

## **PACKET B**

# **DIVORCE: FINAL JUDGMENT**

## **(No Hearing – WITH Children and/or Separate Child Support Order)**

This packet cannot be filed alone, it must be attached to the **Divorce: Final Judgment Packet A**. Use this packet when you have a separate order for child support and are seeking specific custody and visitation orders.

What you will find in this packet:

- **Child Custody and Visitation Order Attachment (FL-341)**
- **Children's Holiday Schedule Attachment (FL-341(C))**
- **Child Support Information and Order Attachment (FL-342)**
- **Non-Guideline Child Support Findings Attachment (FL-342(A))**
- **Notice of Rights and Responsibilities (FL-192)**
- **Aviso Sobre Derechos y Responsabilidades (FL-192S)**
- **Child Support Case Registry Form (FL-191)**

**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*

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

### CHILD CUSTODY AND VISITATION (PARENTING TIME) ORDER ATTACHMENT

TO  *Findings and Order After Hearing* (form FL-340)  *Judgment* (form FL-180)  *Judgment* (form FL-250)  
 *Stipulation and Order for Custody and/or Visitation (Parenting Time)* (form FL-355)  
 *Other (specify):*

- 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).
- 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.
- Country of habitual residence.** The country of habitual residence of the child or children in this case is  
 the United States  Other (specify):
- Penalties for violating this order.** If you violate this order, you may be subject to civil or criminal penalties, or both.
- 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.)
- The court refers the parties to child custody mediation or child custody recommending counseling as follows:

- 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: <i>(person who decides about the child's health, education, and welfare)</i>	Physical custody to: <i>(person the child regularly lives with)</i>
------------------------	-------------------	---	--

- 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))

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

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

- The court does NOT grant sole or joint custody of the minor children to:  
 petitioner  respondent  other parent/party

- (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:
---	--------------

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.)

<u>Weekend</u>	<u>Day(s)</u>	<u>Times</u>	<u>Start of (or After) School (if applicable)</u>
<input type="checkbox"/> 1st	from _____ to _____	at _____ a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> start of <input type="checkbox"/> after
<input type="checkbox"/> 2nd	from _____ to _____	at _____ a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> start of <input type="checkbox"/> after
<input type="checkbox"/> 3rd	from _____ to _____	at _____ a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> start of <input type="checkbox"/> after
<input type="checkbox"/> 4th	from _____ to _____	at _____ a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> start of <input type="checkbox"/> after
<input type="checkbox"/> 5th	from _____ to _____	at _____ a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> start of <input type="checkbox"/> after
(a) <input type="checkbox"/> The parties will alternate the fifth weekends, with the <input type="checkbox"/> petitioner <input type="checkbox"/> respondent <input type="checkbox"/> other parent/party having the initial fifth weekend, starting (date):			
(b) <input type="checkbox"/> The <input type="checkbox"/> petitioner <input type="checkbox"/> respondent <input type="checkbox"/> other parent/party will have the fifth weekend in <input type="checkbox"/> odd <input type="checkbox"/> even numbered months.			
(B) <input type="checkbox"/> <b>Alternate weekends starting (date):</b>			
from _____ to _____ at _____ a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> start of <input type="checkbox"/> after			
(C) <input type="checkbox"/> <b>Weekdays starting (date):</b>			
from _____ to _____ at _____ a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> start of <input type="checkbox"/> after			
(D) <input type="checkbox"/> <b>Other visitation (parenting time) days and restrictions are <input type="checkbox"/> listed in Attachment 9e(1)(D)</b> (form MC-025 may be used for this purpose) <input type="checkbox"/> as follows:			

(2)  **Virtual visitation**, as follows:**THIS IS A COURT ORDER.**

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

(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:
---	--------------

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):**

**THIS IS A COURT ORDER.**

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

## CHILDREN'S HOLIDAY SCHEDULE ATTACHMENT

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

1. **Holiday parenting.** The following table shows the holiday parenting schedules. Write "Petitioner," "Respondent," "Other Parent," or "Other Party" to specify each parent's (or party's) years—odd or even numbered years or both ("every year")—and under "Times," specify the starting and ending days and times.

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

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

<b>PETITIONER:</b> <b>RESPONDENT:</b> <b>OTHER PARENT/PARTY:</b>	<b>CASE NUMBER:</b>
--	---------------------

## 1. Holiday parenting (continued)

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:	CASE NUMBER:
RESPONDENT:	
OTHER PARENT/PARTY:	

## 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**

a. Each parent's monthly income is as follows:	Gross monthly income	Net monthly income	Receiving TANF/CalWORKs
	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.

Page 1 of 3

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

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:	CASE NUMBER:
RESPONDENT:	
OTHER PARENT/PARTY:	

#### 7. Health care expenses

- 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.
- Health insurance is not available to the  petitioner  respondent  other parent/party at a reasonable cost at this time.
- 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.

- 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

- Notice of Rights and Responsibilities Regarding Child Support* (form [FL-192](#)) must be attached and is incorporated into this order.
- 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:	CASE NUMBER:
RESPONDENT:	
OTHER PARENT/PARTY:	

### 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):

# 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

- 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.

- 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.

- 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.

- If released before January 1, 2024,** child support automatically restarts the first day of the first full month after the parent is released.
- 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.

- 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).

## Aviso de derechos y responsabilidades

### Costos de cuidado de la salud y procedimientos de reembolso

**Si tiene una orden de manutención de los hijos que disponga el reembolso de una parte de los costos de la atención de la salud del menor (o menores) y dichos costos no son pagados por el seguro, la ley dice lo siguiente:**

**1. Aviso.** Tiene que darle al otro parente una factura detallada de los cargos cobrados por los servicios de salud que no fueron pagados por el seguro. Le tiene que dar esa factura al otro parente dentro de un periodo de tiempo razonable, y no más tarde de 30 días después de haber recibido dichos costos.

**2. Comprobante de pago total.** Si ya pagó todos los costos de atención de la salud no cubiertos por el seguro, tiene que: (1) darle al otro parente un comprobante de haberlos pagado y (2) pedirle que le reembolse la porción que le corresponde conforme a la orden de la corte.

**3. Comprobante de pago parcial.** Si solo pagó la porción que le corresponde de los costos no cubiertos por el seguro, debe: (1) darle al otro parente un comprobante indicando que ya pagó dicha porción; (2) pedirle al otro parente que pague directamente al proveedor de servicios de salud la parte de los costos que le corresponde, y (3) darle al otro parente la información necesaria para que pague la factura.

**4. Pago por parte del parente notificado.** Si usted recibe una notificación del otro parente indicando que se ha incurrido un costo no cubierto por el seguro de salud, deberá pagar la porción que le corresponde a usted dentro del plazo ordenado por la corte, o si la corte no especifica un plazo, deberá pagar dichos costos ya sea (1) a más tardar en 30 días desde la fecha en que recibió la notificación sobre el monto a pagar, (2) según el programa de pagos fijado por el proveedor de servicios de salud, (3) según un programa de pagos acordado por escrito entre usted y el otro parente, o (4) según el programa de pagos adoptado por la corte.

**5. Cargos disputados.** Si disputa un costo, puede presentar a la corte una petición para resolver la disputa. Solo podrá hacer esto si paga el costo antes de presentar la petición. Si su reclamo consiste en que la otra parte no le ha rembolsado un pago que efectuó, o que no le ha pagado al proveedor de servicios de salud después de la notificación apropiada, puede presentar una petición ante la corte para resolver la disputa. La corte supondrá que si los costos ya se han pagado, dichos costos han sido razonables. Si una persona se comporta de una manera que no sea razonable, la corte puede ordenarle que pague los honorarios de abogado.

**6. Cobertura de seguro por orden de la corte.** Si un parente paga por el seguro de salud por orden de la corte, ese seguro se usará todo el tiempo, siempre que esté disponible para cubrir los costos de servicios de salud.

**a. Carga de la prueba.** La parte que alega que la cobertura es inadecuada para cumplir con las necesidades del menor tiene la carga de probarlo en la corte.

**b. Costo de cobertura adicional.** Si uno de los padres compra un seguro de salud adicional al que haya sido ordenado por la corte, ese parente deberá pagar todos los costos de la cobertura adicional. Además, si uno de los padres usa una cobertura alternativa que cuesta más que la cobertura ordenada por la corte, dicho parente tendrá que pagar la diferencia.

**7. Proveedores de salud preferidos.** Si la orden de la corte especifica un proveedor de salud preferido, dicho proveedor se tiene que usar siempre, conforme a los términos de la póliza del seguro de salud. Si una parte usa un proveedor que no sea el preferido, los costos de servicios de salud que podrían haber sido cubiertos por el proveedor preferido si se hubiera usado serán la responsabilidad de la parte que haya incurrido dichos costos.

## Hoja informativa sobre cómo cambiar una orden de manutención de los hijos

### Información general

La corte acaba de dictar una orden de manutención de los hijos en su caso. Esta orden permanecerá igual a menos que una de las partes del caso pida que se cambie (modifique). Una orden de manutención de los hijos solo se puede modificar si se presenta una petición para cambiar la manutención de los hijos y si se hace la entrega legal a todas las partes del caso. Si ambos padres y la agencia local de manutención de los hijos, si corresponde, están de acuerdo sobre un nuevo monto, puede llenar y hacer que cada parte firme una *Estipulación para establecer o modificar una orden de manutención de los hijos* y *Orden* (formulario FL-350) o una *Estipulación y Orden (Gubernamental)* (formulario FL-625).

### Cuándo se puede modificar una orden de manutención de los hijos

La corte toma en consideración varios factores al dictar una orden de manutención de los hijos. Primero, se considera el número de hijos. Luego, se determinan los ingresos de ambos padres, así como el porcentaje del tiempo que cada padre tiene la custodia física de los hijos. La corte considera el estado tributario de ambas partes y puede tener en cuenta factores de dificultad económica, como por ejemplo un hijo de otra relación. Se puede modificar la orden de manutención de los hijos actual si hay un cambio considerable en los ingresos netos de uno de los padres, un cambio considerable en el tiempo que los menores pasan con cada uno de los padres, o si nace un nuevo hijo.

#### Ejemplos:

- Si le ordenaron pagar \$500 mensuales de manutención de los hijos y luego pierde su empleo, continuará debiendo \$500 mensuales. Además deberá pagar el 10% de interés sobre la manutención impaga a menos que presente una petición pidiendo que se modifique y se reduzca la suma de manutención y que la corte ordene dicha reducción.
- Si está recibiendo \$300 mensuales por manutención de los hijos provenientes del otro parente y los ingresos de ese parente aumentan considerablemente, usted continuará recibiendo \$300 mensuales, a menos que presente una petición para modificar la orden y que la corte ordene el aumento de la suma de manutención de los hijos.
- Si paga manutención de los hijos basándose en que tiene la custodia física de sus hijos un 30% del tiempo, y después de varios meses resulta que en efecto pasa el 50% del tiempo a cargo de la custodia física de sus hijos, podrá presentar una petición pidiendo que se reduzca la suma de manutención.

### Cómo modificar una orden de manutención de los hijos

Para modificar una orden de manutención de los hijos, debe presentar documentos ante la corte. *Recuerde:* tiene que obedecer la orden en existencia.

#### ¿Qué formularios necesito?

Si está pidiendo que la corte modifique una orden de manutención de los hijos para un caso abierto por la agencia local de manutención de los hijos, tiene que llenar uno de estos formularios:

- FL-680, *Aviso de petición (Gubernamental)* o FL-683 *Orden de presentar motivos justificativos (Gubernamental)* y
- FL-684, *Solicitud de orden y Declaración de respaldo (Gubernamental)*

Si está pidiendo que la corte modifique una orden de manutención para un caso **no** abierto por la agencia local de manutención de los hijos, tiene que llenar uno de estos formularios:

- FL-300, *Aviso de petición* o
- FL-390, *Aviso de petición y Petición de modificación simplificada de orden de manutención de los hijos, del cónyuge o familiar*

También tiene que llenar uno de estos formularios:

- FL-150, *Declaración sobre ingresos y gastos* o FL-155, *Declaración financiera (Simplificada)*

**¿Qué hago si no sé qué formulario llenar?** Hable con el Asistente de derecho familiar de su corte.

**Después de llenar los formularios**, preséntelos en la corte y pida una fecha de audiencia. Ponga la fecha de su audiencia en su formulario. El secretario le pedirá que pague la cuota de presentación. Si no puede pagar la cuota, llene también estos formularios:

- Formulario FW-001, *Solicitud de exención de cuotas de la corte*
- Formulario FW-003, *Orden sobre exención de cuotas de la corte (Corte superior)*

**Tiene que hacer la entrega legal al otro parente.** Si la agencia local de manutención de los hijos participa en el caso, entregue también los documentos a esa agencia. Esto significa que una persona de al menos 18 años de edad - **no usted** - debe entregar copias de los formularios de la corte presentados por lo menos **16 días judiciales** antes de la audiencia. Agregue **5 días de calendario** si la entrega se hace por correo dentro de California (vea el Código de Procedimientos Civiles, sección 1005 para otras situaciones). Los **días judiciales** son los días en que atiende la corte (lunes a viernes, excepto los días feriados). Los **días de calendario** son todos los días de la semana, incluyendo los fines de semana y los días feriados. Para saber cuáles son los días feriados de la corte, visite: [www.courts.ca.gov/holidays.htm](http://www.courts.ca.gov/holidays.htm).

La persona que hace la entrega legal también tiene que entregar copias de estos formularios en blanco:

- FL-320, *Declaración de respuesta a la solicitud de orden* y FL-150 *Declaración sobre ingresos y gastos*, o
- FL-155, *Declaración financiera (Simplificada)*

**Vaya a su audiencia y pida al juez que modifique la manutención.** Lleve consigo sus formularios más recientes de declaración de impuestos de los últimos dos años y sus talones de pago de los últimos dos meses. El juez examinará su información, escuchará a ambos padres y dictará una orden. Después de la audiencia, llene:

- FL-340, *Determinaciones y Orden después de la audiencia* y
- FL-342, *Adjunto: Orden e información de manutención de los hijos*

**¿Necesita ayuda?** Hable con el Asistente de derecho familiar de su condado o llame al colegio de abogados de su condado y pida un abogado con experiencia en derecho familiar.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):

COURT PERSONNEL:  
STAMP DATE RECEIVED HERE

DO NOT FILE

TELEPHONE NO.:

FAX NO. (Optional):

E-MAIL ADDRESS (Optional):

ATTORNEY FOR (Name):

**SUPERIOR COURT OF CALIFORNIA, COUNTY OF**

STREET ADDRESS:

MAILING ADDRESS:

CITY AND ZIP CODE:

BRANCH NAME:

PETITIONER/PLAINTIFF:

RESPONDENT/DEFENDANT:

OTHER PARENT:

**CHILD SUPPORT CASE REGISTRY FORM** Mother Father First form completed Change to previous information

CASE NUMBER:

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

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

1. Support order information (this information is on the court order you are filing or have received).

a. Date order filed:

b.  Initial child support or family support order  Modification

c. Total monthly base current child or family support amount ordered for children listed below, plus any monthly amount ordered payable on past-due support:

Child Support:

(1)  Current \$  
base child support:  Reserved order  
 \$0 (zero) order

(2)  Additional \$  
monthly support:

(3)  Total \$  
past-due support:

(4)  Payment \$  
on past-  
due support:

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

Family Support:

Current \$  
base family support:  Reserved order  
 \$0 (zero) order

Additional \$  
monthly support:

Total \$  
past-due support:

Payment \$  
on past-  
due support:

Spousal Support:

Current \$  
spousal support:  Reserved order  
 \$0 (zero) order

Total \$  
past-due support:

Payment \$  
on past-  
due support:

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:
---	--------------

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

Child's name      Date of birth      Social security number

a.  
b.  
c.

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

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

5. Father's name:

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

6. Mother's name:

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.

- List your date of birth.
- Write your social security number.
- List the street address, city, state, and zip code where you live.
- List the street address, city, state, and zip code where you want your mail sent, if different from the address where you live.
- Write your driver's license number and the state where it was issued.
- List the telephone number where you live.
- 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.

- Check the box beside each person who is protected by the restraining order.
- Check the box beside the parent who is restrained.
- 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.