, with as much prior notice as possible, to care for the children before other arrangements are made. Unless specifically agreed or ordered by the court, this order does not include regular child care needed when a party is working.

5. ☐ **Canceled visitation (parenting time).**
   a. ☐ If the noncustodial party fails to arrive at the appointed time and fails to notify the custodial party that he or she will be late, then the custodial party need wait for only *(specify number):* minutes before considering the visitation (parenting time) canceled.
   b. ☐ If the noncustodial party is unable to exercise visitation (parenting time) on a given occasion, he or she must notify the custodial party *(specify):*
      ☐ at the earliest possible opportunity.
      ☐ Other *(specify):*
   c. ☐ If the children are ill and unable to participate in the scheduled visitation (parenting time), the custodial party must give the noncustodial party *(specify):*
      ☐ as much notice as possible.
      ☐ A doctor's excuse.
      ☐ Other *(specify):*

6. ☐ **Phone contact between parties and children.**
   a. ☐ The children may have telephone access to the parties ☐ and the parties may have telephone access to the children at reasonable times, for reasonable durations.
   b. ☐ The custodial parent must make the child available for the following scheduled telephone contact *(specify child's telephone contact with each party):*
   c. ☐ No party or any other third party may listen to, monitor, or interfere with the calls.

Form Approved for Optional Use
Judicial Council of California
FL-341(D) [Rev. July 1, 2016]

Family Code, §§ 3003, 3024, 3083
www.courts.ca.gov

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

7. ☐ **No negative comments.** The parties will not make or allow others to make negative comments about each other or about their past or present relationships, family, or friends within hearing distance of the children.

8. ☐ **Discussion of court proceedings with children.** Other than age-appropriate discussion of the parenting plan and the children's role in mediation or other court proceedings, the parties will not discuss with the children any court proceedings relating to custody or visitation (parenting time).

9. ☐ **No use of children as messengers.** The parties will communicate directly with each other on matters concerning the children and may not use the children as messengers between them.

10. ☐ **Alcohol or substance abuse.** The ☐ petitioner ☐ respondent ☐ other parent/party may not consume alcoholic beverages, narcotics, or restricted dangerous drugs (except by prescription) within *(specify number):* hours before or during periods of time with the children ☐ and may not permit any third party to do so in the presence of the children.

11. ☐ **No exposure to cigarette or medical marijuana smoke.** The parties will not expose the children to secondhand cigarette or medical marijuana smoke.

12. ☐ **No interference with schedule of any party without that party's consent.** The parties will not schedule activities for the children during the other party's scheduled visitation (parenting time) without the other party's prior agreement.

13. ☐ **Third-party contact.**
    a. ☐ The children will have no contact with *(specify name):*
    b. ☐ The children must not be left alone in the presence of *(specify name):*

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    a. ☐ Each party will maintain clothing for the children so that the children do not have to make the exchanges with additional clothing.
    b. ☐ The children will be returned to the other party with the clothing and other belongings they had when they arrived.

15. ☐ **Log book.** The parties will maintain a "log book" and make sure that the book is sent with the children between their homes. Using businesslike notes (no personal comments), parties will record information related to the health, education, and welfare issues that arise during the time the children are with them.

16. ☐ **Terms and conditions of order may be changed.** The terms and conditions of this order may be added to or changed as the needs of the children and parties change. Such changes will be in writing, dated and signed by the parties; each party will retain a copy. If the parties want a change to be a court order, it must be filed with the court in the form of a court document.

17. ☐ **Other *(specify):***

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

JOINT LEGAL CUSTODY ATTACHMENT

TO ☐ **Petition** ☐ **Response** ☐ **Request for Order** ☐ **Responsive Declaration to Request for Order**
☐ **Stipulation and Order for Custody and/or Visitation of Children** ☐ **Findings and Order After Hearing or Judgment**
☐ **Custody Order—Juvenile—Final Judgment** ☐ **Other *(specify):***

NOTICE! In exercising joint legal custody, the parties may act alone, as long as the action does not conflict with any orders about the physical custody of the children. **Use this form only if you want to ask the court to make orders specifying when the consent of both parties is required to exercise legal control of the children and the consequences for failing to obtain mutual consent.**

1. The parties *(specify):* ☐ Petitioner ☐ Respondent ☐ Other Parent/Party will have joint legal custody of the children.
2. In exercising joint legal custody, the parties will share in the responsibility and discuss in good faith matters concerning the health, education, and welfare of the children. The parties must discuss and consent in making decisions on the following matters:
   a. ☐ Enrollment in or leaving a particular private or public school or daycare center
   b. ☐ Beginning or ending of psychiatric, psychological, or other mental health counseling or therapy
   c. ☐ Participation in extracurricular activities
   d. ☐ Selection of a doctor, dentist, or other health professional (except in emergency situations)
   e. ☐ Participation in particular religious activities or institutions
   f. ☐ Out-of-country or out-of-state travel
   g. ☐ Other *(specify):*
3. **If a party does not obtain the consent of the other party to those items in 2, which are granted as court orders:**
   a. He or she may be subject to civil or criminal penalties.
   b. The court may change the legal and physical custody of the minor children.
   c. ☐ Other consequences *(specify):*
4. ☐ **Special decision making designation and access to children's records**
   a. The ☐ petitioner ☐ respondent ☐ other parent/party will be responsible for making decisions regarding the following issues *(specify):*
   b. Both the custodial and noncustodial parent have the right to access records and information about their minor children (including medical, dental, and school records) and consult with professionals who are providing services to the children.
5. ☐ **Health-care notification.**
   a. ☐ Each party must notify the other of the name and address of each health practitioner who examines or treats the children; such notification must be made within *(specify number):* days of the first treatment or examination.
   b. ☐ Each party is authorized to take any and all actions necessary to protect the health and welfare of the children, including but not limited to consent to emergency surgical procedures or treatment. The party authorizing such emergency treatment must notify the other party as soon as possible of the emergency situation and of all procedures or treatment administered to the children.
   c. ☐ The parties are required to administer any prescribed medications for the children.
6. ☐ **School notification.** Each party will be designated as a person the children's school will contact in the event of an emergency.
7. ☐ **Name.** The parties will not change the last name of the children or have a different name used on the children's medical, school, or other records without the written consent of the other party.
8. ☐ **Other *(specify):***

Form Approved for Optional Use
Judicial Council of California
FL-341(E) [Rev. July 1, 2016]

Family Code, §§ 3003, 3025, 3083
www.courts.ca.gov

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

JOINT LEGAL CUSTODY ATTACHMENT

TO ☐ **Petition** ☐ **Response** ☐ **Request for Order** ☐ **Responsive Declaration to Request for Order**
☐ **Stipulation and Order for Custody and/or Visitation of Children** ☐ **Findings and Order After Hearing or Judgment**
☐ **Custody Order—Juvenile—Final Judgment** ☐ **Other *(specify):***

NOTICE! In exercising joint legal custody, the parties may act alone, as long as the action does not conflict with any orders about the physical custody of the children. **Use this form only if you want to ask the court to make orders specifying when the consent of both parties is required to exercise legal control of the children and the consequences for failing to obtain mutual consent.**

1. The parties *(specify):* ☐ Petitioner ☐ Respondent ☐ Other Parent/Party will have joint legal custody of the children.
2. In exercising joint legal custody, the parties will share in the responsibility and discuss in good faith matters concerning the health, education, and welfare of the children. The parties must discuss and consent in making decisions on the following matters:
   a. ☐ Enrollment in or leaving a particular private or public school or daycare center
   b. ☐ Beginning or ending of psychiatric, psychological, or other mental health counseling or therapy
   c. ☐ Participation in extracurricular activities
   d. ☐ Selection of a doctor, dentist, or other health professional (except in emergency situations)
   e. ☐ Participation in particular religious activities or institutions
   f. ☐ Out-of-country or out-of-state travel
   g. ☐ Other *(specify):*
3. **If a party does not obtain the consent of the other party to those items in 2, which are granted as court orders:**
   a. He or she may be subject to civil or criminal penalties.
   b. The court may change the legal and physical custody of the minor children.
   c. ☐ Other consequences *(specify):*
4. ☐ **Special decision making designation and access to children's records**
   a. The ☐ petitioner ☐ respondent ☐ other parent/party will be responsible for making decisions regarding the following issues *(specify):*
   b. Both the custodial and noncustodial parent have the right to access records and information about their minor children (including medical, dental, and school records) and consult with professionals who are providing services to the children.
5. ☐ **Health-care notification.**
   a. ☐ Each party must notify the other of the name and address of each health practitioner who examines or treats the children; such notification must be made within *(specify number):* days of the first treatment or examination.
   b. ☐ Each party is authorized to take any and all actions necessary to protect the health and welfare of the children, including but not limited to consent to emergency surgical procedures or treatment. The party authorizing such emergency treatment must notify the other party as soon as possible of the emergency situation and of all procedures or treatment administered to the children.
   c. ☐ The parties are required to administer any prescribed medications for the children.
6. ☐ **School notification.** Each party will be designated as a person the children's school will contact in the event of an emergency.
7. ☐ **Name.** The parties will not change the last name of the children or have a different name used on the children's medical, school, or other records without the written consent of the other party.
8. ☐ **Other *(specify):***

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Judicial Council of California
FL-341(E) [Rev. July 1, 2016]

Family Code, §§ 3003, 3025, 3083
www.courts.ca.gov

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

REQUEST FOR CHILD ABDUCTION PREVENTION ORDERS

—This is not a court order—

TO ☐ **Petition** ☐ **Response** ☐ **Request for Order** ☐ **Responsive Declaration to Request for Order**
☐ Other *(specify):*

1. Your name:
2. **I request orders to prevent child abduction by *(specify):*** ☐ **Petitioner** ☐ **Respondent** ☐ **Other Parent/Party**
3. **I think that he or she might take the children without my permission to *(check all that apply):***
   a. ☐ another county in California *(specify the county):*
   b. ☐ another state *(specify the state):*
   c. ☐ a foreign country *(specify the foreign country):*
      (1) ☐ He or she is a citizen of that country.
      (2) ☐ He or she has family or emotional ties to that country *(explain)*:

4. **I think that he or she might take the children without my permission because he or she *(check all that apply):***
   a. ☐ has violated—or threatened to violate—a custody or visitation (parenting time) order in the past.
   Explain:

   b. ☐ does not have strong ties to California.
   Explain any work, financial, social, or family situation that makes it easy for the party to leave California.

   c. ☐ has recently done things that make it easy for him or her to take the children away without permission. He or she has *(check all that apply):*
      ☐ quit his or her job. ☐ sold his or her home.
      ☐ closed a bank account. ☐ ended a lease.
      ☐ sold or gotten rid of assets. ☐ hidden or destroyed documents.
      ☐ applied for a passport, birth certificate, or school or medical records.
      ☐ Other *(specify):*

   d. ☐ has a history of *(check all that apply and explain your answers in the space provided in this section):*
      ☐ domestic violence. ☐ child abuse. ☐ not cooperating with me in parenting.
      ☐ taking the children without my permission.
      Explain your answers to item d.

   e. ☐ has a criminal record. *Explain:*

Form Adopted for Mandatory Use
Judicial Council of California
FL-312 [Rev. July 1, 2016]

Family Code, § 3048
www.courts.ca.gov

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

I REQUEST THE FOLLOWING ORDERS AGAINST *(specify)*: ☐ **Petitioner** ☐ **Respondent** ☐ **Other Parent/Party**

5. ☐ **Supervised Visitation (Parenting Time)**
I ask the court to order supervised visitation (parenting time). I understand that the person I request to supervise the visits must meet the qualifications listed in *Declaration of Supervised Visitation Provider* (form FL-324)
The specific terms are attached *(check one)*: ☐ form FL-311 ☐ as follows:

6. ☐ **Post a Bond**
I ask the court to order the posting of a bond for $ _____. If the party takes the children without my permission, I can use this money to bring the children back.

7. ☐ **Do Not Move Without My Permission or Court Order**
I ask for a court order preventing the party from moving with the children without my written permission or a court order.

8. ☐ **No Travel Without My Permission or Court Order**
I ask for a court order preventing the party from traveling with the children outside *(check all that apply)*:
☐ this county ☐ the United States
☐ California ☐ Other *(specify)*:
without my written permission or a court order.

9. ☐ **Notify Other State of Travel Restrictions**
I ask the court to order the party to register this order in the state of _____ and provide the court with proof of the registration before the children can travel to that state for child visitation (parenting time).

10. ☐ **Turn In and Do Not Apply for Passports or Other Vital Documents**
I ask for a court order *(check all that apply)*:
☐ requiring the party to turn in all the children's passports and other documents (such as visas, birth certificates, and other documents used for travel) that are in his or her possession and control.
☐ preventing the party from applying for passports or other documents (such as visas or birth certificates) that can be used to travel with the children.

11. ☐ **Provide Itinerary and Other Travel Documents**
If the party is allowed to travel with the children, I ask the court to order the party to give me before leaving *(specify)*:
☐ the children's travel itinerary.
☐ copies of round-trip airline tickets.
☐ addresses and telephone numbers where the children can be reached at all times.
☐ an open airline ticket for me in case the children are not returned.
☐ other *(specify)*:

12. ☐ **Notify Foreign Embassy or Consulate of Passport Restrictions**
I ask the court to order the party to notify the embassy or consulate of _____ of this order and to provide the court with proof of that notification within _____ calendar days.

13. ☐ **Foreign Custody and Visitation (Parenting Time) Order**
I ask the court to order the party to get a custody and visitation (parenting time) order in a foreign country equal to the most recent United States order before the children can travel to that country for visits. I understand that foreign orders may be changed or enforced depending on the laws of that country.

14. ☐ **Other** *(specify)*:

I declare under penalty of perjury under the laws of the State of California that the information on this form is true and correct.

Date: ▶ _____
(SIGNATURE)

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

REQUEST FOR CHILD ABDUCTION PREVENTION ORDERS

—This is not a court order—

TO ☐ **Petition** ☐ **Response** ☐ **Request for Order** ☐ **Responsive Declaration to Request for Order**
☐ Other *(specify):*

1. Your name:
2. **I request orders to prevent child abduction by *(specify):*** ☐ **Petitioner** ☐ **Respondent** ☐ **Other Parent/Party**
3. **I think that he or she might take the children without my permission to *(check all that apply):***
   a. ☐ another county in California *(specify the county):*
   b. ☐ another state *(specify the state):*
   c. ☐ a foreign country *(specify the foreign country):*
      (1) ☐ He or she is a citizen of that country.
      (2) ☐ He or she has family or emotional ties to that country *(explain)*:

4. **I think that he or she might take the children without my permission because he or she *(check all that apply):***
   a. ☐ has violated—or threatened to violate—a custody or visitation (parenting time) order in the past.
   Explain:

   b. ☐ does not have strong ties to California.
   Explain any work, financial, social, or family situation that makes it easy for the party to leave California.

   c. ☐ has recently done things that make it easy for him or her to take the children away without permission. He or she has *(check all that apply):*
      ☐ quit his or her job. ☐ sold his or her home.
      ☐ closed a bank account. ☐ ended a lease.
      ☐ sold or gotten rid of assets. ☐ hidden or destroyed documents.
      ☐ applied for a passport, birth certificate, or school or medical records.
      ☐ Other *(specify):*

   d. ☐ has a history of *(check all that apply and explain your answers in the space provided in this section):*
      ☐ domestic violence. ☐ child abuse. ☐ not cooperating with me in parenting.
      ☐ taking the children without my permission.
      Explain your answers to item d.

   e. ☐ has a criminal record. *Explain:*

Form Adopted for Mandatory Use
Judicial Council of California
FL-312 [Rev. July 1, 2016]

Family Code, § 3048
www.courts.ca.gov

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

I REQUEST THE FOLLOWING ORDERS AGAINST *(specify)*: ☐ **Petitioner** ☐ **Respondent** ☐ **Other Parent/Party**

5. ☐ **Supervised Visitation (Parenting Time)**
I ask the court to order supervised visitation (parenting time). I understand that the person I request to supervise the visits must meet the qualifications listed in *Declaration of Supervised Visitation Provider* (form FL-324)
The specific terms are attached *(check one)*: ☐ form FL-311 ☐ as follows:

6. ☐ **Post a Bond**
I ask the court to order the posting of a bond for $ _____ . If the party takes the children without my permission, I can use this money to bring the children back.

7. ☐ **Do Not Move Without My Permission or Court Order**
I ask for a court order preventing the party from moving with the children without my written permission or a court order.

8. ☐ **No Travel Without My Permission or Court Order**
I ask for a court order preventing the party from traveling with the children outside *(check all that apply)*:
☐ this county ☐ the United States
☐ California ☐ Other *(specify)*:
without my written permission or a court order.

9. ☐ **Notify Other State of Travel Restrictions**
I ask the court to order the party to register this order in the state of _____ and provide the court with proof of the registration before the children can travel to that state for child visitation (parenting time).

10. ☐ **Turn In and Do Not Apply for Passports or Other Vital Documents**
I ask for a court order *(check all that apply)*:
☐ requiring the party to turn in all the children's passports and other documents (such as visas, birth certificates, and other documents used for travel) that are in his or her possession and control.
☐ preventing the party from applying for passports or other documents (such as visas or birth certificates) that can be used to travel with the children.

11. ☐ **Provide Itinerary and Other Travel Documents**
If the party is allowed to travel with the children, I ask the court to order the party to give me before leaving *(specify)*:
☐ the children's travel itinerary.
☐ copies of round-trip airline tickets.
☐ addresses and telephone numbers where the children can be reached at all times.
☐ an open airline ticket for me in case the children are not returned.
☐ other *(specify)*:

12. ☐ **Notify Foreign Embassy or Consulate of Passport Restrictions**
I ask the court to order the party to notify the embassy or consulate of _____ of this order and to provide the court with proof of that notification within _____ calendar days.

13. ☐ **Foreign Custody and Visitation (Parenting Time) Order**
I ask the court to order the party to get a custody and visitation (parenting time) order in a foreign country equal to the most recent United States order before the children can travel to that country for visits. I understand that foreign orders may be changed or enforced depending on the laws of that country.

14. ☐ **Other** *(specify)*:

I declare under penalty of perjury under the laws of the State of California that the information on this form is true and correct.

Date: ▶ _____
(SIGNATURE)

NOTICE OF RIGHTS AND RESPONSIBILITIES

Health-Care Costs and Reimbursement Procedures

IF YOU HAVE A CHILD SUPPORT ORDER THAT INCLUDES A PROVISION FOR THE REIMBURSEMENT OF A PORTION OF THE CHILD'S OR CHILDREN'S HEALTH-CARE COSTS AND THOSE COSTS ARE NOT PAID BY INSURANCE, THE LAW SAYS:

1. Notice. You must give the other parent an itemized statement of the charges that have been billed for any health-care costs not paid by insurance. You must give this statement to the other parent within a reasonable time, but no more than 30 days after those costs were given to you.

2. Proof of full payment. If you have already paid all of the uninsured costs, you must (1) give the other parent proof that you paid them and (2) ask for reimbursement for the other parent's court-ordered share of those costs.

3. Proof of partial payment. If you have paid only your share of the uninsured costs, you must (1) give the other parent proof that you paid your share, (2) ask that the other parent pay his or her share of the costs directly to the health-care provider, and (3) give the other parent the information necessary for that parent to be able to pay the bill.

4. Payment by notified parent. If you receive notice from a parent that an uninsured health-care cost has been incurred, you must pay your share of that cost within the time the court orders; or if the court has not specified a period of time, you must make payment (1) within 30 days from the time you were given notice of the amount due, (2) according to any payment schedule set by the health-care provider, (3) according to a schedule agreed to in writing by you and the other parent, or (4) according to a schedule adopted by the court.

5. Disputed charges. If you dispute a charge, you may file a motion in court to resolve the dispute, but only if you pay that charge before filing your motion.

If you claim that the other party has failed to reimburse you for a payment, or the other party has failed to make a payment to the provider after proper notice has been given, you may file a motion in court to resolve the dispute. The court will presume that if uninsured costs have been paid, those costs were reasonable. The court may award attorney fees and costs against a party who has been unreasonable.

6. Court-ordered insurance coverage. If a parent provides health-care insurance as ordered by the court, that insurance must be used at all times to the extent that it is available for health-care costs.

a. **Burden to prove.** The party claiming that the coverage is inadequate to meet the child's needs has the burden of proving that to the court.

b. **Cost of additional coverage.** If a parent purchases health-care insurance in addition to that ordered by the court, that parent must pay all the costs of the additional coverage. In addition, if a parent uses alternative coverage that costs more than the coverage provided by court order, that parent must pay the difference.

7. Preferred health providers. If the court-ordered coverage designates a preferred health-care provider, that provider must be used at all times consistent with the terms of the health insurance policy. When any party uses a health-care provider other than the preferred provider, any health-care costs that would have been paid by the preferred health provider if that provider had been used must be the sole responsibility of the party incurring those costs.

Form Approved for Optional Use
Judicial Council of California
FL-192 [Rev. January 1, 2006]

Family Code, §§ 4062, 4063
www.courtinfo.ca.gov
American LegalNet, Inc.
www.USCourtForms.com

INFORMATION SHEET ON CHANGING A CHILD SUPPORT ORDER

General Information
The court has just made a child support order in your case. This order will remain the same unless a party to the action requests that the support be changed (modified). An order for child support can be modified only by filing a motion to change child support and serving each party involved in your case. If both parents and the local child support agency (if it is involved) agree on a new child support amount, you can complete, have all parties sign, and file with the court a *Stipulation to Establish or Modify Child Support and Order* (form FL-350) or *Stipulation and Order (Governmental)* (form FL-625).

When a Child Support Order May Be Modified
The court takes several things into account when ordering the payment of child support. First, the number of children is considered. Next, the net incomes of both parents are determined, along with the percentage of time each parent has physical custody of the children. The court considers both parties' tax filing status and may consider hardships, such as a child of another relationship. An existing order for child support may be modified when the net income of one of the parents changes significantly, the parenting schedule changes significantly, or a new child is born.

Examples
- You have been ordered to pay $500 per month in child support. You lose your job. You will continue to owe $500 per month, plus 10 percent interest on any unpaid support, unless you file a motion to modify your child support to a lower amount and the court orders a reduction.
- You are currently receiving $300 per month in child support from the other parent, whose net income has just increased substantially. You will continue to receive $300 per month unless you file a motion to modify your child support to a higher amount and the court orders an increase.
- You are paying child support based upon having physical custody of your children 30 percent of the time. After several months it turns out that you actually have physical custody of the children 50 percent of the time. You may file a motion to modify child support to a lower amount.

How to Change a Child Support Order
To change a child support order, you must file papers with the court. *Remember:* You must follow the order you have now.

What forms do I need?
If you are asking to change a child support order open with the local child support agency, you must fill out one of these forms:
- FL-680, *Notice of Motion (Governmental)* **or** FL-683 *Order to Show Cause (Governmental)* **and**
- FL-684, *Request for Order and Supporting Declaration (Governmental)*

If you are asking to change a child support order that is **not** open with the local child support agency, you must fill out one of these forms:
- FL-301, *Notice of Motion* **or** FL-300, *Order to Show Cause* **and**
- FL-310, *Application for Order and Supporting Declaration* **or**
- FL-390, *Notice of Motion and Motion for Simplified Modification of Order for Child, Spousal, or Family Support*

You must also fill out one of these forms:
- FL-150, *Income and Expense Declaration* **or** FL-155, *Financial Statement (Simplified)*

What if I am not sure which forms to fill out?
Talk to the family law facilitator at your court.

After you fill out the forms, file them with the court clerk and ask for a hearing date. Write the hearing date on the form. The clerk will ask you to pay a filing fee. If you cannot afford the fee, fill out these forms, too:
- Form 982(a)(17), *Application for Waiver of Court Fees and Costs*
- Form 982(a)(18), *Order on Application for Waiver of Court Fees and Costs*

You must serve the other parent. If the local child support agency is involved, serve it too. This means someone 18 or over—**not you**—must serve the other parent copies of your filed court forms at least **16 court days** before the hearing. Add **5 calendar days** if you serve by mail within California (see Code of Civil Procedure section 1005 for other situations): **Court days** are weekdays when the court is open for business (Monday through Friday except court holidays). **Calendar days** include all days of the month, including weekends and holidays. To determine court and calendar days, go to *www.courtinfo.ca.gov/selfhelp/courtcalendars/*.

The server must also serve blank copies of these forms:
- FL-320, *Responsive Declaration to Order to Show Cause or Notice of Motion* **and** FL-150, *Income and Expense Declaration*, **or**
- FL-155, *Financial Statement (Simplified)*

Then the server fills out and signs a *Proof of Service* (form FL-330 or FL-335). Take this form to the clerk and file it.

Go to your hearing and ask the judge to change the support. Bring your tax returns from the last two years and your last two months' pay stubs. The judge will look at your information, listen to both parents, and make an order. After the hearing, fill out:
- FL-340, *Findings and Order After Hearing* **and**
- FL-342, *Child Support Information and Order Attachment*

Need help?
Contact the family law facilitator in your county or call your county's bar association and ask for an experienced family lawyer.

INFORMATION SHEET FOR CHILD SUPPORT CASE REGISTRY FORM

(Do NOT deliver this Information Sheet to the court clerk.)

Please follow these instructions to complete the *Child Support Case Registry Form* (form FL-191) if you do not have an attorney to represent you. Your attorney, if you have one, should complete this form.

Both parents must complete a *Child Support Case Registry Form.* The information on this form will be included in a national database that, among other things, is used to locate absent parents. When you file a court order, you must deliver a completed form to the court clerk along with your court order. If you did not file a court order, you must deliver a completed form to the court clerk **WITHIN 10 DAYS** of the date you received a copy of your court order. If any of the information you provide on this form changes, you must complete a new form and deliver it to the court clerk within 10 days of the change. The address of the court clerk is the same as the one shown for the superior court on your order. This form is confidential and will not be filed in the court file. It will be maintained in a confidential file with the State of California.

INSTRUCTIONS FOR COMPLETING THE *CHILD SUPPORT CASE REGISTRY FORM* (TYPE OR PRINT IN INK):

If the top section of the form has already been filled out, skip down to number 1 below. If the top section of the form is blank, you must provide this information.

Page 1, first box, top of form, left side: Print your name, address, telephone number, fax number, and e-mail address, if any, in this box. Attorneys must include their State Bar identification numbers.

Page 1, second box, top of form, left side: Print the name of the county and the court's address in this box. Use the same address for the court that is on the court order you are filing or have received.

Page 1, third box, top of form, left side: Print the names of the petitioner/plaintiff, respondent/defendant, and other parent in this box. Use the same names listed on the court order you are filing or have received.

Page 1, fourth box, top of form, left side: Check the box indicating whether you are the mother or the father. If you are the attorney for the mother, check the box for mother. If you are the attorney for the father, check the box for father. Also, if this is the first time you have filled out this form, check the box by "First form completed." If you have filled out form FL-191 before, and you are changing any of the information, check the box by "Change to previous information."

Page 1, first box, right side: Leave this box blank for the court's use in stamping the date of receipt.

Page 1, second box, right side: Print the court case number in this box. This number is also shown on the court papers.

Instructions for numbered paragraphs:

1. a. Enter the date the court order was filed. This date is shown in the "COURT PERSONNEL: STAMP DATE RECEIVED HERE" box on page 1 at the top of the order on the right side. If the order has not been filed, leave this item blank for the court clerk to fill in.

   b. If the court order you filed or received is the first child or family support order for this case, check the box by "Initial child support or family support order." If this is a change to your order, check the box by "Modification."

   c. Information regarding the amount and type of support ordered and wage withholding is on the court order you are filing or have received.

      (1) If your order provides for any type of current support, check all boxes that describe that support. For example, if your order provides for both child and spousal support, check both of those boxes. If there is an amount, put it in the blank provided. If the order says the amount is reserved, check the "Reserved order" box. If the order says the amount is zero, check the "$0 (zero) order" box. Do not include child care, special needs, uninsured medical expenses, or travel for visitation here These amounts will go in (2). Do NOT complete the Child Support Case Registry form if you receive spousal support only.

      (2) If your order provides for a set monthly amount to be paid as additional support for such needs as child care, special needs, uninsured medical expenses or travel for visitation check the box in Item 2 and enter the monthly amount. For example, if your order provides for base child support and in addition the paying parent is required to pay $300 per month, check the box in item 2 underneath the "Child Support" column and enter $300. Do NOT check this box if your order provides only for a payment of a percentage, such as 50% of the childcare.

(3) If your order determined the amount of past due support, check the box in Item 3 that states the type of past due support and enter the amount. For example, if the court determined that there was $5000 in past due child support and $1000 in past due spousal support, you would check the box in item 3 in the "Child Support" column and enter $5000 and you would also check the box in item 3 in the "Spousal Support" column and enter $1000.

(4) If your order provides for a specific dollar amount to be paid towards any past due support, check the box in Item 4 that states the type of past due support and enter the amount. For example, the court ordered $350 per month to be paid on the past due child support, you would check the box in Item 4 in the "Child Support" column and enter $350.

(5) Check the "ordered" box if wage withholding was ordered with no conditions. Check the box "ordered but stayed until" if wage withholding was ordered but is not to be deducted until a later date. If the court delayed the effective date of the wage withholding, enter the specific date. Check only one box in this item.

2. a. Write the name of the person who is supposed to pay child or family support.
   b. Write the relationship of that person to the child.

3. a. Write the name of the person or agency supposed to receive child or family support payments.
   b. Write the relationship of that person to the child.

4. List the full name, date of birth, and social security number for each child included in the support order. If there are more than five children included in the support order, check the box below item 4e and list the remaining children with dates of birth and social security numbers on another sheet of paper. Attach the other sheet to this form.

The local child support agency is required, under section 466(a)(13) of the Social Security Act, to place in the records pertaining to child support the social security number of any individual who is subject to a divorce decree, support order, or paternity determination or acknowledgment. This information is mandatory and will be kept on file at the local child support agency.

Top of page 2, box on left side: Print the names of the petitioner/plaintiff, respondent/defendant, and other parent in this box. Use the same names listed on page 1.

Top of page 2, box on right side: Print your court case number in this box. Use the same case number as on page 1, second box, right side.

You are required to complete information about yourself. If you know information about the other person, you may also fill in what you know about him or her.

5. If you are the father in this case, list your full name in this space. See instructions for a–g under item 6 below.

6. If you are the mother in this case, list your full name in this space.

   a. List your date of birth.
   b. Write your social security number.
   c. List the street address, city, state, and zip code where you live.
   d. List the street address, city, state, and zip code where you want your mail sent, if different from the address where you live.
   e. Write your driver's license number and the state where it was issued.
   f. List the telephone number where you live.
   g. Indicate whether you are employed, not employed, self-employed, or by checking the appropriate box. If you are employed, write the name, street address, city, state, zip code, and telephone number where you work.

7. If there is a restraining order, protective order, or nondisclosure order, check this box.

   a. Check the box beside each person who is protected by the restraining order.
   b. Check the box beside the parent who is restrained.
   c. Write the date the restraining order expires. See the restraining order, protective order, or nondisclosure order for this date.

If you are in fear of domestic violence, you may want to ask the court for a restraining order, protective order, or nondisclosure order.

You must type or print your name, fill in the date, and sign the *Child Support Case Registry Form* under penalty of perjury. When you sign under penalty of perjury, you are stating that the information you have provided is true and correct.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address)	COURT PERSONNEL: STAMP DATE RECEIVED HERE
TELEPHONE NO.: FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):	DO NOT FILE
SUPERIOR COURT OF CALIFORNIA, COUNTY OF TRINITY STREET ADDRESS: 11 Court Street MAILING ADDRESS: PO Box 1258 CITY AND ZIP CODE: Weaverville, CA 96093 BRANCH NAME:	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	
CHILD SUPPORT CASE REGISTRY FORM ☐ Mother ☐ First form completed ☐ Father ☐ Change to previous information	CASE NUMBER:

THIS FORM WILL NOT BE PLACED IN THE COURT FILE. IT WILL BE MAINTAINED IN A CONFIDENTIAL FILE WITH THE STATE OF CALIFORNIA.

Notice: Pages 1 and 2 of this form must be completed and delivered to the court along with the court order for support. Pages 3 and 4 are instructional only and do not need to be delivered to the court. If you did not file the court order, you must complete this form and deliver it to the court within 10 days of the date on which you received a copy of the support order. Any later change to the information on this form must be delivered to the court on another form within 10 days of the change. It is important that you keep the court informed in writing of any changes of your address and telephone number.

1. Support order information *(this information is on the court order you are filing or have received)*.
   a. Date order filed:
   b. ☐ Initial child support or family support order ☐ Modification
   c. Total monthly base current child or family support amount ordered for children listed below, plus any monthly amount ordered payable on past-due support:

	Child Support:	Family Support:	Spousal Support:
(1)	☐ Current base child support: $ ☐ Reserved order ☐ $0 (zero) order	☐ Current base family support: $ ☐ Reserved order ☐ $0 (zero) order	☐ Current spousal support: $ ☐ Reserved order ☐ $0 (zero) order
(2)	☐ Additional monthly support: $	☐ Additional monthly support: $	
(3)	☐ Total past-due support: $	☐ Total past-due support: $	☐ Total past-due support: $
(4)	☐ Payment on past-due support: $	☐ Payment on past-due support: $	☐ Payment on past-due support: $

   (5) Wage withholding was ☐ ordered ☐ ordered but stayed until *(date)*:

2. Person required to pay child or family support *(name)*:
   Relationship to child *(specify)*:
3. Person or agency to receive child or family support payments *(name)*:
   Relationship to child *(if applicable)*:

TYPE OR PRINT IN INK

Form Adopted for Mandatory Use
Judicial Council of California
FL-191 [Rev. July 1, 2005]

Family Code, § 4014
www.courtinfo.ca.gov

PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	
OTHER PARENT:	

4. The child support order is for the following children:

Child's name	Date of birth	Social security number
a.		
b.		
c.		

☐ Additional children are listed on a page attached to this document.

You are required to complete the following information about yourself. You are not required to provide information about the other person, but you are encouraged to provide as much as you can. This form is confidential and will not be filed in the court file. It will be maintained in a confidential file with the State of California.

5. Father's name:
   a. Date of birth:
   b. Social security number:
   c. Street address:

   City, state, zip code:

   d. Mailing address:

   City, state, zip code:

   e. Driver's license number:

   State:

   f. Telephone number:

   g. ☐ Employed ☐ Not employed ☐ Self-employed

   Employer's name:

   Street address:

   City, state, zip code:

   Telephone number:

6. Mother's name:
   a. Date of birth:
   b. Social security number:
   c. Street address:

   City, state, zip code:

   d. Mailing address:

   City, state, zip code:

   e. Driver's license number:

   State:

   f. Telephone number:

   g. ☐ Employed ☐ Not employed ☐ Self-employed

   Employer's name:

   Street address:

   City, state, zip code:

   Telephone number:

7. ☐ A restraining order, protective order, or nondisclosure order due to domestic violence is in effect.
   a. The order protects: ☐ Father ☐ Mother ☐ Children
   b. From: ☐ Father ☐ Mother
   c. The restraining order expires on *(date)*:

I 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 PERSON COMPLETING THIS FORM)

INFORMATION SHEET FOR CHILD SUPPORT CASE REGISTRY FORM

(Do NOT deliver this Information Sheet to the court clerk.)

Please follow these instructions to complete the *Child Support Case Registry Form* (form FL-191) if you do not have an attorney to represent you. Your attorney, if you have one, should complete this form.

Both parents must complete a *Child Support Case Registry Form.* The information on this form will be included in a national database that, among other things, is used to locate absent parents. When you file a court order, you must deliver a completed form to the court clerk along with your court order. If you did not file a court order, you must deliver a completed form to the court clerk **WITHIN 10 DAYS** of the date you received a copy of your court order. If any of the information you provide on this form changes, you must complete a new form and deliver it to the court clerk within 10 days of the change. The address of the court clerk is the same as the one shown for the superior court on your order. This form is confidential and will not be filed in the court file. It will be maintained in a confidential file with the State of California.

INSTRUCTIONS FOR COMPLETING THE *CHILD SUPPORT CASE REGISTRY FORM* (TYPE OR PRINT IN INK):

If the top section of the form has already been filled out, skip down to number 1 below. If the top section of the form is blank, you must provide this information.

Page 1, first box, top of form, left side: Print your name, address, telephone number, fax number, and e-mail address, if any, in this box. Attorneys must include their State Bar identification numbers.

Page 1, second box, top of form, left side: Print the name of the county and the court's address in this box. Use the same address for the court that is on the court order you are filing or have received.

Page 1, third box, top of form, left side: Print the names of the petitioner/plaintiff, respondent/defendant, and other parent in this box. Use the same names listed on the court order you are filing or have received.

Page 1, fourth box, top of form, left side: Check the box indicating whether you are the mother or the father. If you are the attorney for the mother, check the box for mother. If you are the attorney for the father, check the box for father. Also, if this is the first time you have filled out this form, check the box by "First form completed." If you have filled out form FL-191 before, and you are changing any of the information, check the box by "Change to previous information."

Page 1, first box, right side: Leave this box blank for the court's use in stamping the date of receipt.

Page 1, second box, right side: Print the court case number in this box. This number is also shown on the court papers.

Instructions for numbered paragraphs:

1. a. Enter the date the court order was filed. This date is shown in the "COURT PERSONNEL: STAMP DATE RECEIVED HERE" box on page 1 at the top of the order on the right side. If the order has not been filed, leave this item blank for the court clerk to fill in.

   b. If the court order you filed or received is the first child or family support order for this case, check the box by "Initial child support or family support order." If this is a change to your order, check the box by "Modification."

   c. Information regarding the amount and type of support ordered and wage withholding is on the court order you are filing or have received.

      (1) If your order provides for any type of current support, check all boxes that describe that support. For example, if your order provides for both child and spousal support, check both of those boxes. If there is an amount, put it in the blank provided. If the order says the amount is reserved, check the "Reserved order" box. If the order says the amount is zero, check the "$0 (zero) order" box. Do not include child care, special needs, uninsured medical expenses, or travel for visitation here These amounts will go in (2). Do NOT complete the Child Support Case Registry form if you receive spousal support only.

      (2) If your order provides for a set monthly amount to be paid as additional support for such needs as child care, special needs, uninsured medical expenses or travel for visitation check the box in Item 2 and enter the monthly amount. For example, if your order provides for base child support and in addition the paying parent is required to pay $300 per month, check the box in item 2 underneath the "Child Support" column and enter $300. Do NOT check this box if your order provides only for a payment of a percentage, such as 50% of the childcare.

(3) If your order determined the amount of past due support, check the box in Item 3 that states the type of past due support and enter the amount. For example, if the court determined that there was $5000 in past due child support and $1000 in past due spousal support, you would check the box in item 3 in the "Child Support" column and enter $5000 and you would also check the box in item 3 in the "Spousal Support" column and enter $1000.

(4) If your order provides for a specific dollar amount to be paid towards any past due support, check the box in Item 4 that states the type of past due support and enter the amount. For example, the court ordered $350 per month to be paid on the past due child support, you would check the box in Item 4 in the "Child Support" column and enter $350.

(5) Check the "ordered" box if wage withholding was ordered with no conditions. Check the box "ordered but stayed until" if wage withholding was ordered but is not to be deducted until a later date. If the court delayed the effective date of the wage withholding, enter the specific date. Check only one box in this item.

2. a. Write the name of the person who is supposed to pay child or family support.
   b. Write the relationship of that person to the child.

3. a. Write the name of the person or agency supposed to receive child or family support payments.
   b. Write the relationship of that person to the child.

4. List the full name, date of birth, and social security number for each child included in the support order. If there are more than five children included in the support order, check the box below item 4e and list the remaining children with dates of birth and social security numbers on another sheet of paper. Attach the other sheet to this form.

The local child support agency is required, under section 466(a)(13) of the Social Security Act, to place in the records pertaining to child support the social security number of any individual who is subject to a divorce decree, support order, or paternity determination or acknowledgment. This information is mandatory and will be kept on file at the local child support agency.

Top of page 2, box on left side: Print the names of the petitioner/plaintiff, respondent/defendant, and other parent in this box. Use the same names listed on page 1.

Top of page 2, box on right side: Print your court case number in this box. Use the same case number as on page 1, second box, right side.

You are required to complete information about yourself. If you know information about the other person, you may also fill in what you know about him or her.

5. If you are the father in this case, list your full name in this space. See instructions for a–g under item 6 below.

6. If you are the mother in this case, list your full name in this space.

   a. List your date of birth.

   b. Write your social security number.

   c. List the street address, city, state, and zip code where you live.

   d. List the street address, city, state, and zip code where you want your mail sent, if different from the address where you live.

   e. Write your driver's license number and the state where it was issued.

   f. List the telephone number where you live.

   g. Indicate whether you are employed, not employed, self-employed, or by checking the appropriate box. If you are employed, write the name, street address, city, state, zip code, and telephone number where you work.

7. If there is a restraining order, protective order, or nondisclosure order, check this box.

   a. Check the box beside each person who is protected by the restraining order.

   b. Check the box beside the parent who is restrained.

   c. Write the date the restraining order expires. See the restraining order, protective order, or nondisclosure order for this date.

If you are in fear of domestic violence, you may want to ask the court for a restraining order, protective order, or nondisclosure order.

You must type or print your name, fill in the date, and sign the *Child Support Case Registry Form* under penalty of perjury. When you sign under penalty of perjury, you are stating that the information you have provided is true and correct.

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, state bar number, and address)*:	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO.: ATTORNEY FOR *(Name)*:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF TRINITY STREET ADDRESS: 11 Court Street MAILING ADDRESS: PO Box 1258 CITY AND ZIP CODE: Weaverville, CA 96093 BRANCH NAME:	
PETITIONER: RESPONDENT:	
DECLARATION FOR DEFAULT OR UNCONTESTED JUDGMENT	CASE NUMBER:

1. I declare that if I appeared in court and were sworn, I would testify to the truth of the facts in this declaration.
2. I request that proof will be by this declaration and that I will not appear before the court unless I am ordered by the court to appear.
3. All the information in the ☐ *Petition* or *Complaint to Establish Parental Relationship* ☐ *Response* or *Answer* ☐ *Petition to Establish Custody and Support* ☐ *Response* is true and correct.
4. ☐ Respondent and/or ☐ Petitioner is/are the parent(s) of the minor child(ren).
5. A Voluntary Declaration of Paternity form ☐ has ☐ has not been signed regarding this child *(attach a copy if available)*.
6. DEFAULT OR UNCONTESTED *(Check a or b)*
   a. ☐ The default of the respondent was entered or is being requested, and I am not seeking any relief not requested in the petition. **OR**
   b. ☐ The parties have stipulated that the matter may proceed as an uncontested matter without notice, and the stipulation is attached.
7. ☐ CHILD SUPPORT should be ordered as set forth in the proposed *Judgment* (form FL-250).
   a. ☐ Petitioner ☐ Respondent is presently receiving public assistance (TANF); thus all support should be made payable to the local child support agency at (*specify address):*
   b. **NOTE: If a support order is requested, submit a completed *Income and Expense Declaration* (form FL-150), or *Financial Statement (Simplified)* (form FL-155), unless a current form is on file. Include your best estimate of the other party's gross monthly income.**
8. ☐ ATTORNEY FEES should be ordered as set forth in the proposed *Judgment* (form FL-250).
9. ☐ CHILD CUSTODY should be ordered as set forth in the proposed *Judgment* (form FL-250).
10. ☐ CHILD VISITATION should be ordered as set forth in the proposed *Judgment* (form FL-250).
11. ☐ REASONABLE EXPENSES OF PREGNANCY AND BIRTH should be ordered as set forth in the proposed *Judgment* (form FL-250).
12. ☐ NAMES OF THE CHILDREN should be changed as set forth in the proposed *Judgment* (form FL-250).
13. This declaration may be reviewed by a commissioner sitting as a temporary judge who may determine whether to grant this request or require my appearance.
14. I have read and understand the *Advisement and Waiver of Rights Re: Establishment of Parental Relationship* (form FL-235), which is signed and attached to this declaration.
15. ☐ Other *(specify):*

I 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)

Form Adopted for Mandatory Use
Judicial Council of California
FL-230 [Rev. January 1, 2003]

DECLARATION FOR DEFAULT OR UNCONTESTED JUDGMENT
(Uniform Parentage, Custody and Support)

Family Code, §§ 7600, 3120, 3900 et seq
www.courtinfo.ca.gov.

FL-165

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 TRINITY STREET ADDRESS: 11 Court Street MAILING ADDRESS: PO Box 1258 CITY AND ZIP CODE: Weaverville, CA 96093 BRANCH NAME:	
PETITIONER: RESPONDENT:	
REQUEST TO ENTER DEFAULT	CASE NUMBER:

1. **To the clerk:** Please enter the default of the respondent who has failed to respond to the petition.
2. A completed *Income and Expense Declaration* (form FL-150) or *Financial Statement (Simplified)* (form FL-155)
   ☐ is attached ☐ is not attached.
   A completed *Property Declaration* (form FL-160) ☐ is attached ☐ is not attached
   because *(check at least one of the following):*
   (a) ☐ there have been no changes since the previous filing.
   (b) ☐ the issues subject to disposition by the court in this proceeding are the subject of a written agreement.
   (c) ☐ there are no issues of child, spousal, or partner support or attorney fees and costs subject to determination by the court.
   (d) ☐ the petition does not request money, property, costs, or attorney fees. (Fam. Code, § 2330.5.)
   (e) ☐ there are no issues of division of community property.
   (f) ☐ this is an action to establish parental relationship.

Date:

(TYPE OR PRINT NAME) ▶ (SIGNATURE OF [ATTORNEY FOR] PETITIONER)

3. **Declaration**
   a. ☐ No mailing is required because service was by publication or posting and the address of the respondent remains unknown.
   b. ☐ A copy of this *Request to Enter Default*, including any attachments and an envelope with sufficient postage, was provided to the court clerk, with the envelope addressed as follows *(address of the respondent's attorney or, if none, the respondent's last known address):*

I 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)

FOR COURT USE ONLY

☐ *Request to Enter Default* mailed to the respondent or the respondent's attorney on *(date):*
☐ Default entered as requested on *(date):*
☐ Default **not** entered. Reason:

Clerk, by _____, Deputy

Form Adopted for Mandatory Use
Judicial Council of California
FL-165 [Rev. January 1, 2005]

REQUEST TO ENTER DEFAULT
(Family Law—Uniform Parentage)

Code of Civil Procedure, §§ 585, 587;
Family Code, § 2335.5
www.courtinfo.ca.gov

CASE NAME *(Last name, first name of each party)*.	CASE NUMBER

4. **Memorandum of costs**
   a. ☐ Costs and disbursements are waived.
   b. Costs and disbursements are listed as follows:
      (1) ☐ Clerk's fees ..... $.....
      (2) ☐ Process server's fees ..... $.....
      (3) ☐ Other *(specify)*: ..... $.....
      ..... $.....
      ..... $.....
      ..... $ _____
      TOTAL ..... $.....
   c. I am the attorney, agent, or party who claims these costs. To the best of my knowledge and belief, the foregoing items of cost are correct and have been necessarily incurred in this cause or proceeding.

I 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)

5. **Declaration of nonmilitary status.** The respondent is not in the military service of the United States as defined in section 511 et seq. of the Servicemembers Civil Relief Act (50 U.S.C. Appen. § 501 et seq.), and is not entitled to the benefits of such act.

I 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)

FL-240

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF TRINITY STREET ADDRESS: 11 Court Street MAILING ADDRESS: PO Box 1258 CITY AND ZIP CODE: Weaverville, CA 96093 BRANCH NAME:	
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	
STIPULATION FOR ENTRY OF JUDGMENT RE: ESTABLISHMENT OF PARENTAL RELATIONSHIP	CASE NUMBER:

THE PARTIES STIPULATE THAT

1. ☐ The parties have read and understand the *Advisement and Waiver of Rights Re: Establishment of Parental Relationship* (form FL-235), which is submitted with this *Stipulation for Entry of Judgment*. The parties give up those rights and freely agree that a judgment may be entered in accordance with this stipulation.
2. Name: ☐ Mother ☐ Father
   Name: ☐ Mother ☐ Father
   are the parents of the following children:

Name	Date of Birth

3. ☐ Child custody and visitation shall be ordered as set forth in the proposed *Judgment (Uniform Parentage)* (form FL-250).
4. ☐ Child support shall be ordered as set forth in the proposed *Judgment (Uniform Parentage)* (form FL-250).
5. ☐ Attorney fees shall be ordered as set forth in the proposed *Judgment (Uniform Parentage)* (form FL-250).
6. ☐ Names of the children shall be changed as set forth in the proposed *Judgment (Uniform Parentage)* (form FL-250).
7. ☐ Reasonable costs of pregnancy and birth shall be paid as ordered in the proposed *Judgment (Uniform Parentage)* (form FL-250).
8. ☐ Other orders shall be as set forth in the proposed *Judgment (Uniform Parentage)* (form FL-250).
9. ☐ The parties further agree that the court make the following orders:

☐ See attachment 9.

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF PETITIONER)

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF RESPONDENT)

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF ATTORNEY FOR PETITIONER)

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF ATTORNEY FOR RESPONDENT)

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF OTHER PARTY OR ATTORNEY)

Form Adopted for Mandatory Use
Judicial Council of California
FL-240 [Rev. January 1, 2015]

STIPULATION FOR ENTRY OF JUDGMENT RE: ESTABLISHMENT OF PARENTAL RELATIONSHIP
(Parentage)

Family Code, § 7600 et seq.
www.courts.ca.gov

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/PARTY:	CASE NUMBER:

SUPERVISED VISITATION ORDER

Attachment to *Child Custody and Visitation (Parenting Time) Order Attachment* (form FL-341)

1. Evidence has been presented in support of a request that the contact of ☐ Petitioner ☐ Respondent ☐ Other Parent/Party with the child(ren) be supervised based upon allegations of
   ☐ abduction of child(ren) ☐ physical abuse ☐ drug abuse ☐ neglect
   ☐ sexual abuse ☐ domestic violence ☐ alcohol abuse ☐ other *(specify)*:
   ☐ Petitioner ☐ Respondent ☐ Other Parent/Party disputes these allegations and the court reserves the findings on these issues pending further investigation and hearing or trial.

2. The court finds, under Family Code section 3100, that the best interest of the child(ren) requires that visitation by
   ☐ Petitioner ☐ Respondent ☐ Other Parent/Party must, until further order of the court, be limited to contact supervised by the person(s) set forth in item 6 below pending further investigation and hearing or trial.

THE COURT MAKES THE FOLLOWING ORDERS

3. **CHILD(REN) TO BE SUPERVISED**

Child's Name	Birth Date	Age	Sex

4. **TYPE**
   a. ☐ Supervised visitation b. ☐ Supervised exchange only

5. **SUPERVISED VISITATION PROVIDER**
   a. ☐ Professional (individual provider or supervised visitation center) b. ☐ Nonprofessional

6. **AUTHORIZED PROVIDER**

Name	Address	Telephone

   ☐ Any other mutually agreed-upon third party as arranged.

7. **DURATION AND FREQUENCY OF VISITS** *(see form FL-341 for specifics of visitation):*

8. **PAYMENT RESPONSIBILITY** Petitioner: % Respondent: % Other Parent/Party: %

9. ☐ Petitioner will contact professional provider or supervised visitation center no later than *(date):*
   ☐ Respondent will contact professional provider or supervised visitation center no later than *(date):*
   ☐ Other Parent/party will contact professional provider or supervised visitation center no later than *(date):*

10. **THE COURT FURTHER ORDERS**

Date:

JUDICIAL OFFICER

Form Adopted for Mandatory Use
Judicial Council of California
FL-341(A) [Rev. January 1, 2015]

Family Code, §§ 3100, 3031
www.courts.ca.gov

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address)*:	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO.: ATTORNEY FOR *(Name)*:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF TRINITY STREET ADDRESS: 11 Court Street MAILING ADDRESS: PO Box 1258 CITY AND ZIP CODE: Weaverville, CA 96093 BRANCH NAME:	
PETITIONER: RESPONDENT:	
JUDGMENT	CASE NUMBER:

1. ☐ This judgment ☐ contains personal conduct restraining orders ☐ modifies existing restraining orders.
   The restraining orders are contained in item(s): of the attachment.
   They expire on *(date)*: A CLETS form must be attached.
2. a. This matter proceeded as follows: ☐ Default or uncontested ☐ By declaration ☐ Contested
   b. Date: Dept.: Room:
   c. Judicial officer *(name)*: ☐ Temporary judge
   d. ☐ Petitioner present ☐ Attorney present *(name)*:
   e. ☐ Respondent present ☐ Attorney present *(name)*:
   f. **Petitioner** (1) ☐ The petitioner appeared without counsel and was advised of relevant rights.
   (2) ☐ The petitioner signed *Advisement and Waiver of Rights Re: Establishment of Parental Relationship* (form FL-235).
   (3) ☐ The petitioner is married to the Respondent, and no other action is pending.
   (4) ☐ The petitioner signed a Voluntary Declaration of Paternity.
   (5) ☐ There is a prior judgment of parentage in a family support, juvenile, or adoption court case.
   g. **Respondent** (1) ☐ The respondent appeared without counsel and was advised of relevant rights.
   (2) ☐ The respondent signed *Advisement and Waiver of Rights Re: Establishment of Parental Relationship* (form FL-235).
   (3) ☐ The respondent is married to the Petitioner, and no other action is pending.
   (4) ☐ The respondent signed a Voluntary Declaration of Paternity.
   (5) ☐ There is a prior judgment of parentage in a family support, juvenile or adoption court case.
   h. Other parties or attorneys present *(specify)*:

3. **THE COURT FINDS**
   Name: ☐ Mother ☐ Father
   Name: ☐ Mother ☐ Father
   are the parents of the following children:

Child's name	Date of birth

4. **THE COURT ORDERS**
   a. ☐ Child custody and visitation are as specified in one or more of the attached forms:
   (1) ☐ *Child Custody and Visitation Order Attachment* (form FL-341)
   (2) ☐ *Stipulation for Order for Child Custody and/or Visitation of Children* (form FL-355)
   (3) ☐ Other (*specify*):

Form Adopted for Mandatory Use
Judicial Council of California
FL-250 [Rev. January 1, 2004]

JUDGMENT
(Uniform Parentage—Custody and Support)

Family Code, §§ 3120, 3900, 7600 et seq.
www.courtinfo.ca.gov

PETITIONER:	CASE NUMBER:
RESPONDENT:	

5. **THE COURT FURTHER ORDERS**

a. ☐ Child support is as stated in one or more of the attached:
   (1) ☐ *Child Support Information and Order Attachment* (form FL-342)
   (2) ☐ *Stipulation to Establish or Modify Child Support and Order* (form FL-350)
   (3) ☐ Other *(specify):*

b. Both parties must complete and file with the court a *Child Support Case Registry Form* (form FL-191) within 10 days of the date of this judgment. Thereafter, the parents must notify the court of any change in the information submitted, within 10 days of the change.

c. The form *Notice of Rights and Responsibilities—Health Care Costs and Reimbursement Procedures* and *Information Sheet on Changing a Child Support Order* (form FL-192) is attached.

d. ☐ The last names of the children are changed to *(specify):*

e. ☐ The birth certificates must be amended to conform to this court order by
   (1) ☐ adding the father's name.
   (2) ☐ changing the last name of the children.

f. ☐ Attorney fees and costs are as stated in the attachment.

g. ☐ Reasonable expenses of pregnancy and birth are as stated in the attachment.

h. ☐ Other *(specify):*

☐ Continued on Attachment 3h.

6. Number of pages attached: _____

Date:

_____
JUDICIAL OFFICER

☐ SIGNATURE FOLLOWS LAST ATTACHMENT

NOTICE: Any party required to pay child support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent.

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 TRINITY STREET ADDRESS: 11 Court Street MAILING ADDRESS: PO Box 1258 CITY AND ZIP CODE: Weaverville, CA 96093 BRANCH NAME:	
PETITIONER: RESPONDENT:	
NOTICE OF ENTRY OF JUDGMENT	CASE NUMBER:

You are notified that the following judgment was entered on *(date)*:

1. ☐ Dissolution
2. ☐ Dissolution—status only
3. ☐ Dissolution—reserving jurisdiction over termination of marital status or domestic partnership
4. ☐ Legal separation
5. ☐ Nullity
6. ☐ Parent-child relationship
7. ☐ Judgment on reserved issues
8. ☐ Other *(specify)*:

Date:

Clerk, by _____, Deputy

—NOTICE TO ATTORNEY OF RECORD OR PARTY WITHOUT ATTORNEY—

Under the provisions of Code of Civil Procedure section 1952, if no appeal is filed the court may order the exhibits destroyed or otherwise disposed of after 60 days from the expiration of the appeal time.

STATEMENT IN THIS BOX APPLIES ONLY TO JUDGMENT OF DISSOLUTION

Effective date of termination of marital or domestic partnership status *(specify)*:

WARNING: Neither party may remarry or enter into a new domestic partnership until the effective date of the termination of marital or domestic partnership status, as shown in this box.

CLERK'S CERTIFICATE OF MAILING

I certify that I am not a party to this cause and that a true copy of the *Notice of Entry of Judgment* was mailed first class, postage fully prepaid, in a sealed envelope addressed as shown below, and that the notice was mailed

at *(place)*: , California, on *(date)*:

Date:

Clerk, by _____, Deputy

Name and address of petitioner or petitioner's attorney

Name and address of respondent or respondent's attorney

Form Adopted for Mandatory Use
Judicial Council of California
FL-190 [Rev. January 1, 2005]

NOTICE OF ENTRY OF JUDGMENT
(Family Law—Uniform Parentage—Custody and Support)

Family Code, §§ 2338, 7635,7637
www.courtinfo.ca.gov

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

CHILD ABDUCTION PREVENTION ORDER ATTACHMENT

TO ☐ ***Child Custody and Visitation (Parenting Time) Order Attachment*** **(form FL-341)**
☐ ***Custody Order—Juvenile—Final Judgment*** **(form JV-200)**
☐ Other ***(specify):***

1. **The court finds there is a risk that** *(specify name of party):* **will take the child without permission because that party** *(check all that apply):*
   a. ☐ has violated—or threatened to violate—a custody or visitation (parenting time) order in the past.
   b. ☐ does not have strong ties to California.
   c. ☐ has done things that make it easy for him or her to take the children away without any permission, such as *(check all that apply):*
      ☐ quit a job. ☐ sold his or her home.
      ☐ closed a bank account. ☐ ended a lease.
      ☐ sold or gotten rid of assets. ☐ hidden or destroyed documents.
      ☐ applied for a passport, birth certificate, or school or medical records.
      ☐ Other *(specify):*
   d. ☐ has a history of *(check all that apply):*
      ☐ domestic violence.
      ☐ child abuse.
      ☐ not cooperating with the other parent or party in parenting.
   e. ☐ has a criminal record.
   f. ☐ has family or emotional ties to another county, state, or foreign country.
   (NOTE: If item "f" is checked, at least one other factor must be checked, too.)

THE COURT ORDERS, to prevent the party in item 1 from taking the children without permission:

2. ☐ **Supervised visitation (parenting time)**. The terms are *(check one):*
   ☐ as specified on attached form FL-341(A) ☐ as follows:

3. ☐ **The party** in item 1 must post a bond for $. The terms of the bond are *(specify):*

4. ☐ **The party in item 1 must not move from the following locations with the children** without permission in writing from the other parent or party or a court order:
   ☐ Current residence ☐ Current school district *(specify):*
   ☐ This county ☐ Other *(specify):*

5. ☐ **The party in item 1 must not travel with the children** out of *(check all that apply):*
   ☐ this county. ☐ the United States.
   ☐ California. ☐ Other *(specify):*

6. ☐ **The party in item 1 must register this order** in the state of *(specify):* before the children can travel to that state for visits.

7. ☐ **The party in item 1 must not apply for a passport or any other vital document**, such as a visa or birth certificate, that can be used for travel.

THIS IS A COURT ORDER.

Form Adopted for Mandatory Use
Judicial Council of California
FL-341(B) [Rev. July 1, 2016]

Family Code, § 3048; 42 U.S.C. § 11601
www.courts.ca.gov

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

8. ☐ **The party in item 1 must turn in all the children's passports and other vital documents in the party's possession or control as specified below** *(List the documents that must be turned in. Include the details for turning in the documents to the court, one of the attorneys, the other party, or another person):*

9. ☐ **The party in item 1 must give the other parent or party the following *before* traveling with the children:**
   - ☐ The children's travel itinerary
   - ☐ Copies of round-trip airline tickets
   - ☐ Addresses and telephone numbers where the children can be reached at all times
   - ☐ An open airline ticket for the other parent in case the children are not returned
   - ☐ Other *(specify):*

10. ☐ **The party in item 1 must notify the embassy or consulate** of *(specify country):* about this order and provide the court with proof of that notification within *(specify number):* days.

11. ☐ **The party in item 1 must get a custody and visitation (parenting time) order** equivalent to the most recent U.S. order before the children may travel to that country for visits. The court recognizes that foreign orders may be changed or enforced according to the laws of that country.

12. ☐ **Enforcing the order.** The court authorizes any law enforcement officer to enforce this order. In this county, contact the Child Abduction Unit of the Office of the District Attorney at *(phone number and address):*

13. ☐ **Other orders** *(specify):*

14. This order is valid in other states and in any country that has signed the Hague Convention on Child Abduction.

NOTICE TO AUTHORITIES IN OTHER STATES AND COUNTRIES

This court has jurisdiction to make child custody orders under California's Uniform Child Custody Jurisdiction and Enforcement Act (Fam. Code, § 3400 et seq.) and the Hague Convention on Civil Aspects of International Child Abduction (42 U.S.C. § 11601 et seq.). If jurisdiction is based on other factors, they are listed above in item 13.

Date:

JUDICIAL OFFICER

THIS IS A COURT ORDER.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

CHILD ABDUCTION PREVENTION ORDER ATTACHMENT

TO ☐ ***Child Custody and Visitation (Parenting Time) Order Attachment*** **(form FL-341)**
☐ ***Custody Order—Juvenile—Final Judgment*** **(form JV-200)**
☐ **Other *(specify):***

1. **The court finds there is a risk that** *(specify name of party):* **will take the child without permission because that party** *(check all that apply):*
   a. ☐ has violated—or threatened to violate—a custody or visitation (parenting time) order in the past.
   b. ☐ does not have strong ties to California.
   c. ☐ has done things that make it easy for him or her to take the children away without any permission, such as *(check all that apply):*
      ☐ quit a job. ☐ sold his or her home.
      ☐ closed a bank account. ☐ ended a lease.
      ☐ sold or gotten rid of assets. ☐ hidden or destroyed documents.
      ☐ applied for a passport, birth certificate, or school or medical records.
      ☐ Other *(specify):*
   d. ☐ has a history of *(check all that apply):*
      ☐ domestic violence.
      ☐ child abuse.
      ☐ not cooperating with the other parent or party in parenting.
   e. ☐ has a criminal record.
   f. ☐ has family or emotional ties to another county, state, or foreign country.
   (NOTE: If item "f" is checked, at least one other factor must be checked, too.)

THE COURT ORDERS, to prevent the party in item 1 from taking the children without permission:

2. ☐ **Supervised visitation (parenting time).** The terms are *(check one):*
   ☐ as specified on attached form FL-341(A) ☐ as follows:

3. ☐ **The party** in item 1 must post a bond for $. The terms of the bond are *(specify):*

4. ☐ **The party in item 1 must not move from the following locations with the children** without permission in writing from the other parent or party or a court order:
   ☐ Current residence ☐ Current school district *(specify):*
   ☐ This county ☐ Other *(specify):*

5. ☐ **The party in item 1 must not travel with the children** out of *(check all that apply):*
   ☐ this county. ☐ the United States.
   ☐ California. ☐ Other *(specify):*

6. ☐ **The party in item 1 must register this order** in the state of *(specify):* before the children can travel to that state for visits.

7. ☐ **The party in item 1 must not apply for a passport or any other vital document,** such as a visa or birth certificate, that can be used for travel.

THIS IS A COURT ORDER.

Form Adopted for Mandatory Use
Judicial Council of California
FL-341(B) [Rev. July 1, 2016]

Family Code, § 3048; 42 U.S.C. § 11601
www.courts.ca.gov

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

8. ☐ **The party in item 1 must turn in all the children's passports and other vital documents in the party's possession or control as specified below** *(List the documents that must be turned in. Include the details for turning in the documents to the court, one of the attorneys, the other party, or another person):*

9. ☐ **The party in item 1 must give the other parent or party the following *before* traveling with the children:**
   - ☐ The children's travel itinerary
   - ☐ Copies of round-trip airline tickets
   - ☐ Addresses and telephone numbers where the children can be reached at all times
   - ☐ An open airline ticket for the other parent in case the children are not returned
   - ☐ Other *(specify):*

10. ☐ **The party in item 1 must notify the embassy or consulate** of *(specify country):* about this order and provide the court with proof of that notification within *(specify number):* days.

11. ☐ **The party in item 1 must get a custody and visitation (parenting time) order** equivalent to the most recent U.S. order before the children may travel to that country for visits. The court recognizes that foreign orders may be changed or enforced according to the laws of that country.

12. ☐ **Enforcing the order.** The court authorizes any law enforcement officer to enforce this order. In this county, contact the Child Abduction Unit of the Office of the District Attorney at *(phone number and address):*

13. ☐ **Other orders** *(specify):*

14. This order is valid in other states and in any country that has signed the Hague Convention on Child Abduction.

NOTICE TO AUTHORITIES IN OTHER STATES AND COUNTRIES

This court has jurisdiction to make child custody orders under California's Uniform Child Custody Jurisdiction and Enforcement Act (Fam. Code, § 3400 et seq.) and the Hague Convention on Civil Aspects of International Child Abduction (42 U.S.C. § 11601 et seq.). If jurisdiction is based on other factors, they are listed above in item 13.

Date:

JUDICIAL OFFICER

THIS IS A COURT ORDER.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

CHILD CUSTODY AND VISITATION (PARENTING TIME) APPLICATION ATTACHMENT

—This is not a court order—

TO ☐ **Petition** ☐ **Response** ☐ **Request for Order** ☐ **Responsive Declaration to Request for Order**
☐ **Other** *(specify):*

1. ☐ **Custody.** Custody of the minor children of the parties is requested as follows:

Child's Name	Date of Birth	Legal Custody to *(person who decides about health, education, etc.)*	Physical Custody to *(person with whom the child lives)*

2. ☐ **Visitation (Parenting Time).**

Note: Unless specifically ordered, a child's holiday schedule order has priority over the regular parenting time.

a. ☐ Reasonable right of parenting time (visitation) to the party without physical custody **(not appropriate in cases involving domestic violence)**.

b. ☐ See the attached _____ -page document dated *(specify date):*

c. ☐ The parties will go to child custody mediation or child custody recommending counseling at *(specify date, time, and location):*

d. ☐ No visitation (parenting time).

e. ☐ Visitation (parenting time). *(Specify start and ending date and time. If applicable, check "start of" OR "after school.")*

☐ **Petitioner's** ☐ **Respondent's** ☐ **Other Parent's/Party's** parenting time (visitation) will be as follows:

(1) ☐ **Weekends starting** *(date):*

(Note: The first weekend of the month is the first weekend with a Saturday.)

☐ 1st ☐ 2nd ☐ 3rd ☐ 4th ☐ 5th weekend of the month

from _____ *(day of week)* at _____ *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school

to _____ *(day of week)* at _____ *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school

(a) ☐ The parties will alternate the fifth weekends, with the ☐ petitioner ☐ respondent ☐ other parent/party having the initial fifth weekend, which starts *(date):*

(b) ☐ The ☐ petitioner ☐ respondent ☐ other parent/party will have the fifth weekend in ☐ odd ☐ even numbered months.

(2) ☐ **Alternate weekends starting** *(date):*

from _____ *(day of week)* at _____ *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school

to _____ *(day of week)* at _____ *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school

(3) ☐ **Weekdays starting** *(date):*

from _____ *(day of week)* at _____ *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school

to _____ *(day of week)* at _____ *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school

(4) ☐ Other visitation (parenting time) days and restrictions are: ☐ listed in Attachment 2e(4) ☐ as follows:

Form Approved for Optional Use
Judicial Council of California
FL-311 [Rev. July 1, 2016]

Family Code, § 6200 et seq.
www.courts.ca.gov

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

3. ☐ **Supervised visitation (parenting time).**

   a. **If item 3 is checked, you must attach a declaration that shows why unsupervised visitation (parenting time) would be bad for your children. The judge is required to consider supervised visitation if one parent or party is alleging domestic violence and is protected by a restraining order.**

   b. ☐ The person who supervises the visitation (parenting time) must meet the requirements listed in *Declaration of Supervised Visitation Provider* (form FL-324) under Family Code § 3200.5.

   c. I request that *(name):* have supervised visitation (parenting time) with the minor children according to the schedule set out on page 1.

   d. I request that the visitation (parenting time) be supervised by *(name):*
   who is a ☐ professional ☐ nonprofessional supervisor.
   The supervisor's phone number is *(specify):*

   e. I request that any costs of supervision be paid as follows: petitioner: percent; respondent: percent; other parent/party: percent.

4. ☐ **Transportation for visitation (parenting time) and place of exchange.**
   a. The children will be driven only by a licensed and insured driver. The car or truck must have legal child restraint devices.
   b. ☐ Transportation **to** begin the visits will be provided by *(name):*
   c. ☐ Transportation **from** the visits will be provided by *(name):*
   d. ☐ The exchange point at the beginning of the visit will be *(address):*
   e. ☐ The exchange point at the end of the visit will be *(address):*
   f. ☐ During the exchanges, the party driving the children will wait in the car and the other party will wait in his or her home (or exchange location) while the children go between the car and the home (or exchange location).
   g. ☐ Other *(specify):*

5. ☐ **Travel with children.** The ☐ petitioner ☐ respondent ☐ other parent/party **must** have written permission from the other parent or party, or a court order, to take the children out of the following places:
   a. ☐ the state of California.
   b. ☐ the following counties *(specify):*
   c. ☐ other places *(specify):*

6. ☐ **Child abduction prevention.** There is a risk that one of the parties will take the children out of California without the other party's permission. I request the orders set out on attached form FL-312.

7. ☐ **Children's holiday schedule.** I request the holiday and vacation schedule set out on the attached ☐ form FL-341(C) ☐ Other *(specify):*

8. ☐ **Additional custody provisions.** I request the additional orders regarding custody set out on the attached ☐ form FL-341(D) ☐ Other *(specify):*

9. ☐ **Joint legal custody provisions.** I request joint legal custody and want the additional orders set out on the attached ☐ form FL-341(E) ☐ Other *(specify):*

10. ☐ **Other.** I request the following additional orders *(specify):*

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

CHILD CUSTODY AND VISITATION (PARENTING TIME) ORDER ATTACHMENT

TO ☐ ***Findings and Order After Hearing*** **(form FL-340)** ☐ ***Judgment*** **(form FL-180)** ☐ ***Judgment*** **(form FL-250)**
☐ ***Stipulation and Order fo Custody and/or Visitation of Children*** **(form FL-355)**
☐ Other *(specify):*

1. **Jurisdiction.** This court has jurisdiction to make child custody orders in this case under the Uniform Child Custody Jurisdiction and Enforcement Act (Fam. Code, §§ 3400–3465).
2. **Notice and opportunity to be heard.** The responding party was given notice and an opportunity to be heard, as provided by the laws of the State of California.
3. **Country of habitual residence.** The country of habitual residence of the child or children in this case is
   ☐ the United States ☐ Other *(specify):*
4. **Penalties for violating this order.** If you violate this order, you may be subject to civil or criminal penalties, or both.
5. ☐ **Child Custody**. Custody of the minor children of the parties is awarded as follows:

Child's Name	Birth Date	Legal custody to: *(person who makes decisions about health, education, etc.)*	Physical custody to: *(person with whom child lives)*

6. ☐ **Child abduction prevention.** There is a risk that one of the parties will take the children out of California without the other party's permission. (*Child Abduction Prevention Orders Attachment* (form FL-341(B)) must be attached and must be obeyed.)
7. ☐ **Visitation (Parenting Time)**
   a. ☐ Reasonable right of visitation to the party without physical custody **(not appropriate in cases involving domestic violence)**
   b. ☐ See the attached _____ -page document
   c. ☐ The parties will go to child custody mediation or child custody recommending counseling at *(specify date, time, and location):*
   d. ☐ No Visitation (Parenting Time)
   e. ☐ Visitation (Parenting Time) for the ☐ petitioner ☐ respondent ☐ other *(name):* will be as follows:
      (1) ☐ **Weekends starting***(date):*
      (Note: The first weekend of the month is the first weekend with a Saturday.)
      ☐ 1st ☐ 2nd ☐ 3rd ☐ 4th ☐ 5th weekend of the month
      from *(day of week)* at *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school
      to *(day of week)* at *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school
      (a) ☐ The parties will alternate the fifth weekends, with the ☐ petitioner ☐ respondent ☐ other parent/party having the initial fifth weekend, which starts *(date):*
      (b) ☐ The ☐ petitioner ☐ respondent ☐ other parent/party will have the fifth weekend in ☐ odd ☐ even numbered months.

THIS IS A COURT ORDER.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

7. **Visitation (Parenting Time)** (continued)

e. (2) ☐ **Alternate weekends starting** *(date):*

from *(day of week)* at *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school

to *(day of week)* at *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school

(3) ☐ **Weekdays starting** *(date):*

from *(day of week)* at *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school

to *(day of week)* at *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school

(4) ☐ **Other visitation (parenting time) days and restrictions are:** ☐ listed in Attachment 7e(4) *(form MC-025 may be used for this purpose)* ☐ as follows:

8. ☐ **Supervised visitation (parenting time).** Until ☐ further order of the court ☐ other *(specify):*
The ☐ petitioner ☐ respondent ☐ other *(name):*
will have supervised visitation (parenting time) with the minor children according to the schedule set forth on page 1.
(You must attach *Supervised Visitation Order* (form FL-341(A)).)

9. ☐ **Transportation for visitation (parenting time)**
   a. The children must be driven only by a licensed and insured driver. The car or truck must have legal child restraint devices.
   b. ☐ Transportation **to** begin the visits will be provided by the ☐ petitioner ☐ respondent ☐ other *(specify):*
   c. ☐ Transportation **from** the visits will be provided by the ☐ petitioner ☐ respondent ☐ other *(specify):*
   d. ☐ The exchange point at the beginning of the visit will be at *(address):*
   e. ☐ The exchange point at the end of the visit will be at *(address):*
   f. ☐ During the exchanges, the party driving the children will wait in the car and the other party will wait in his or her home (or exchange location) while the children go between the car and the home (or exchange location).
   g. ☐ Other *(specify):*

10. ☐ **Travel with children.** The ☐ petitioner ☐ respondent ☐ other parent/party *(name):*
must have written permission from the other parent or a court order to take the children out of
   a. ☐ the state of California.
   b. ☐ the following counties *(specify):*
   c. ☐ other places *(specify):*

THIS IS A COURT ORDER.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

11. ☐ **Holiday schedule.** The children will spend holiday time as listed ☐ below ☐ in the attached schedule (*Children's Holiday Schedule Attachment* (form FL-341(C)) may be used for this purpose.)

12. ☐ **Additional custody provisions.** The parties will follow the additional custody provisions listed ☐ below ☐ in the attached schedule. (*Additional Provisions—Physical Custody Attachment* (form FL-341(D)) may be used for this purpose.)

13. ☐ **Joint legal custody.** The parties will share joint legal custody as listed ☐ below ☐ in the attached schedule. (*Joint Legal Custody Attachment* (form FL-341(E)) may be used for this purpose.)

14. **Access to children's records.** Both the custodial and noncustodial parent have the right to access records and information about their minor children (including medical, dental, and school records) and consult with professionals who are providing services to the children.

15. ☐ **Other** *(specify):*

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

CHILD CUSTODY AND VISITATION (PARENTING TIME) ORDER ATTACHMENT

TO ☐ ***Findings and Order After Hearing*** **(form FL-340)** ☐ ***Judgment*** **(form FL-180)** ☐ ***Judgment*** **(form FL-250)**
☐ ***Stipulation and Order fo Custody and/or Visitation of Children*** **(form FL-355)**
☐ Other *(specify):*

1. **Jurisdiction.** This court has jurisdiction to make child custody orders in this case under the Uniform Child Custody Jurisdiction and Enforcement Act (Fam. Code, §§ 3400–3465).
2. **Notice and opportunity to be heard.** The responding party was given notice and an opportunity to be heard, as provided by the laws of the State of California.
3. **Country of habitual residence.** The country of habitual residence of the child or children in this case is
   ☐ the United States ☐ Other *(specify):*
4. **Penalties for violating this order.** If you violate this order, you may be subject to civil or criminal penalties, or both.
5. ☐ **Child Custody**. Custody of the minor children of the parties is awarded as follows:

Child's Name	Birth Date	Legal custody to: *(person who makes decisions about health, education, etc.)*	Physical custody to: *(person with whom child lives)*

6. ☐ **Child abduction prevention.** There is a risk that one of the parties will take the children out of California without the other party's permission. (*Child Abduction Prevention Orders Attachment* (form FL-341(B)) must be attached and must be obeyed.)
7. ☐ **Visitation (Parenting Time)**
   a. ☐ Reasonable right of visitation to the party without physical custody **(not appropriate in cases involving domestic violence)**
   b. ☐ See the attached _____ -page document
   c. ☐ The parties will go to child custody mediation or child custody recommending counseling at *(specify date, time, and location):*
   d. ☐ No Visitation (Parenting Time)
   e. ☐ Visitation (Parenting Time) for the ☐ petitioner ☐ respondent ☐ other *(name):* will be as follows:
      (1) ☐ **Weekends starting***(date):*
      (Note: The first weekend of the month is the first weekend with a Saturday.)
      ☐ 1st ☐ 2nd ☐ 3rd ☐ 4th ☐ 5th weekend of the month
      from *(day of week)* at *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school
      to *(day of week)* at *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school
      (a) ☐ The parties will alternate the fifth weekends, with the ☐ petitioner ☐ respondent ☐ other parent/party having the initial fifth weekend, which starts *(date):*
      (b) ☐ The ☐ petitioner ☐ respondent ☐ other parent/party will have the fifth weekend in ☐ odd ☐ even numbered months.

THIS IS A COURT ORDER.

Form Approved for Optional Use
Judicial Council of California
FL-341 [Rev. July 1, 2016]

Family Code, §§ 3020, 3022, 3025, 3040–3043, 3048, 3100, 6340, 7604
www.courts.ca.gov

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

7. **Visitation (Parenting Time)** (continued)

e. (2) ☐ **Alternate weekends starting** *(date):*

from *(day of week)* at *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school

to *(day of week)* at *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school

(3) ☐ **Weekdays starting** *(date):*

from *(day of week)* at *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school

to *(day of week)* at *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school

(4) ☐ **Other visitation (parenting time) days and restrictions are:** ☐ listed in Attachment 7e(4) *(form MC-025 may be used for this purpose)* ☐ as follows:

8. ☐ **Supervised visitation (parenting time).** Until ☐ further order of the court ☐ other *(specify):*
The ☐ petitioner ☐ respondent ☐ other *(name):*
will have supervised visitation (parenting time) with the minor children according to the schedule set forth on page 1.
(You must attach *Supervised Visitation Order* (form FL-341(A)).)

9. ☐ **Transportation for visitation (parenting time)**
   a. The children must be driven only by a licensed and insured driver. The car or truck must have legal child restraint devices.
   b. ☐ Transportation **to** begin the visits will be provided by the ☐ petitioner ☐ respondent ☐ other *(specify):*
   c. ☐ Transportation **from** the visits will be provided by the ☐ petitioner ☐ respondent ☐ other *(specify):*
   d. ☐ The exchange point at the beginning of the visit will be at *(address):*
   e. ☐ The exchange point at the end of the visit will be at *(address):*
   f. ☐ During the exchanges, the party driving the children will wait in the car and the other party will wait in his or her home (or exchange location) while the children go between the car and the home (or exchange location).
   g. ☐ Other *(specify):*

10. ☐ **Travel with children.** The ☐ petitioner ☐ respondent ☐ other parent/party *(name):*
must have written permission from the other parent or a court order to take the children out of
   a. ☐ the state of California.
   b. ☐ the following counties *(specify):*
   c. ☐ other places *(specify):*

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:

11. ☐ **Holiday schedule.** The children will spend holiday time as listed ☐ below ☐ in the attached schedule (*Children's Holiday Schedule Attachment* (form FL-341(C)) may be used for this purpose.)

12. ☐ **Additional custody provisions.** The parties will follow the additional custody provisions listed ☐ below ☐ in the attached schedule. (*Additional Provisions—Physical Custody Attachment* (form FL-341(D)) may be used for this purpose.)

13. ☐ **Joint legal custody.** The parties will share joint legal custody as listed ☐ below ☐ in the attached schedule. (*Joint Legal Custody Attachment* (form FL-341(E)) may be used for this purpose.)

14. **Access to children's records.** Both the custodial and noncustodial parent have the right to access records and information about their minor children (including medical, dental, and school records) and consult with professionals who are providing services to the children.

15. ☐ **Other** *(specify):*

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:

CHILD SUPPORT INFORMATION AND ORDER ATTACHMENT

TO ☐ Findings and Order After Hearing (form FL-340) ☐ Judgment (form FL-180)
☐ Restraining Order After Hearing (CLETS-OAH)(form DV-130)
☐ Other *(specify)*:

THE COURT USED THE FOLLOWING INFORMATION IN DETERMINING THE AMOUNT OF CHILD SUPPORT:

1. ☐ A printout of a computer calculation and findings is attached and incorporated in this order for all required items not filled out below.
2. ☐ **Income**

a. Each parent's monthly income is as follows:

	Gross monthly income	Net monthly income	Receiving TANF/CalWORKS
Petitioner/plaintiff:	$	$	☐
Respondent/defendant:	$	$	☐
Other parent:	$	$	☐

b. Imputation of income. The court finds that the ☐ petitioner/plaintiff ☐ respondent/defendant ☐ other parent has the capacity to earn:

$ per and has based the support order upon this imputed income.

3. ☐ **Children of this relationship**
   a. Number of children who are the subjects of the support order *(specify)*:
   b. Approximate percentage of time spent with petitioner/plaintiff: %
      respondent/defendant: %
      other parent: %
4. ☐ **Hardships**

Hardships for the following have been allowed in calculating child support:

	Petitioner/ plaintiff	Respondent/ defendant	Other parent	Approximate ending time for the hardship
a. ☐ Other minor children:	$	$	$	
b. ☐ Extraordinary medical expenses:	$	$	$	
c. ☐ Catastrophic losses:	$	$	$	

THE COURT ORDERS

5. ☐ **Low-income adjustment**
   a. ☐ The low-income adjustment applies.
   b. ☐ The low-income adjustment does not apply because *(specify reasons)*:

6. ☐ **Child support**
   a. **Base child support**
      ☐ Petitioner/plaintiff ☐ Respondent/defendant ☐ Other parent must pay child support beginning *(date)*: and continuing until further order of the court, or until the child marries, dies, is emancipated, reaches age 19, or reaches age 18 and is not a full-time high school student, whichever occurs first, as follows:

Child's name	Date of birth	Monthly amount	Payable to *(name)*:

Payable ☐ on the 1st of the month ☐ one-half on the 1st and one-half on the 15th of the month
☐ other *(specify)*:

THIS IS A COURT ORDER.

Form Adopted for Mandatory Use
Judicial Council of California
FL-342 [Rev. July 1, 2012]

Family Code, §§ 4055–4069
www.courts.ca.gov

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:

THE COURT FURTHER ORDERS

6. b. ☐ **Mandatory additional child support**

(1) ☐ Child-care costs related to employment or reasonably necessary job training

(a) ☐ Petitioner/plaintiff must pay: ____ % of total or ☐ $ ____ per month child-care costs.
(b) ☐ Respondent/defendant must pay: ____ % of total or ☐ $ ____ per month child-care costs.
(c) ☐ Other parent must pay: ____ % of total or ☐ $ ____ per month child-care costs.
(d) ☐ Costs to be paid as follows *(specify):*

c. **Mandatory additional child support**

(2) ☐ Reasonable uninsured health-care costs for the children

(a) ☐ Petitioner/plaintiff must pay: ____ % of total or ☐ $ ____ per month.
(b) ☐ Respondent/defendant must pay: ____ % of total or ☐ $ ____ per month.
(c) ☐ Other parent must pay: ____ % of total or ☐ $ ____ per month.
(d) ☐ Costs to be paid as follows *(specify):*

d. ☐ **Additional child support**

(1) ☐ Costs related to the educational or other special needs of the children

(a) ☐ Petitioner/plaintiff must pay: ____ % of total or ☐ $ ____ per month.
(b) ☐ Respondent/defendant must pay: ____ % of total or ☐ $ ____ per month.
(c) ☐ Other parent must pay: ____ % of total or ☐ $ ____ per month.
(d) ☐ Costs to be paid as follows *(specify):*

(2) ☐ Travel expenses for visitation

(a) ☐ Petitioner/plaintiff must pay: ____ % of total or ☐ $ ____ per month.
(b) ☐ Respondent/defendant must pay: ____ % of total or ☐ $ ____ per month.
(c) ☐ Other parent must pay: ____ % of total or ☐ $ ____ per month.
(d) ☐ Costs to be paid as follows *(specify):*

e. ☐ **Non-Guideline Order**
This order does not meet the child support guideline set forth in Family Code section 4055. *Non-Guideline Child Support Findings Attachment* (form FL-342(A)) is attached.

Total child support per month: $

7. **Health-care expenses**
a. Health insurance coverage for the minor children of the parties must be maintained by the ☐ petitioner/plaintiff ☐ respondent/defendant ☐ other parent if available at no or reasonable cost through their respective places of employment or self-employment. Both parties are ordered to cooperate in the presentation, collection, and reimbursement of any health-care claims. The parent ordered to provide health insurance must seek continuation of coverage for the child after the child attains the age when the child is no longer considered eligible for coverage as a dependent under the insurance contract, if the child is incapable of self-sustaining employment because of a physically or mentally disabling injury, illness, or condition and is chiefly dependent upon the parent providing health insurance for support and maintenance.
b. ☐ Health insurance is not available to the ☐ petitioner/plaintiff ☐ respondent/defendant ☐ other parent at a reasonable cost at this time.
c. ☐ The party providing coverage must assign the right of reimbursement to the other party.

8. **Earnings assignment**
An earnings assignment order is issued. **Note:** The payor of child support is responsible for the payment of support directly to the recipient until support payments are deducted from the payor's wages and for payment of any support not paid by the assignment.

9. In the event that there is a contract between a party receiving support and a private child support collector, the party ordered to pay support must pay the fee charged by the private child support collector. This fee must not exceed 33 1/3 percent of the total amount of past due support nor may it exceed 50 percent of any fee charged by the private child support collector. The money judgment created by this provision is in favor of the private child support collector and the party receiving support, jointly.

10. ☐ **Employment search order (Family Code, § 4505)**
☐ Petitioner/plaintiff ☐ Respondent/defendant ☐ Other parent is ordered to seek employment with the following terms and conditions:

THIS IS A COURT ORDER.

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:

11. **Other orders** *(specify):*

12. **Notices**
    a. *Notice of Rights and Responsibilities (Health-Care Costs and Reimbursement Procedures) and Information Sheet on Changing a Child Support Order* (form FL-192) must be attached and is incorporated into this order.
    b. If this form is attached to *Restraining Order After Hearing* (form DV-130), the support orders issued on this form (form FL-342) remain in effect after the restraining orders issued on form DV-130 end.

13. **Child Support Case Registry Form**
    Both parties must complete and file with the court a *Child Support Case Registry Form* (form FL-191) within 10 days of the date of this order. Thereafter, the parties must notify the court of any change in the information submitted within 10 days of the change by filing an updated form.

NOTICE: Any party required to pay child support must pay interest on overdue amounts at the legal rate, which is currently 10 percent per year.