

# PARENTAGE – JUDGMENT

## Family Law

What you will find in this packet:

- **Additional Resources** (FamLaw-101-INFO)
- **Requirements for Filing Court Papers** (MC-500-INFO)
- **Parentage – Judgment Information** (FamLaw-013a-INFO)
- **Parentage – Judgment Checklists** (FamLaw-013b-INFO)
- **Request To Enter Default** (FL-165)
- **Declaration for Default or Uncontested Judgment** (FL-230)
- **Appearance, Stipulations, and Waiver** (FL-130)
- **Declaration and Conditional Waiver of Rights Under the Servicemembers Civil Relief Act of 2003** (FL-130a)
- **Advisement and Waiver of Rights Re: Determination of Parental Relationship** (FL-235) 2 Copies
- **Stipulation for Entry of Judgment Re: Establishment of Parental Relationship** (FL-240)
- **Judgment** (FL-250)
- **Child Custody and Visitation Order Attachment** (FL-341)
- **Supervised Visitation Order** (FL-341A)
- **Child Abduction Prevention Order Attachment** (FL-341B)
- **Children’s Holiday Schedule Attachment** (FL-341C)
- **Additional Provisions-Physical Custody Attachment** (FL-341D)
- **Joint Legal Custody Attachment** (FL-341E)
- **Child Support Information and Order Attachment** (FL-342)
- **Non-Guideline Child Support Findings Attachment** (FL-342A)
- **Child Support Case Registry Form** (FL-191)
- **Notice of rights and Responsibilities** (FL-192)
- **Notice of Entry of Judgment** (FL-190)

***You Can Get Court Forms FREE at: [www.cc-courts.org/forms](http://www.cc-courts.org/forms)***

*If you don't find what you're looking for here, you may want to check out the additional resources listed on the back of this page*

## ~ Additional Resources ~

**Contra Costa Superior Court**  
[www.cc-courts.org/family/family-law.aspx](http://www.cc-courts.org/family/family-law.aspx)

**Virtual Self-Help Law Center**  
[www.cc-courthelp.org/familylawtopics](http://www.cc-courthelp.org/familylawtopics)

Family Law court is for people who are ending a marriage or other committed relationship, dividing what they own and owe, working out child custody and visitation issues, dealing with child support or spousal support, addressing domestic violence issues, or identifying a child's legal parents.

Often, people involved in court cases need more than just legal help. It's important that you understand what is happening to you and get the help you need. For some suggestions about where to get other help, go to the California Court's Self-Help Center at [www.courts.ca.gov/selfhelp.htm](http://www.courts.ca.gov/selfhelp.htm) or check out one of the sites below:

**Contra Costa County Bar Association's Lawyer Referral Service**  
[www.cccba.org/community/find-a-lawyer/index.php](http://www.cccba.org/community/find-a-lawyer/index.php)

**Contra Costa County (CA) Resource Center (211)**  
65.166.193.134/IFTWSQL4/cccc/public.aspx  
(or do an internet search for 211 Contra Costa County Resource Center)

**Legal glossaries in 12 languages, prepared by the Superior Court in Sacramento**  
[www.saccourt.ca.gov](http://www.saccourt.ca.gov)

**A Guide to California's Free Website for Legal Help**  
[www.lawhelpcalifornia.org](http://www.lawhelpcalifornia.org)

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*The*  
C o n t r a C o s t a C o u n t y  
**Bar Association**

*is proud to sponsor*  
*the*  
F a m i l y L a w

### **MODERATE MEANS PROGRAM**

IF you qualify\*,  
we will refer you to an experienced Family Law Attorney  
who has agreed to represent clients at a reduced rate.  
Please telephone us at:

**925 / 677- 0234**

Monday - Friday 1:00-4:00 p.m.

*\*This is not a low income or pro-bono service.*

**The Clerk of the Court cannot accept for filing any papers that do not comply with California Rules of Court 2.100 et seq. (CRC 2.118)**

**To avoid having your papers rejected by the clerk:**

**Use Judicial Council forms whenever possible**

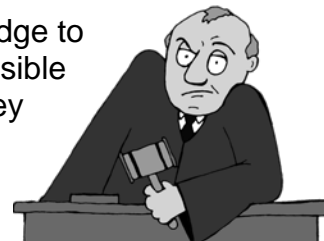
If you print Judicial Council forms from your computer, print them out single-sided. (Don't print double-sided unless you know how to tumble the pages). Judicial Council forms can be found at <http://www.courts.ca.gov/forms.htm>.

If the form you need is not on the Judicial Council website, you will have to make your own form which follows these rules

1. White or unbleached paper – 8 1/2 by 11 inches
2. One-sided paper – only one side of each page may be used
3. 12 pt font (Courier, Times New Roman, Arial or equivalent (Handwritten papers are OK – but write legibly)
4. Line spacing - One and one-half or double-spaced (use pleading paper – either the Judicial Council form MC-20 or create your own using the legal template in your word processor)
5. Margins – at least 1 inch from the left edge and ½ inch from right edge
6. Page Numbers – pages must be numbered consecutively on the bottom (1, 2, 3 ...)
7. Binding – Original and copies must be firmly bound (e.g. stapled) AND the Original must be 2-hole punched at the top.

You will need the **Original document**, signed in ink (blue is best), and correct number of identical copies (***original for the Court, a copy for each party***) for the clerk to file.

**The Rules are important** – Remember - You want the Judge to understand what you have written. Don't make that impossible by submitting papers that are too hard to read because they are upside down, the print is too small or too light, or the pages have fallen out of the file because they are too small or too large and/or not properly fastened.



# **PARENTAGE JUDGMENT**

## **GENERAL INFORMATION**

1. You can use this packet if you want to submit your judgment documents in your parentage case.
2. Finishing your judgment is complicated and you may need help with the forms. Check the court website at [www.cc-courts.org/family/flf.aspx](http://www.cc-courts.org/family/flf.aspx) for the hours and locations for the Family Law Facilitator's Office.
3. You may also seek assistance from the Family Law Facilitator at the Department of Child Support Services, 50 Douglas Drive in Martinez on Wednesdays from 8:00am to 12:00pm.
4. If you have complicated issues of child custody or support, you may need legal advice from an attorney outside the court. Court staff, including Family Law Facilitators, can provide procedural assistance; they cannot give legal advice. Check the court website at [www.cc-courts.org/findlawyer](http://www.cc-courts.org/findlawyer) for information about attorney referral services.

## **INSTRUCTIONS FOR USING PARENTAGE JUDGMENT FORMS**

1. There are checklists in the packet that tell you which form to use depending on how you are going to finish your case. Your case can be one of the following:
  - True default
  - Default
  - Uncontested
2. Follow the instructions on the checklist as to the forms to file for your case.
3. Make 3 copies of each form (keep one copy for your records.)
4. File the original and 2 copies at the Clerk's Office, 751 Pine Street, Martinez, CA
5. Include any required stamped envelopes and one large stamped, self-addressed envelope so your copies can be returned to you.
6. If you have completed your forms correctly, you will receive your judgment back from the court within approximately 2 months. If you made a mistake in your forms, the clerks will return them to you with a checklist that tells you what is wrong. If you need help correcting your forms, come to the Help Desk at any court location. Be sure to bring all of the previously filed documents in your case.

# **PARENTAGE JUDGMENT**

## **JUDGMENT CHECKLISTS**

### **TRUE DEFAULT (no Response filed):**

1. Request to Enter Default **(FL-165)**; include a stamped envelope addressed to the Respondent.
2. Declaration for Default or Uncontested Judgment **(FL-230)**.
3. Advisement and Waiver of Rights re: Determination of Parental Relationship **(FL-235)**.
4. Judgment **(FL-250)**; include provisions for child custody and visitation and child support.
5. If your judgment contains a child support order, attach the Notice of Rights and Responsibilities **(FL-192)** to the Judgment and file the Child Support Case Registry Form **(FL-191)** with the Judgment documents. You can attach the forms **FL-341 (A)**, **FL-341(B)**, **FL-341(C)**, **FL-341(D)**, **FL-341 (E)** if you want the orders contained in those forms. If you don't want those orders, you don't have to attach those forms.
6. Notice of Entry of Judgment **(FL-190)** with 2 stamped envelopes; one addressed to the Petitioner and one addressed to the Respondent.

### **DEFAULT (default taken, but parties are signing a stipulated judgment):**

1. Request To Enter Default **(FL-165)**.
2. Declaration for Default or Uncontested Judgment **(FL-230)**.
3. Advisement and Waiver of Rights re: Determination of Parental Relationship **(FL-235)** Include one for the Petitioner and one for the Respondent.
4. Stipulation for Entry of Judgment Re: Establishment of Parental Relationship **(FL-240)**. The signature of a self-represented respondent must be notarized.
5. Judgment **(FL-250)**; include provisions for child custody and visitation and child support. You can attach the forms **FL-341 (A)**, **FL-341(B)**, **FL-341(C)**, **FL-341(D)**, **FL-341(E)** if you want the orders contained in those forms. If you don't want those orders, you don't have to attach those forms.
6. If your judgment contains a child support order, attach the Notice of Rights and Responsibilities **(FL-192)** to the Judgment and file the Child Support Case Registry Form **(FL-191)** with the Judgment documents.
7. Notice of Entry of Judgment **(FL-190)** with 2 stamped envelopes; one addressed to the Petitioner and one addressed to the Respondent.

### **UNCONTESTED (Response filed):**

1. Declaration for Default or Uncontested Judgment **(FL-230)**.
2. Appearance, Stipulations, and Waiver **(FL-130)**.
3. Advisement and Waiver of Rights re: Determination of Parental Relationship **(FL-235)** Include one for the Petitioner and one for the Respondent.
4. Stipulation for Entry of Judgment Re: Establishment of Parental Obligations **(FL-240)**.
5. Judgment **(FL-250)**; include provisions for child custody and visitation and child support. You can attach the forms **FL-341(A)**, **FL-341(B)**, **FL-341(C)**, **FL-341(D)**, **FL-341 (E)** if you want the orders contained in those forms. If you don't want those orders, you don't have to attach those forms.
6. If your judgment contains a child support order, attach the Notice of Rights and Responsibilities **(FL-192)** to the Judgment and file the Child Support Case Registry Form **(FL-191)** with the Judgment documents.
7. Notice of Entry of Judgment **(FL-190)** with 2 stamped envelopes; one addressed to the Petitioner and one addressed to the Respondent.

Once you have completed the forms, make 2 copies and file the original and 2 copies at the Clerk's Office, 751 Pine Street, Martinez, CA

- Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF [ATTORNEY FOR] PETITIONER)

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*):

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

PETITIONER: RESPONDENT:	CASE NUMBER:
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**5. Memorandum of costs**

- a. ☐ Costs and disbursements are waived.
- b. Costs and disbursements are listed as follows:
- |  |    |  |
|--|----|--|
| (1) <input type="checkbox"/> Clerk's fees .....              | \$ |  |
| (2) <input type="checkbox"/> Process server's fees .....     | \$ |  |
| (3) <input type="checkbox"/> Other ( <i>specify</i> ): ..... | \$ |  |
| .....  | \$ |  |
| .....  | \$ |  |
| .....  | \$ |  |
| <b>TOTAL</b>   | \$ |  |
- 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)

**6. Declaration of nonmilitary status** (*required for a judgment*).

The respondent is not in the military service of the United States as defined by either the Servicemembers Civil Relief Act (see 50 U.S.C. § 3911(2)) or California Military and Veterans Code sections 400 and 402(f).

I know that the respondent is not in the U.S. military service because (*check all that apply*):

- a. ☐ the search results that I received from [scra.dmdc.osd.mil/](https://scra.dmdc.osd.mil/) say the respondent is not in the U.S. military service.
- b. ☐ I am in regular communication with the respondent and know that they are not in the U.S. military service.
- c. ☐ I recently contacted the respondent, and they told me that they are not in the U.S. military service.
- d. ☐ I know that the respondent was discharged from U.S. military service on or about (*date*): \_\_\_\_\_
- e. ☐ the respondent is not eligible to serve in the U.S. military because they are incarcerated (in jail or prison).
- f. ☐ other (*specify*): \_\_\_\_\_

**Note**

- U.S. military status can be checked online at [scra.dmdc.osd.mil/](https://scra.dmdc.osd.mil/).
- If the respondent is in the military service, or their military status is unknown, the respondent is entitled to certain rights and protections under federal and state law before a default judgment can be entered.
- For more information, see [selfhelp.courts.ca.gov/military-defaults](https://selfhelp.courts.ca.gov/military-defaults).

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)



- I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.  
Date:

(SIGNATURE OF DECLARANT)

- |  |  |
|--|--|
| Date: _____<br>_____<br>(TYPE OR PRINT NAME) | <br>_____<br>(SIGNATURE OF PETITIONER)              |
| Date: _____<br>_____<br>(TYPE OR PRINT NAME) | <br>_____<br>(SIGNATURE OF RESPONDENT)              |
| Date: _____<br>_____<br>(TYPE OR PRINT NAME) | <br>_____<br>(SIGNATURE OF ATTORNEY FOR PETITIONER) |
| Date: _____<br>_____<br>(TYPE OR PRINT NAME) | <br>_____<br>(SIGNATURE OF ATTORNEY FOR RESPONDENT) |

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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**DECLARATION AND CONDITIONAL WAIVER OF RIGHTS  
UNDER THE SERVICEMEMBERS CIVIL RELIEF ACT**  
*Attachment to Appearance, Stipulations, and Waivers (form FL-130)*

**Notice to Servicemember**

The Servicemembers Civil Relief Act (50 U.S.C. §§ 3901–4043) is a federal law that provides protections for military members when they enter active duty. You may obtain a copy of the act from the public law library or from the website of the United States Department of Justice at [www.justice.gov](http://www.justice.gov).

By signing this conditional waiver and attaching it to *Appearance, Stipulations, and Waivers* (form FL-130), I declare that I am entitled to the benefits of the Servicemembers Civil Relief Act (SCRA), and:

1. To permit the court to decide this cause as an uncontested matter and enter a judgment that incorporates the terms of the written agreement made between the petitioner and me (a copy of which is attached to this form), I make a knowing, intelligent, and voluntary conditional waiver of the right to seek to set aside a default judgment entered against me in this matter, as provided by section 3918 of the SCRA.
2. This waiver is conditioned as follows:
  - a. The waiver applies only to a default judgment that incorporates the terms and conditions of the written agreement between the petitioner and me that is titled (*specify*):
    - (1) ☐ Stipulation for Judgment
    - (2) ☐ Marital Settlement Agreement
    - (3) ☐ Other (*specify*):
  - b. The court must enter a judgment in this case that incorporates only the terms and conditions of the above written agreement without any change; and
  - c. Should the court enter a judgment that changes the above written agreement in any way, then I do not waive any of my rights under the SCRA, including my right to seek to set aside the judgment at any time.
3. This conditional waiver was executed during or after a period of military service.

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)

**Attention: Clerk of the Court**

**By law, a servicemember must not be charged a fee to file *Appearance, Stipulations, and Waivers* (form FL-130).**

PETITIONER: RESPONDENT:	CASE NUMBER:
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### ADVISEMENT AND WAIVER OF RIGHTS RE: DETERMINATION OF PARENTAL RELATIONSHIP

1. **RIGHT TO BE REPRESENTED BY A LAWYER.** I understand that I have the right to be represented by a lawyer of my own choice at my own expense. If I cannot afford a lawyer, I can contact the Lawyer Referral Association of the local bar association or the Family Law Facilitator for assistance.
2. **RIGHT TO A TRIAL.** I understand that I have a right to have a judge determine whether I am the parent of the children named in this action.
3. **RIGHT TO CONFRONT AND CROSS-EXAMINE WITNESSES.** I understand that in a trial I have the right to confront and cross-examine the witnesses against me and to present evidence and witnesses in my own defense.
4. **RIGHT TO HAVE GENETIC TESTING.** I understand that, where the law permits, I have the right to have the court order genetic testing. The court will decide who pays for the tests. The court could order that I pay none, some, or all of the costs of the tests.
5. **OBLIGATIONS.** I understand that if I admit that I am the parent of the children in this action that those children will be my children for legal purposes.
6. **WAIVER.** I understand that I am admitting that I am the parent of the children named in the stipulation and am giving up the rights stated above (except the right to an attorney if I have an attorney).
7. **CHILD SUPPORT.** I understand that I will have the duty to contribute to the support of the children named in this action and that this duty of support will continue for each child until the obligation is terminated by law.
8. **CRIMINAL NON-SUPPORT.** I understand that if I willfully fail to support the children, criminal proceedings may be initiated against me.
9. **UNDERSTANDING.**
  - a. ☐ I have read and understand the *Judgment (Uniform Parentage—Custody and Support)* (form FL-250) and this *Advisement and Waiver of Rights*.
  - b. ☐ I understand the translation.

**IF I AM REPRESENTED BY AN ATTORNEY, I ACKNOWLEDGE THAT MY ATTORNEY HAS READ AND EXPLAINED TO ME THE CONTENTS OF THE STIPULATION, RECITALS, AND WAIVERS, AND I ACKNOWLEDGE THAT I UNDERSTAND THEM.**

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF DECLARANT)

### INTERPRETER'S DECLARATION

1. The ☐ Petitioner ☐ Respondent is unable to read or understand the *Judgment (Uniform Parentage—Custody and Support)* (form FL-250) and this *Advisement and Waiver of Rights* because:
  - a. ☐ the primary language of the party is (*specify*):
  - b. ☐ Other (*specify*):
2. I certify under penalty of perjury under the laws of the State of California that I have, to the best of my ability, read or translated for the ☐ Petitioner ☐ Respondent the *Judgment (Uniform Parentage—Custody and Support)* (form FL-250) and this *Advisement and Waiver of Rights*. ☐ Petitioner ☐ Respondent understood the *Judgment (Uniform Parentage—Custody and Support)* (form FL-250) and this *Advisement and Waiver of Rights* before signing them, as stated in Item 9 above.

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF INTERPRETER)

PETITIONER: RESPONDENT:	CASE NUMBER:
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### ADVISEMENT AND WAIVER OF RIGHTS RE: DETERMINATION OF PARENTAL RELATIONSHIP

1. **RIGHT TO BE REPRESENTED BY A LAWYER.** I understand that I have the right to be represented by a lawyer of my own choice at my own expense. If I cannot afford a lawyer, I can contact the Lawyer Referral Association of the local bar association or the Family Law Facilitator for assistance.
2. **RIGHT TO A TRIAL.** I understand that I have a right to have a judge determine whether I am the parent of the children named in this action.
3. **RIGHT TO CONFRONT AND CROSS-EXAMINE WITNESSES.** I understand that in a trial I have the right to confront and cross-examine the witnesses against me and to present evidence and witnesses in my own defense.
4. **RIGHT TO HAVE GENETIC TESTING.** I understand that, where the law permits, I have the right to have the court order genetic testing. The court will decide who pays for the tests. The court could order that I pay none, some, or all of the costs of the tests.
5. **OBLIGATIONS.** I understand that if I admit that I am the parent of the children in this action that those children will be my children for legal purposes.
6. **WAIVER.** I understand that I am admitting that I am the parent of the children named in the stipulation and am giving up the rights stated above (except the right to an attorney if I have an attorney).
7. **CHILD SUPPORT.** I understand that I will have the duty to contribute to the support of the children named in this action and that this duty of support will continue for each child until the obligation is terminated by law.
8. **CRIMINAL NON-SUPPORT.** I understand that if I willfully fail to support the children, criminal proceedings may be initiated against me.
9. **UNDERSTANDING.**
  - a. ☐ I have read and understand the *Judgment (Uniform Parentage—Custody and Support)* (form FL-250) and this *Advisement and Waiver of Rights*.
  - b. ☐ I understand the translation.

**IF I AM REPRESENTED BY AN ATTORNEY, I ACKNOWLEDGE THAT MY ATTORNEY HAS READ AND EXPLAINED TO ME THE CONTENTS OF THE STIPULATION, RECITALS, AND WAIVERS, AND I ACKNOWLEDGE THAT I UNDERSTAND THEM.**

Date:

\_\_\_\_\_  
(TYPE OR PRINT NAME)

\_\_\_\_\_  
(SIGNATURE OF DECLARANT)

### INTERPRETER'S DECLARATION

1. The ☐ Petitioner ☐ Respondent is unable to read or understand the *Judgment (Uniform Parentage—Custody and Support)* (form FL-250) and this *Advisement and Waiver of Rights* because:
  - a. ☐ the primary language of the party is (*specify*):
  - b. ☐ Other (*specify*):
2. I certify under penalty of perjury under the laws of the State of California that I have, to the best of my ability, read or translated for the ☐ Petitioner ☐ Respondent the *Judgment (Uniform Parentage—Custody and Support)* (form FL-250) and this *Advisement and Waiver of Rights*. ☐ Petitioner ☐ Respondent understood the *Judgment (Uniform Parentage—Custody and Support)* (form FL-250) and this *Advisement and Waiver of Rights* before signing them, as stated in Item 9 above.

Date:






\_\_\_\_\_  
(TYPE OR PRINT NAME)

\_\_\_\_\_  
(SIGNATURE OF INTERPRETER)

1. ☐ The parties read and understand the *Advisement and Waiver of Rights Re: Determination 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:  
Name:  
  
are the parents of the following children:  
Name Date of Birth

3. ☐ Child custody and visitation (parenting time) as proposed in *Judgment (Uniform Parentage—Custody and Support)* (form [FL-250](#)).
4. ☐ Child support as proposed in *Judgment (Uniform Parentage—Custody and Support)* (form [FL-250](#)).
5. ☐ Attorney fees as proposed in *Judgment (Uniform Parentage—Custody and Support)* (form [FL-250](#)).
6. ☐ Changes to the names of children as proposed in *Judgment (Uniform Parentage—Custody and Support)* (form [FL-250](#)).
7. ☐ Reasonable costs of pregnancy and birth as proposed in *Judgment (Uniform Parentage—Custody and Support)* (form [FL-250](#)).
8. ☐ Other orders as proposed in *Judgment (Uniform Parentage—Custody and Support)* (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)

PARTY WITHOUT ATTORNEY OR ATTORNEY NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT:	
<b>JUDGMENT</b>	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: Determination 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 parentage or 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: Determination 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 parentage or 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:

Name:

Name:

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 and Order for Custody and/or Visitation of Children* (form FL-355)
  - (3) ☐ Other (specify): \_\_\_\_\_

PETITIONER: RESPONDENT:	CASE NUMBER:
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**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 following parent's name:
  - (2) ☐ changing the last name of the children.
- f. ☐ Attorney fees and costs are as stated in the attached *Attorney's Fees and Costs Order Attachment* (form FL-346).
- g. ☐ Reasonable expenses of pregnancy and birth are as stated in the attachment.
- h. ☐ Other (*specify*):

☐ Continued on Attachment 5h.

6. Number of pages attached: \_\_\_\_\_

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

(TYPE OR PRINT NAME)		JUDICIAL OFFICER
		<input type="checkbox"/> 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.



PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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### 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 for Custody and/or Visitation (Parenting Time)** (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 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 Order Attachment* (form [FL-341\(B\)](#)) is attached and must be obeyed.)
6. ☐ The court refers the parties to child custody mediation or child custody recommending counseling as follows:

7. ☐ **Child custody.** Custody of the minor children of the parties is awarded as follows:

a. <u>Child's Name</u>	<u>Birth Date</u>	Legal custody to: (person who decides about the child's health, education, and welfare)	Physical custody to: (person the child regularly lives with)
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- b. ☐ Joint legal custody of the child or children will be exercised as specified in the following order: ☐ [Attachment 7b](#)  
☐ *Joint Legal Custody Attachment* (form FL-341(E))

8. ☐ **Child custody and visitation (parenting time) involving allegations of a history of abuse or substance abuse**

a. Allegations have been raised in form FL-311, other documents filed in the court, or in a court hearing that

(1) ☐ Petitioner ☐ Respondent ☐ Other parent/party is (or are) alleged to have a history of abuse against any of the following persons: a child, the other parent, their current spouse, or the person they live with or are dating or engaged to.

(2) ☐ Petitioner ☐ Respondent ☐ Other parent/party is (or are) alleged to have the habitual or continual illegal use of controlled substances, or the habitual or continual abuse of alcohol, or the habitual or continual abuse of prescribed controlled substances.

b. ☐ The court does NOT grant sole or joint custody of the minor children to:

☐ petitioner ☐ respondent ☐ other parent/party

c. ☐ (1) Even though there are allegations of a history of abuse or substance abuse, the court GRANTS sole or joint custody of the minor child as set out in item 7.

(2) As required by Family Code section 3011(a)(5)(A), the court's reasons for making the orders:

(A) ☐ Are in writing and filed separately (form [FL-351](#) may be used for this purpose.)

(B) ☐ Were recorded as follows: ☐ In a minute order ☐ By a court reporter

☐ Other (specify):

(3) The court finds that the order is in the best interests of the child, protects the safety of the parties and the child, and is specific as to time, day, place, and manner of transfer (exchange) of the child as Family Code sections 3011(a)(5)(A) and 6323(c) require.

**THIS IS A COURT ORDER.**



PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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9. ☐ **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. ☐ No visitation (parenting time)
- d. ☐ The visitation (parenting time) will be supervised as specified in the attached *Supervised Visitation Order* (FL-341(A)).
- e. ☐ Visitation (parenting time) for the ☐ petitioner ☐ respondent ☐ other (*name*):  
 will be in person, by virtual visitation (not in person), and/or other ways as specified below:

(1) ☐ **In person**, as follows

(A) ☐ **Weekends starting (date):**

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

Weekend	Day(s)	Times	Start of (or After) School (if applicable)	
<input type="checkbox"/> 1st	from _____ at _____	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> start of	<input type="checkbox"/> after
	to _____ at _____	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> start of	<input type="checkbox"/> after
<input type="checkbox"/> 2nd	from _____ at _____	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> start of	<input type="checkbox"/> after
	to _____ at _____	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> start of	<input type="checkbox"/> after
<input type="checkbox"/> 3rd	from _____ at _____	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> start of	<input type="checkbox"/> after
	to _____ at _____	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> start of	<input type="checkbox"/> after
<input type="checkbox"/> 4th	from _____ at _____	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> start of	<input type="checkbox"/> after
	to _____ at _____	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> start of	<input type="checkbox"/> after
<input type="checkbox"/> 5th	from _____ at _____	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> start of	<input type="checkbox"/> after
	to _____ at _____	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> start of	<input type="checkbox"/> after

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

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

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

from \_\_\_\_\_ at \_\_\_\_\_ ☐ a.m. ☐ p.m. ☐ start of ☐ after  
 to \_\_\_\_\_ at \_\_\_\_\_ ☐ a.m. ☐ p.m. ☐ start of ☐ after

(C) ☐ **Weekdays starting (date):**

from \_\_\_\_\_ at \_\_\_\_\_ ☐ a.m. ☐ p.m. ☐ start of ☐ after  
 to \_\_\_\_\_ at \_\_\_\_\_ ☐ a.m. ☐ p.m. ☐ start of ☐ after

(D) ☐ **Other visitation (parenting time) days and restrictions are** ☐ [listed in Attachment 9e\(1\)\(D\)](#)  
 (form MC-025 may be used for this purpose) ☐ as follows:

(2) ☐ **Virtual visitation**, as follows:

**THIS IS A COURT ORDER.**



PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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(3) ☐ **Other ways visitation can happen** that are in the best interests of the child are as follows:

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

Until ☐ further order of the court ☐ other (*specify*):

☐ petitioner ☐ respondent ☐ other parent/party (*name*):

will have supervised visitation (parenting time) with the minor children according to the attached **Supervised Visitation Order** ([form FL-341\(A\)](#)).

11. ☐ **Transportation for visitation (parenting time) and place of exchange**

a. The children must be driven only by a licensed and insured driver. The vehicle must be legally registered with the Department of Motor Vehicles, and must have child restraint devices properly installed, as required by law.

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 the home (or exchange location) while the children go between the car and the home (or exchange location).

g. ☐ Other (*specify*):

12. ☐ **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:
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13. ☐ **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.)

14. ☐ **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.)

15. **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.

16. ☐ **Other** (*specify*):

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

CASE NUMBER:

**SUPERVISED VISITATION (PARENTING TIME) AND EXCHANGES ORDER**

**ATTACHMENT TO:** ☐ **Child Custody and Visitation (Parenting Time) Order Attachment (form FL-341)**  
☐ **Other (specify):**

1. Evidence has been presented in support of a request that the contact of ☐ Petitioner ☐ Respondent ☐ Other Parent/Party with the child or children be supervised based upon allegations of  
☐ child abduction ☐ 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 or children requires that visitation by ☐ Petitioner ☐ Respondent ☐ Other Parent/Party must, until further order of the court, be limited to contact supervised by the person or supervised visitation center set forth in this order pending further investigation and hearing or trial.

**THE COURT MAKES THE FOLLOWING ORDERS****3. CHILDREN**

- a. Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_
- b. Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_
- c. Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

☐ The names and birthdates of additional children are attached to the order.

**4. ☐ PROFESSIONAL SUPERVISED VISITATION WITH CHILDREN****a. Provider Information (check one):**

- (1) ☐ Chosen provider (name): \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address (if known): \_\_\_\_\_

If the chosen provider cannot provide services, parties must use the alternate provider.

Alternate provider (name): \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address (if known): \_\_\_\_\_

☐ Petitioner ☐ Respondent ☐ Other Parent/Party to contact the provider by (date): \_\_\_\_\_

- (2) ☐ The parties have not yet chosen a provider. A list of professional providers (check all that apply):  
☐ is attached to this order.

☐ was given in court to: ☐ Petitioner ☐ Respondent ☐ Other Parent/Party

☐ Petitioner ☐ Respondent ☐ Other Parent/Party must choose and contact a provider by (date): \_\_\_\_\_

- (3) ☐ The professional provider will be a mutually agreed-upon third party as arranged by the parties.

- (4) ☐ Other (specify): \_\_\_\_\_

**b. Frequency of visits (check one):**

- (1) ☐ Once a week, for (number of hours for each visit): \_\_\_\_\_  
(2) ☐ Two times each week, for (number of hours for each visit): \_\_\_\_\_  
(3) ☐ According to the schedule specified in: ☐ Form FL-341 ☐ Other (specify): \_\_\_\_\_

**c. Visits must be (check one):**

- (1) ☐ In person at a safe location.  
(2) ☐ Virtual visitation (not in person).  
(3) ☐ Other (specify): \_\_\_\_\_

- d. Payment responsibility: Petitioner: \_\_\_\_\_ % Respondent: \_\_\_\_\_ % Other: \_\_\_\_\_ %

**THIS IS A COURT ORDER.**

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

CASE NUMBER:

5. ☐ **NONPROFESSIONAL SUPERVISED VISITATION WITH CHILDREN**

a. Nonprofessional provider (person) to supervise visits:

Name:

Relationship to child:

Address (if known):

Telephone (if known):

b. Frequency of visits (check one):

(1) ☐ Once a week, for (number of hours for each visit):

(2) ☐ Two times each week, for (number of hours for each visit):

(3) ☐ According to the schedule specified in: ☐ Form FL-341 ☐ Other (specify):

c. Visits must be (check one):

(1) ☐ In person at a safe location. (specify location):

(2) ☐ Virtual visitation (not in person). (Provider, child, and visiting parent may need to access the internet.)

(3) ☐ Other (specify):

d. Resources for nonprofessional providers:

(1) Find your Declaration (form FL-324(NP)) at: [courts.ca.gov/sites/default/files/courts/default/2024-11/fl324np.pdf](https://courts.ca.gov/sites/default/files/courts/default/2024-11/fl324np.pdf).

(2) For online information, go to: [www2.courtinfo.ca.gov/accesstovisitation/story\\_html5.html](http://www2.courtinfo.ca.gov/accesstovisitation/story_html5.html).

(3) For information about safe locations and virtual visits, go to: [selfhelp.courts.ca.gov/guide-supervised-visitation](https://selfhelp.courts.ca.gov/guide-supervised-visitation).

6. ☐ **SUPERVISED EXCHANGES (Drop-off and Pick-up of Children)**

a. Type of provider:

(1) ☐ Professional provider

Name:

Relationship to child:

Address (if known):

Payment responsibility    Petitioner:                      %    Respondent:                      %    Other:                      %

☐ Petitioner    ☐ Respondent    ☐ Other Parent/Party    to contact the provider by (specify date) (date):

Location of supervised exchanges to be decided by the professional provider.

(2) ☐ Nonprofessional provider

Name:

Relationship to child:

Address (if known):

Telephone (if known):

Safe location for exchanges:

(For more information, see item 5d. Resources for nonprofessional providers.)

b. Supervised exchanges will be according to the schedule specified:

(1) ☐ In form FL-341

(2) ☐ Other (specify):

(3) ☐ Below:

7. ☐ **THE COURT FURTHER ORDERS**

**THIS IS A COURT ORDER.**

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

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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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 (22 U.S.C. § 9001 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:
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### 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) <i>(Unless noted below, all single-day holidays start at ____ a.m. and end at ____ p.m.)</i>	Every Year <i>Petitioner/ Respondent/ Other Parent/Party</i>	Even Numbered Years <i>Petitioner/ Respondent/ Other Parent/Party</i>	Odd Numbered Years <i>Petitioner/ Respondent/ Other Parent/Party</i>
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 ( <i>date</i> ):				
Child's birthday ( <i>date</i> ):				
Child's birthday ( <i>date</i> ):				
Mother's birthday ( <i>date</i> ):				
Father's birthday ( <i>date</i> ):				
Other Parent/Party's birthday ( <i>date</i> ):				
Breaks for year-round schools				

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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**1. Holiday parenting (continued)**

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

- ☐ 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:
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### 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.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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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:
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## 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*):**

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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### CHILD SUPPORT INFORMATION AND ORDER ATTACHMENT

Attachment to: ☐ Findings and Order After Hearing (form FL-340) ☐ Judgment (form FL-180)  
☐ Judgment (form FL-250) ☐ Restraining Order After Hearing (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**

	<u>Gross monthly income</u>	<u>Net monthly income</u>	<u>Receiving TANF/CalWORKs</u>
a. Each parent's monthly income is as follows:			
Petitioner: \$	\$		<input type="checkbox"/>
Respondent: \$	\$		<input type="checkbox"/>
Other Parent/Party: \$	\$		<input type="checkbox"/>

b. **Earning capacity.** The court finds that the (check all that apply):

- (1) ☐ petitioner has the ability to earn \$ \_\_\_\_\_ per month.  
 (2) ☐ respondent has the ability to earn \$ \_\_\_\_\_ per month.  
 (3) ☐ other parent/party has the ability to earn \$ \_\_\_\_\_ per month.  
 (4) The factors used to calculate earning capacity under Family Code section 4058(b) are stated  
 (a) ☐ in *Earning Capacity Factors Attachment* (form [FL-302](#)).  
 (b) ☐ as follows (specify):

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: %  
     respondent: %  
     other parent/party: %

4. ☐ **Hardships**

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

	<u>Petitioner</u>	<u>Respondent</u>	<u>Other Parent/Party</u>	<u>Approximate end date for the hardship</u>
a. <input type="checkbox"/> Other minor children:	\$	\$	\$	
b. <input type="checkbox"/> Extraordinary medical expenses:	\$	\$	\$	
c. <input type="checkbox"/> Catastrophic losses:	\$	\$	\$	

### THE COURT ORDERS

5. ☐ **Low-income adjustment**

- a. ☐ The low-income adjustment applies at the lowest amount of the range.  
 b. ☐ The lowest amount of the low-income adjustment has been rebutted and does not apply because (specify reasons):

**THIS IS A COURT ORDER.**

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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6. ☐ **Child support**

a. **Base child support**

☐ Petitioner ☐ Respondent ☐ Other parent/party 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:

<u>Child's name</u>	<u>Date of birth</u>	<u>Monthly amount</u>	<u>Payable to (name):</u>
		\$	
		\$	
		\$	
		\$	

Payable ☐ on the 1st of the month ☐ other (specify): \_\_\_\_\_

b. ☐ **Mandatory additional child support**

(1) Childcare costs related to employment or reasonably necessary job training

- |   |   |          |    |                             |           |                   |
|---|---|----------|----|-----------------------------|-----------|-------------------|
| (a) <input type="checkbox"/> Petitioner must pay:                         | % | of total | or | <input type="checkbox"/> \$ | per month | child-care costs. |
| (b) <input type="checkbox"/> Respondent must pay:                         | % | of total | or | <input type="checkbox"/> \$ | per month | child-care costs. |
| (c) <input type="checkbox"/> Other parent/party must pay:                 | % | of total | or | <input type="checkbox"/> \$ | per month | child-care costs. |
| (d) <input type="checkbox"/> Costs to be paid as follows (specify): _____ |   |          |    |                             |           |                   |

(2) Reasonable uninsured health care costs for the children

- |   |   |          |    |                             |            |
|---|---|----------|----|-----------------------------|------------|
| (a) <input type="checkbox"/> Petitioner must pay:                         | % | of total | or | <input type="checkbox"/> \$ | per month. |
| (b) <input type="checkbox"/> Respondent must pay:                         | % | of total | or | <input type="checkbox"/> \$ | per month. |
| (c) <input type="checkbox"/> Other parent/party must pay:                 | % | of total | or | <input type="checkbox"/> \$ | per month. |
| (d) <input type="checkbox"/> Costs to be paid as follows (specify): _____ |   |          |    |                             |            |

c. ☐ **Additional child support**

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

- |   |   |          |    |                             |            |
|---|---|----------|----|-----------------------------|------------|
| (a) <input type="checkbox"/> Petitioner must pay:                         | % | of total | or | <input type="checkbox"/> \$ | per month. |
| (b) <input type="checkbox"/> Respondent must pay:                         | % | of total | or | <input type="checkbox"/> \$ | per month. |
| (c) <input type="checkbox"/> Other parent/party must pay:                 | % | of total | or | <input type="checkbox"/> \$ | per month. |
| (d) <input type="checkbox"/> Costs to be paid as follows (specify): _____ |   |          |    |                             |            |

(2) ☐ Travel expenses for visitation

- |   |   |          |    |                             |            |
|---|---|----------|----|-----------------------------|------------|
| (a) <input type="checkbox"/> Petitioner must pay:                         | % | of total | or | <input type="checkbox"/> \$ | per month. |
| (b) <input type="checkbox"/> Respondent must pay:                         | % | of total | or | <input type="checkbox"/> \$ | per month. |
| (c) <input type="checkbox"/> Other parent/party must pay:                 | % | of total | or | <input type="checkbox"/> \$ | per month. |
| (d) <input type="checkbox"/> Costs to be paid as follows (specify): _____ |   |          |    |                             |            |

d. ☐ **Non-Guideline Order**

This order is ☐ below ☐ above 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: \$**

**THIS IS A COURT ORDER.**

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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## 7. Health care expenses

- a. Health insurance coverage for the minor children of the parties must be maintained by the  
☐ petitioner ☐ respondent ☐ other parent/party 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 on the parent providing health insurance for support and maintenance.
- b. ☐ Health insurance is not available to the ☐ petitioner ☐ respondent ☐ other parent/party 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 parent ordered to pay 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 person ordered to receive support and a private child support collector, the parent 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 person ordered to receive support, jointly.

## 10. ☐ Employment search order (Family Code section 4505)

☐ Petitioner ☐ Respondent ☐ Other parent/party is ordered to seek employment with the following terms and conditions:

## 11. Other orders (specify):

## 12. Notices

- a. *Notice of Rights and Responsibilities Regarding Child Support* (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 parent ordered to pay child support must pay interest on overdue amounts at the legal rate, which is currently 10 percent per year.**

**THIS IS A COURT ORDER.**



PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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### NON-GUIDELINE CHILD SUPPORT FINDINGS ATTACHMENT

Attachment to ☐ Child Support Information and Order Attachment (form FL-342)  
☐ Other (specify):

The court makes the following findings required by Family Code sections 4056, 4057, and 4065:

#### STIPULATION TO NON-GUIDELINE ORDER

1. ☐ The child support agreed to by the parties is ☐ below or ☐ above the statewide child support guideline. The amount of support that would have been ordered under the guideline formula is: \$ \_\_\_\_\_ per month. The parties have been fully informed of their rights concerning child support. Neither party is acting out of duress or coercion. Neither party is receiving public assistance and no application for public assistance is pending. The needs of the children will be adequately met by this agreed-upon amount of child support. If the order is below the guideline, no change of circumstances will be required to modify this order. If the order is above the guideline, a change of circumstances will be required to modify this order.

#### OTHER REBUTTAL FACTORS

##### 2. ☐ Support calculation

- a. The guideline amount of child support calculated is: \$ \_\_\_\_\_ per month payable by ☐ petitioner ☐ respondent ☐ other parent/party
- b. The court finds by a preponderance of the evidence that rebuttal factors exist. The rebuttal factors result in an ☐ increase ☐ decrease in child support. The revised amount of support is: \$ \_\_\_\_\_ per month.
- c. The court finds the child support amount revised by these factors to be in the best interest of the children and that application of the formula would be unjust or inappropriate in this case under Family Code section 4057(b). These changes remain in effect ☐ until (date): \_\_\_\_\_ ☐ until further order
- d. **The factors are:**
- (1) ☐ The sale of the family residence is deferred under Family Code section 3800, and the rental value of the family residence in which the children reside exceeds the mortgage payments, homeowners insurance, and property taxes by: \$ \_\_\_\_\_ per month.
  - (2) ☐ The parent ordered to pay support has extraordinarily high income, and the amount determined under the guideline would exceed the needs of the children.
  - (3) ☐ The ☐ parent ordered to pay support ☐ person ordered to receive support is not contributing to the needs of the children at a level commensurate with that party's custodial time.
  - (4) ☐ After application of the low-income adjustment, guideline child support would be greater than 50 percent of the net disposable income of the parent ordered to pay support.
  - (5) ☐ Special circumstances exist in this case. The special circumstances are:
    - (a) ☐ The parents have different time-sharing arrangements for different children.
    - (b) ☐ The parents have substantially equal custody of the children and one parent has a much lower or higher percentage of income used for housing than the other parent.
    - (c) ☐ A child has special medical or other needs that require support greater than the formula amount. These needs are (specify): \_\_\_\_\_
  - (d) ☐ Other (specify): \_\_\_\_\_

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):           <div style="display: flex; justify-content: space-between;"> <div>TELEPHONE NO.:</div> <div>FAX NO. (Optional):</div> </div> E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):	<b>COURT PERSONNEL:</b> STAMP DATE RECEIVED HERE           <div style="font-size: 24pt; font-weight: bold; margin-top: 20px;">DO NOT FILE</div>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b>  STREET ADDRESS:  MAILING ADDRESS:  CITY AND ZIP CODE:  BRANCH NAME:	
PETITIONER/PLAINTIFF:   RESPONDENT/DEFENDANT:   OTHER PARENT:	
<div style="text-align: center; font-weight: bold;">CHILD SUPPORT CASE REGISTRY FORM</div> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Mother  <input type="checkbox"/> Father         </div> <div> <input type="checkbox"/> First form completed  <input type="checkbox"/> Change to previous information         </div> </div>	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) <input type="checkbox"/> Current base child support: \$ <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order	(1) <input type="checkbox"/> Current base family support: \$ <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order	(1) <input type="checkbox"/> Current spousal support: \$ <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order
(2) <input type="checkbox"/> Additional monthly support: \$	(2) <input type="checkbox"/> Additional monthly support: \$	
(3) <input type="checkbox"/> Total past-due support: \$	(3) <input type="checkbox"/> Total past-due support: \$	(3) <input type="checkbox"/> Total past-due support: \$
(4) <input type="checkbox"/> Payment on past-due support: \$	(4) <input type="checkbox"/> Payment on past-due support: \$	(4) <input type="checkbox"/> Payment on past-due support: \$
(5) Wage withholding was <input type="checkbox"/> ordered <input type="checkbox"/> 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**

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

6. Mother's name:

- a. Date of birth:
- b. Social security number:
- c. Street address:

- a. Date of birth:
- b. Social security number:
- c. Street address:

City, state, zip code:

City, state, zip code:

d. Mailing address:

d. Mailing address:

City, state, zip code:

City, state, zip code:

e. Driver's license number:

e. Driver's license number:

State:

State:

f. Telephone number:

f. Telephone number:

g. ☐ Employed ☐ Not employed ☐ Self-employed

g. ☐ Employed ☐ Not employed ☐ Self-employed

Employer's name:

Employer's name:

Street address:

Street address:

City, state, zip code:

City, state, zip code:

Telephone number:

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.

# NOTICE OF RIGHTS AND RESPONSIBILITIES REGARDING CHILD SUPPORT

## Childcare and Health Care Costs and Reimbursement Procedures

Your child support order may include a provision for payment of childcare or uninsured health care costs. Childcare costs may be included as part of the monthly child support payment or reimbursable as a percentage of the costs. If the childcare costs are included as part of the monthly child support payment, you must pay that amount each month until the court changes (modifies) the child support order. If you need to change your child support order because there has been a change in the cost of childcare, see page 2.

If you have a child support order that includes a provision for the reimbursement of a percentage of childcare costs or 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 childcare costs or health care costs not paid by insurance. You must give this statement to the other parent within a reasonable time, but no more than 90 days after those costs were given to you.
2. **Proof of full payment.** If you have already paid all of the childcare costs or uninsured health care 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 childcare costs or uninsured health care 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 childcare or 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 a childcare or 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. **Going to court.** Sometimes parents get into disagreements about childcare and health care costs. If you and the other parent cannot resolve the situation after talking about it, you can request that the court make a decision.
- a. **Disputed requests for payment.** If you dispute a request for payment made by the other parent, you may file a request for the court to resolve the dispute, but only if you pay the requested amount before filing your request.
- b. **Nonpayment.** If you claim that the other parent has failed to pay you back for a payment, or they have failed to make a payment to the provider after proper notice, you may file a request for the court to resolve the dispute.
- c. **Paid charges.** The court will presume that if uninsured health care costs or childcare costs for employment or necessary training for job skills have been paid, those costs were reasonable. If you want to dispute paid charges, you will have to show the court that the costs were unreasonable.
- d. **Attorney's fees.** If the court decides one parent has been unreasonable, it can order that parent to pay the other parent's attorney's fees and costs.
- e. **Court forms.** Use forms [FL-300](#) and [FL-490](#) to get a court date. See form [FL-300-INFO](#) for information about completing, filing, and serving your court papers.
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 parent 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 parent 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 parent incurring those costs.
8. **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 on Changing a Child Support Order

### General Info

The court has made a child support order in your case. This order will remain the same unless one of the parents requests that the support be changed (modified). An order for child support can be modified by filing a request to change child support and serving the other parent. If both parents agree on a new child support amount, they can complete, sign, and file with the court a *Stipulation to Establish or Modify Child Support and Order* (form [FL-350](#)). (**Note:** If the local child support agency is involved in your case, it must be served with any request to change child support and approve any agreement.)

### Online Self-Help Guide

For more information about how child support works, visit: <https://selfhelp.courts.ca.gov/child-support>.

### When a Child Support Order May Be Changed

The court considers several things when ordering the payment of child support.

- First, the number of children is considered, along with the percentage of time each parent has physical custody of the children.
- Next, the net disposable incomes of both parents are determined (which is how much money is left each month after taxes and certain other items like health insurance, union dues, or other child support ordered and paid are subtracted from a parent's paycheck). The court can also look at a parent's earning ability.
- The court considers both parents' tax filing status and may consider hardships, such as the cost of raising the parent's child from another relationship who lives with the parent.

A parent can request to change an existing order for child support when circumstances change significantly. For example if the net disposable income of one of the parents changes, parenting time changes, 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 on 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, you must fill out one of these forms:

- Form [FL-300](#), *Request for Order* or
- Form [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, and attach proof of income for the past two months (like your paycheck stubs):

- Form [FL-150](#), *Income and Expense Declaration* or
- Form [FL-155](#), *Financial Statement (Simplified)*

### What if I am not sure which forms to fill out?

Contact the family law facilitator in your county. You can find them here: [www.courts.ca.gov/selfhelp-facilitators.htm](http://www.courts.ca.gov/selfhelp-facilitators.htm).

**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 may ask you to pay a filing fee. If you cannot afford the fee, fill out these forms, too:

- Form [FW-001](#), *Request to Waive Court Fees* and
- Form [FW-003](#), *Order on Court Fee Waiver (Superior Court)*

**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 deliver copies of your filed court forms to the other parent, at least **16 court days** before the hearing. Add **5 calendar days** if delivered 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 find court holidays, go to: [www.courts.ca.gov/holidays.htm](http://www.courts.ca.gov/holidays.htm).

Blank copies of both of these forms must also be served:

- Form [FL-320](#), *Responsive Declaration to Request for Order*
- Form [FL-150](#), *Income and Expense Declaration*

Then the server fills out and signs a *Proof of Service*. Take this form, plus one copy, to the clerk and file it at least one week before your hearing.

### Go to your hearing and ask the judge to change the support.

Bring your tax returns from the last two years and your proof of income for the past two months (like your paycheck stubs). The judge will look at your information, listen to both parents, and make an order. After the hearing, fill out:

- Form [FL-340](#), *Findings and Order After Hearing* and
- Form [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 About Child Support for Incarcerated or Confined Parents

**1. Child support.** As of September 27, 2022, child support automatically stops if the parent who has to pay is confined against their will for more than 90 days in a row in jail, prison, juvenile detention, a mental health facility, or other institution.

**Exception.** Child support does not automatically stop if the parent who has to pay has money available to pay child support.

**2. Past confinement.** Child support also automatically stops during past confinement if it was ordered from October 8, 2015, through December 31, 2019, or January 1, 2021, through September 26, 2022, and the parent who has to pay was confined for more than 90 days in a row during the same time frame.

**Exceptions for past confinement.** Child support does not automatically stop if the parent who has to pay was in jail or prison for failing to pay child support or for domestic violence against the other parent or the child, or if they had money available to pay support.

**3. Timing.** The date child support automatically restarts will depend on the parent's release date. If you need to change your child support order, see page 2.

- a. **If released before January 1, 2024,** child support automatically restarts the first day of the first full month after the parent is released.
- b. **If released after January 1, 2024,** child support will automatically restart the first day of the 10th month after the parent is released.

**Employment before the 10-month period ends:** If the parent who has to pay support starts working before the date child support is set to automatically restart, the person who is owed support or the local child support agency can request the court restart the child support order early. The court may order a different amount of child support if appropriate.

**4. More info.** For more information about child support and incarcerated parents, see [Family Code section 4007.5](#) or go to <https://selfhelp.courts.ca.gov/child-support/incarcerated-parent>.

You can also contact the family law facilitator in your county and can find them here: [www.courts.ca.gov/selfhelp-facilitators.htm](http://www.courts.ca.gov/selfhelp-facilitators.htm).



ATTORNEY OR PARTY WITHOUT ATTORNEY ( <i>Name, State Bar number, and address</i> ):  <hr style="border: 0; border-top: 1px solid black; margin: 10px 0;"/> <div style="display: flex; justify-content: space-between;"> <div>TELEPHONE NO.:</div> <div>FAX NO. (<i>Optional</i>):</div> </div> <div>E-MAIL ADDRESS (<i>Optional</i>):</div> <div>ATTORNEY FOR (<i>Name</i>):</div>	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b>  STREET ADDRESS:  MAILING ADDRESS:  CITY AND ZIP CODE:  BRANCH NAME:	
PETITIONER:  RESPONDENT:	
<b>NOTICE OF ENTRY OF JUDGMENT</b>	
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.

<p style="text-align: center;"><b>STATEMENT IN THIS BOX APPLIES ONLY TO JUDGMENT OF DISSOLUTION</b></p> <p>Effective date of termination of marital or domestic partnership status (<i>specify</i>):</p> <p><b>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.</b></p>
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**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