



**SUPERIOR COURT OF CALIFORNIA
COUNTY OF ORANGE
SELF-HELP CENTER**

www.occourts.org

**STIPULATED JUDGMENT FOR DISSOLUTION
OR LEGAL SEPARATION OF MARRIAGE
OR DOMESTIC PARTNERSHIP (WITH CHILDREN)**

All documents must be typed or printed neatly.

Please use black ink.

Self-Help Center Locations:

Lamoreaux Justice Center

1st Floor

341 The City Drive

Orange, CA



Central Justice Center

Room G-100

700 Civic Center Drive

Santa Ana, CA



Superior Court

Service Center

27573 Puerta Real

Mission Viejo, CA

Harbor Justice Center

Room 150

4601 Jamboree Rd

Newport Beach, CA

North Justice Center

Room 360

1275 N. Berkeley Ave.

Fullerton, CA



ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, State Bar number, and address):</i> TELEPHONE NO.: _____ FAX NO. <i>(Optional):</i> _____ E-MAIL ADDRESS <i>(Optional):</i> _____ ATTORNEY FOR <i>(Name):</i> _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE STREET ADDRESS: 341 THE CITY DRIVE MAILING ADDRESS: CITY AND ZIP CODE: ORANGE, CA 92868 BRANCH NAME: LAMOREAUX JUSTICE CENTER	
PETITIONER: RESPONDENT:	
JUDGMENT CHECKLIST— DISSOLUTION/LEGAL SEPARATION	CASE NUMBER:

This judgment checklist is a list of documents that a court may require to complete a default or uncontested judgment. The checklist may be filed along with your judgment, but is not required. If the forms or other documents have already been filed, you should check the boxes indicating that they have been previously filed. Unless listed otherwise on this form, when you file a document with the court, you should submit an original and 2 copies. One copy is for you and one is for the other party. There are three types of default and uncontested judgments:

- **Default With No Agreement (no response and no written agreement)**
- **Default With Agreement (no response, but there is a written agreement)**
- **Uncontested Case (response filed, or other appearance by respondent, and a written agreement)**

1. **DEFAULT WITH NO AGREEMENT (no response and no written agreement)**
(Please check the box by each document being filed) Previously Filed
- | | |
|---|--------------------------|
| a. <input type="checkbox"/> <i>Proof of Service of Summons</i> (form FL-115) or other proof of service | <input type="checkbox"/> |
| b. <input type="checkbox"/> <i>Request to Enter Default</i> (form FL-165), with a stamped envelope addressed to respondent and the court clerk's address as the return address | <input type="checkbox"/> |
| c. <input type="checkbox"/> <i>Petitioner's Declaration Regarding Service of Declaration of Disclosure</i> (form FL-141) | <input type="checkbox"/> |
| d. <input type="checkbox"/> <i>Declaration for Default or Uncontested Dissolution or Legal Separation</i> (form FL-170) | |
| e. <input type="checkbox"/> <i>Judgment</i> (form FL-180) (5 copies) | |
| f. <input type="checkbox"/> <i>Notice of Entry of Judgment</i> (form FL-190) | |
| g. <input type="checkbox"/> 2 stamped envelopes of sufficient size and with sufficient postage to return the <i>Judgment</i> and <i>Notice of Entry of Judgment</i> , one envelope addressed to petitioner and the other to respondent. | |
- If there are minor children of the marriage or domestic partnership:**
- | | |
|---|--------------------------|
| h. <input type="checkbox"/> <i>Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)</i> (form FL-105).
<i>(A new form must be filed if there have been any changes since the one most recently filed.)</i> | <input type="checkbox"/> |
| i. <input type="checkbox"/> <i>Petitioner's Income and Expense Declaration</i> (form FL-150) or <i>Financial Statement (Simplified)</i> (form FL-155). <i>(Needed unless one has been filed within the past 90 days and there have been no changes since then.)</i> | <input type="checkbox"/> |
| j. <input type="checkbox"/> Computer printout of guideline child support <i>(optional)</i> | |
| k. <input type="checkbox"/> <i>Notice of Rights and Responsibilities and Information Sheet on Changing a Child Support Order</i> (form FL-192). This may be attached by the petitioner or by the court. | |

PETITIONER:	CASE NUMBER:
RESPONDENT:	

Previously Filed

- l. Child Support Order
 - Stipulation to Establish or Modify Child Support and Order (form FL-350) (attach to Judgment), or
 - Child Support Information and Order Attachment (form FL-342) (attach to Judgment), or
 - Written agreement containing declarations required by Family Code section 4065(a) (attach to Judgment)
- m. Income Withholding for Support (form FL-195/OMB No. 0970-0154)
- n. Child Custody and Visitation (Parenting Time) Order Attachment (form FL-341) or other proposed written order containing the information required by Family Code 3048(a) (attach to Judgment)

If spousal/partner support is requested, the marriage/partnership is over 10 years in duration, or termination of spousal/partner support for the respondent is requested:

- o. Spousal or Partnership Support Declaration Attachment (form FL-157)
- p. Income and Expense Declaration (form FL-150) (Needed unless a current financial declaration has been filed within the past 90 days and there have been no changes since then.)
- q. Spousal, Partner, or Family Support Order Attachment (form FL-343) or other proposed written order (attach to Judgment)

If assets or debts need to be divided or assigned:

- r. Property Declaration (form FL-160)
- s. Property Order Attachment to Judgment (form FL-345) or other proposed written order (attach to Judgment)

If attorney fees and costs are requested:

- t. Request for Attorney Fees and Costs (form FL-319)
- u. Attorney Fees and Costs Order Attachment (form FL-346) or other proposed written order (attach to Judgment)

2. **DEFAULT WITH AGREEMENT (no response and a written agreement)**

- a. Proof of Service of Summons (form FL-115) or other proof of service
- b. Request to Enter Default (form FL-165), with a stamped envelope addressed to respondent and the court clerk's address as the return address
- c. Petitioner's Declaration Regarding Service of Declaration of Disclosure (form FL-141) (preliminary)
- d. Declaration Regarding Service of Final Declaration of Disclosure
 - Petitioner's Declaration Regarding Service of Declaration of Disclosure (form FL-141) (final) or
 - Stipulation and Waiver of Final Declaration of Disclosure (form FL-144) or
 - Separately filed waiver or waiver included in a written agreement under Family Code section 2105(d)
- e. Declaration for Default or Uncontested Dissolution or Legal Separation (form FL-170)
- f. Written agreement of the parties. Respondent's signature on the agreement must be notarized. (attach to Judgment.)
- g. Judgment (form FL-180) (5 copies)
- h. Notice of Entry of Judgment (form FL-190)
- i. 2 stamped envelopes of sufficient size and with sufficient postage to return the Judgment and Notice of Entry of Judgment, one envelope addressed to petitioner and the other to respondent

If there are minor children of the marriage or domestic partnership:

- j. Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) (form FL-105). (A new form must be filed if there have been any changes since the one most recently filed.)
- k. Income and Expense Declaration (form FL-150) or Financial Statement (Simplified) (form FL-155). (Needed unless one has been filed within the past 90 days and there have been no changes since then.)

PETITIONER:	CASE NUMBER:
RESPONDENT:	

Previously Filed

- l. Computer printout of guideline child support (*optional*).
- m. *Notice of Rights and Responsibilities and Information Sheet on Changing a Child Support Order* (form FL-192). This may be attached by the petitioner or by the court.
- n. Child Support Order
 - Stipulation to Establish or Modify Child Support and Order* (form FL-350) (*attach to Judgment*), or
 - Child Support Information and Order Attachment* (form FL-342) (*attach to Judgment*), or
 - Written agreement containing declarations required by Family Code section 4065(a) (*attach to Judgment*)
- o. *Income Withholding for Support* (form FL-195/OMB No. 0970-0154)
- p. *Child Custody and Visitation Order Attachment* (form FL-341) or written agreement containing the information required by Family Code section 3048(a) (*attach to Judgment*)

3. **UNCONTESTED CASE (Response filed, or other appearance by respondent, and a written agreement)**

- a. *Proof of Service of Summons* (form FL-115) or other proof of service if you want to use the date of service as the beginning of the six-month waiting period.
- b. *Appearance, Stipulations, and Waivers* (form FL-130)
- c. Respondent's filing fee, if first appearance, unless respondent has a fee waiver or is currently on active duty in the military
- d. *Declaration Regarding Service of Declaration of Disclosure* (**both** petitioner's and respondent's preliminary) (form FL-141)
- e. Declaration Regarding Service of Final Declaration of Disclosure
 - Declaration Regarding Service of Declaration of Disclosure* (**both** petitioner's and respondent's final) (form FL-141), or
 - Stipulation and Waiver of Final Declaration of Disclosure* (form FL-144), or
 - Separately filed waiver or waiver included in a written agreement under Family Code section 2105(d)
- f. *Declaration for Default or Uncontested Dissolution or Legal Separation* (form FL-170)
- g. Written agreement of the parties (*attach to Judgment*)
- h. *Judgment* (form FL-180) (*5 copies*)
- i. *Notice of Entry of Judgment* (form FL-190)
- j. 2 stamped envelopes of sufficient size and with sufficient postage to return the *Judgment* and *Notice of Entry of Judgment*, one envelope addressed to petitioner and the other to respondent

If there are minor children of the marriage or domestic partnership:

- k. *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)* (form FL-105).
(*A new form must be filed if there have been any changes since the one most recently filed.*)
- l. Computer printout of guideline child support (*optional*)
- m. *Notice of Rights and Responsibilities and Information Sheet on Changing a Child Support Order* (form FL-192). This may be attached by either party or by the court.
- n. Child Support Order
 - Stipulation to Establish or Modify Child Support and Order* (form FL-350) (*attach to Judgment*) or
 - Child Support Information and Order Attachment* (form FL-342) (*attach to Judgment*), or
 - Written agreement which includes declarations required by Family Code section 4065(a) (*attach to Judgment*)
- o. *Income Withholding for Support* (form FL-195/OMB No. 0970-0154)
- p. *Child Custody and Visitation Order Attachment* (form FL-341) or written agreement containing the information required by Family Code section 3048(a) (*attach to Judgment*)

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, State Bar number, and address):</i> TELEPHONE NO.: _____ FAX NO. <i>(Optional):</i> _____ E-MAIL ADDRESS <i>(Optional):</i> _____ ATTORNEY FOR <i>(Name):</i> _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE STREET ADDRESS: 341 THE CITY DRIVE MAILING ADDRESS: CITY AND ZIP CODE: ORANGE, CA 92868 BRANCH NAME: LAMOREAUX JUSTICE CENTER	
PETITIONER: RESPONDENT:	
APPEARANCE, STIPULATIONS, AND WAIVERS	CASE NUMBER:

1. **Appearance by respondent** *(you must choose one):*

- a. By filing this form, I make a general appearance.
- b. I have previously made a general appearance.
- c. I am a member of the military services of the United States of America. I have completed and attached to this form *Declaration and Conditional Waiver of Rights Under the Servicemembers Civil Relief Act of 2003 (form FL-130(A))*.

2. **Agreements, stipulations, and waivers** *(choose all that apply):*

- a. The parties agree that this cause may be decided as an uncontested matter.
- b. The parties waive their rights to notice of trial, a statement of decision, a motion for new trial, and the right to appeal.
- c. This matter may be decided by a commissioner sitting as a temporary judge.
- d. The parties have a written agreement that will be submitted to the court, or a stipulation for judgment will be submitted to the court and attached to *Judgment (Family Law)* (form FL-180).
- e. None of these agreements or waivers will apply unless the court approves the stipulation for judgment or incorporates the written settlement agreement into the judgment.
- f. This is a parentage case, and both parties have signed an *Advisement and Waiver of Rights Re: Establishment of Parental Relationship* (form FL-235) or its equivalent.

3. **Other** *(specify):*

Date: _____

 (TYPE OR PRINT NAME)

▶

 (SIGNATURE OF PETITIONER)

▶

 (SIGNATURE OF RESPONDENT)

▶

 (SIGNATURE OF ATTORNEY FOR PETITIONER)

▶

 (SIGNATURE OF ATTORNEY FOR RESPONDENT)

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): <hr/> <p style="text-align: center;">TELEPHONE NO.: _____ FAX NO. (<i>Optional</i>): _____</p> <p>E-MAIL ADDRESS (<i>Optional</i>): _____</p> <p>ATTORNEY FOR (<i>Name</i>): _____</p>	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE STREET ADDRESS: 341 THE CITY DRIVE MAILING ADDRESS: CITY AND ZIP CODE: ORANGE, CA 92868 BRANCH NAME: LAMOREAUX JUSTICE CENTER	
PLAINTIFF/ PETITIONER: DEFENDANT/ RESPONDENT: OTHER:	
STIPULATION AND WAIVER OF FINAL DECLARATION OF DISCLOSURE	CASE NUMBER: _____

1. Under Family Code section 2105(d), the parties agree to waive the requirements of Family Code section 2105(a) concerning the final declaration of disclosure.

2. The parties agree as follows:

- a. We have complied with Family Code section 2104, and the preliminary declarations of disclosure have been completed and exchanged.
- b. We have completed and exchanged a current *Income and Expense Declaration* (form FL-150) that includes all material facts and information on each party's earnings, accumulations, and expenses.
- c. We have fully complied with Family Law section 2102 and have fully augmented the preliminary declarations of disclosure, including disclosure of all material facts and information on
 - (1) the characterization of all assets and liabilities,
 - (2) the valuation of all assets that are community property or in which the community has an interest, and
 - (3) the amounts of all community debts and obligations.
- d. Each of the parties enters into this waiver knowingly, intelligently, and voluntarily.
- e. Each party understands that this waiver does not limit the legal disclosure obligations of the parties but rather is a statement under penalty of perjury that those obligations have been fulfilled.
- f. The parties also understand that if they do not comply with these obligations, the court will set aside the judgment.

The petitioner and respondent declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF PETITIONER)

(TYPE OR PRINT NAME)

(SIGNATURE OF RESPONDENT)

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): <hr/> TELEPHONE NO.: _____ FAX NO. (<i>Optional</i>): _____ E-MAIL ADDRESS (<i>Optional</i>): _____ ATTORNEY FOR (<i>Name</i>): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE STREET ADDRESS: 341 THE CITY DRIVE MAILING ADDRESS: CITY AND ZIP CODE: ORANGE, CA 92868 BRANCH NAME: LAMOREAUX JUSTICE CENTER	
PETITIONER: RESPONDENT:	
DECLARATION FOR DEFAULT OR UNCONTESTED <input type="checkbox"/> DISSOLUTION <input type="checkbox"/> LEGAL SEPARATION	CASE NUMBER: _____

(NOTE: Items 1 through 12 apply to both dissolution and legal separation proceedings.)

1. I declare that if I appeared in court and were sworn, I would testify to the truth of the facts in this declaration.
2. I agree that my case will be proven by this declaration and that I will not appear before the court unless I am ordered by the court to do so.
3. All the information in the amended *Petition* *Response* is true and correct.
4. **Type of case** (*check a, b, or c*):
 - a. **Default without agreement**
 - (1) No response has been filed and there is no written agreement or stipulated judgment between the parties;
 - (2) The default of the respondent was entered or is being requested, and I am not seeking any relief not requested in the petition; and
 - (3) The following statement is true (*check one*):
 - (A) There are no assets or debts to be disposed of by the court.
 - (B) The community and quasi-community assets and debts are listed on the **completed** current *Property Declaration* (form FL-160), which includes an estimate of the value of the assets and debts that I propose to be distributed to each party. The division in the proposed *Judgment* (form FL-180) is a fair and equal division of the property and debts, or if there is a negative estate, the debts are assigned fairly and equitably.
 - b. **Default with agreement**
 - (1) No response has been filed and the parties have agreed that the matter may proceed as a default matter without notice; and
 - (2) The parties have entered into a written agreement regarding their property and their marriage or domestic partnership rights, including support, the original of which is being or has been submitted to the court. I request that the court approve the agreement.
 - c. **Uncontested**
 - (1) Both parties have appeared in the case; and
 - (2) The parties have entered into a written agreement regarding their property and their marriage or domestic partnership rights, including support, the original of which is being or has been submitted to the court. I request that the court approve the agreement.
5. **Declaration of disclosure** (*check a, b, or c*):
 - a. Both the petitioner and respondent have filed, or are filing concurrently, a *Declaration Regarding Service of Declaration of Disclosure* (form FL-141) and an *Income and Expense Declaration* (form FL-150).
 - b. This matter is proceeding by default. I am the petitioner in this action and have filed a proof of service of the preliminary *Declaration of Disclosure* (form FL-140) with the court. I hereby waive receipt of the final *Declaration of Disclosure* (form FL-140) from the respondent.
 - c. This matter is proceeding as an uncontested action. Service of the final *Declaration of Disclosure* (form FL-140) is mutually waived by both parties. A waiver provision executed by both parties under penalty of perjury is contained on the *Stipulation and Waiver of Final Declaration of Disclosure* (form FL-144), in the settlement agreement or proposed judgment or another, separate stipulation.

PETITIONER: RESPONDENT:	CASE NUMBER:
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6. **Child custody and visitation (parenting time)** should be ordered as set forth in the proposed *Judgment* (form FL-180).
- a. The information in *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act* (UCCJEA) (form FL-105) has has not changed since it was last filed with the court. *(If changed, attach updated form.)*
 - b. There is an existing court order for custody/parenting time in another case in *(county)*:
The case number is *(specify)*:
 - c. The current custody and visitation (parenting time) previously ordered in this case, or current schedule is *(specify)*:
 Contained on Attachment 6c.
 - d. Facts in support of requested judgment *(In a default case, state your reasons below)*:
 Contained on Attachment 6d.

7. **Child support** should be ordered as set forth in the proposed *Judgment* (form FL-180).
- a. If there are minor children, check and complete item (1) if applicable and item (2) or (3):
 - (1) Child support is being enforced in another case in *(county)*:
The case number is *(specify)*:
 - (2) The information in the child support calculation attached to the proposed judgment is correct based on my personal knowledge.
 - (3) I request that this order be based on the petitioner's respondent's earning ability. The facts in support of my estimate of earning ability are *(specify)*:
 Continued on Attachment 7a(3).

- b. Complete items (1) and (2) regarding public assistance.
 - (1) I am receiving am not receiving intend to apply for public assistance for the child or children listed in the proposed order.
 - (2) To the best of my knowledge, the other party is is not receiving public assistance.
- c. The petitioner respondent is presently receiving public assistance, and all support should be made payable to the local child support agency at the address set forth in the proposed judgment. A representative of the local child support agency has signed the proposed judgment.

8. **Spousal, Partner, and Family Support** *(If a support order or attorney fees are requested, submit a completed Income and Expense Declaration (form FL-150) unless a current form is on file. Include your best estimate of the other party's income. Check at least one of the following.)*
- a. I knowingly give up forever any right to receive spousal or partner support.
 - b. I ask the court to reserve jurisdiction to award spousal or partner support in the future to *(name)*:
 - c. I ask the court to terminate forever spousal or partner support for: petitioner respondent.
 - d. Spousal support or domestic partner support should be ordered as set forth in the proposed *Judgment* (form FL-180) based on the factors described in:
 - Spousal or Partner Support Declaration Attachment* (form FL-157)
 - written agreement
 - attached declaration *(Attachment 8d.)*
 - e. Family support should be ordered as set forth in the proposed *Judgment* (form FL-180).
 - f. Other *(specify)*:

PETITIONER: RESPONDENT:	CASE NUMBER:
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9. **Parentage** of the children of the petitioner and respondent born prior to their marriage or domestic partnership should be ordered as set forth in the proposed *Judgment* (form FL-180).
- a. A Voluntary Declaration of Paternity is attached.
- b. Parentage was previously established by the court in (*county*):
 The case number is (*specify*):
 Written agreement of the parties attached here or to the *Judgment* (form FL-180).
10. **Attorney fees** should be ordered as set forth in the proposed *Judgment* (form FL-180)
 facts in support in form FL-319
 other (*specify facts below*):
11. The judgment should be entered nunc pro tunc for the following reasons (*specify*):
12. The petitioner respondent requests restoration of his or her former name as set forth in the proposed *Judgment* (form FL-180).
13. There are irreconcilable differences that have led to the irremediable breakdown of the marriage or domestic partnership, and there is no possibility of saving the marriage or domestic partnership through counseling or other means.
14. This declaration may be reviewed by a commissioner sitting as a temporary judge, who may determine whether to grant this request or require my appearance under Family Code section 2336.

STATEMENTS IN THIS BOX APPLY ONLY TO DISSOLUTIONS

15. If this is a dissolution of marriage or of a domestic partnership created in another state, the petitioner and/or the respondent have been residents of this county for at least three months and of the state of California for at least six months continuously and immediately preceding the date of the filing of the petition for dissolution of marriage or domestic partnership.
16. I ask that the court grant the request for a judgment for dissolution of marriage or domestic partnership based on irreconcilable differences and that the court make the orders set forth in the proposed *Judgment* (form FL-180) submitted with this declaration.
17. This declaration is for the termination of **marital or domestic partner status only**. I ask the court to reserve jurisdiction over all issues whose determination is not requested in this declaration.

THIS STATEMENT APPLIES ONLY TO LEGAL SEPARATIONS

18. I ask that the court grant the request for a judgment for legal separation based on irreconcilable differences and that the court make the orders set forth in the proposed *Judgment* (form FL-180) submitted with this declaration.
- I understand that a judgment of legal separation does not terminate a marriage or domestic partnership and that I am still married or a partner in a domestic partnership.**

19. Other (*specify*):

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

Date:

 (TYPE OR PRINT NAME)



 (SIGNATURE OF DECLARANT)

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARTY:	CASE NUMBER:
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SPOUSAL OR PARTNER SUPPORT DECLARATION ATTACHMENT

- Declaration for Default or Uncontested Judgment (form FL-170)**
 Supporting Declaration for Attorney's Fees and Costs Attachment (form FL-158)
 Other (specify):

1. **Spousal or domestic partner support.** I request that the court (*check all that apply*):

- a. Enter a judgment for spousal or domestic partner support for Petitioner Respondent.
 b. Modify the judgment for spousal or domestic partner support for Petitioner Respondent.
 c. Deny the request to modify the judgment for spousal or domestic partner support.
 d. Terminate jurisdiction to award spousal or domestic partner support to Petitioner Respondent.

2. **Attorney fees and costs.** I request that the court (*check one*):

- a. Order my attorney fees and costs to be paid by my spouse or domestic partner a joined party (*specify*):
 b. Deny the request for attorney fees and costs.

3. The facts in support of my request are:

a. **Family Code section 4320(a)(1)**

(1) The supported party has the following training, job skills, and work history:

(2) The current job market for the job skills of the supported party described in item 3a(1) is:

(3) The supported party would need the following time and expense to acquire the education or training to develop the job skills described in item 3a(1):

(4) To develop other, more marketable job skills or employment, the supported party would need the following retraining or education:

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARTY:	CASE NUMBER:
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3. Facts in support of request.

b. **Family Code section 4320(a)(2)**

Provide any facts that indicate the supported party's earning ability is, or is not, lower than it might be if he or she had not had periods of unemployment because of the time needed to attend to domestic duties (*explain*):

c. **Family Code section 4320(b)**

Provide any facts that indicate that the supported party contributed to the education, training, career position, or license of the supporting party.

d. **Family Code section 4320(c)**

(1) The supporting party does does not have the ability to pay spousal or domestic partner support.

(2) The supporting party's current gross income from employment or self-employment is (*specify*):

(3) The supporting party's current income from investments, retirement, other sources is (*specify*):

(4) The supporting party's current assets and their values and balances are (*specify*):

(5) The supporting party's standard of living is (*describe, for example, type and frequency of vacations, value of home and other real estate, value of investments, type of vehicles owned, credit card use or nonuse*):

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

3. Facts in support of request.

e. **Family Code section 4320(d)**

The supported party does does not need support to maintain the standard of living we enjoyed during the marriage or domestic partnership.

f. **Family Code Section 4320(e)**

(1) The supported party's assets and obligations, including separate property, are *(list values and balances)*:

(2) The supporting party's assets and obligations, including separate property, are *(list values and balances)*:

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARTY:	CASE NUMBER:
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3. Facts in support of request.

g. **Family Code section 4320(f)**

Length of marriage or domestic partnership (*specify*):

h. **Family Code section 4320(g)**

Provide any facts indicating whether or not the supported party is able to work without unduly interfering with the interests of the children in his or her care (*describe*):

i. **Family Code section 4320(h)**

- (1) Petitioner's age is (*specify*): _____ Respondent's age is (*specify*): _____
- (2) Petitioner's current health condition is (*describe*): _____
- (3) Respondent's current health condition is (*describe*): _____

j. **Additional factors (Family Code sections 4320(i)–(n))**

The court will also consider the following factors before making a judgment for spousal or domestic partner support:

- (1) Any documented evidence of domestic violence between the parties as defined in Family Code section 6211.
- (2) The immediate and specific tax consequences for each party;
- (3) The balance of the hardships on each party;
- (4) The criminal conviction of an abusive spouse in reducing or eliminating support in accordance with Family Code section 4325;
- (5) The goal that the supported party will be self-supporting within a reasonable period of time; and
- (6) Any other factors the court determines are just and equitable.

Describe below any additional information that will assist the court in considering the above factors:

EXPEDITED PROCESSING ATTACHMENT AND STIPULATION TO DISSOLUTION OR SEPARATION JUDGMENT	CASE NUMBER:
WARNING: This Attachment only includes the minimum statutory requirements at the time of entry of judgment. It does not replace the stipulated judgment or other required documents.	

I. DISCLOSURE PURSUANT TO FC §§ 2104, 2105

The parties have fully complied with the disclosure requirements of FC §§2102, 2104 and 2105

a. Preliminary Declaration of Disclosures Pursuant to FC §2104

Petitioner filed the Preliminary Declaration of Service (FL-141) on: _____
Submitted with Judgment

Respondent filed the Preliminary Declaration of Service (FL-141) on: _____
Submitted with Judgment

b. Final Declaration of Disclosures Pursuant to FC §2105

Petitioner filed the Final Declaration of Service (FL-141) on: _____
Submitted with Judgment

Respondent filed the Final Declaration of Service (FL-141) on: _____
Submitted with Judgment

Mutually Waived by:

use of Stipulation and Waiver of Final Declaration of Disclosure Form (FL-144)
Filed on: _____
Submitted with Judgment

use of the statutory language in a separate stipulation, signed under penalty of perjury
Stipulation submitted with Judgment
See page _____ of Judgment

II. SPOUSAL SUPPORT PURSUANT TO FC §4336

The parties had a marriage of 10 years or more, from the date of marriage to the date of separation, and spousal support has been addressed in the Marital Settlement Agreement/Stipulated Judgment.

The parties had a marriage of less than 10 years, from the date of marriage to the date of separation, and spousal support has been addressed in the Marital Settlement Agreement/Stipulated Judgment.

The Parties agree to terminate the court’s jurisdiction (ability) to award spousal support. Both parties knowingly give up forever any right to receive spousal or partner support.

IF THERE ARE MINOR OR DEPENDENT CHILDREN OF THE MARRIAGE, COMPLETE SECTIONS III AND IV, OTHERWISE PROCEED DIRECTLY TO SECTION V, ON PAGE 5 OF THIS FORM

THERE ARE NO MINOR OR DEPENDENT CHILDREN OF THIS MARRIAGE.

III. CHILD CUSTODY/VISITATION PURSUANT TO FC §3048

- (1) This court has jurisdiction to make child custody orders in this case under the Uniform Child Custody Jurisdiction and Enforcement Act (part 3 of the California Family Code commencing with section 3400).
- (2) The responding party was given notice and an opportunity to be heard as provided by the laws of the State of California.
- (3) The country of habitual residence of the child(ren) is:
The United States
Other (specify country): _____
- (4) If you violate this order you may be subject to civil or criminal penalties, or both.
- (5) The judgment contains a clear description of the custody and visitation rights of each party.

IV. CHILD SUPPORT

a. FINDINGS PURSUANT TO FC §3901 and §4065

- (1) The Parties are fully informed of their rights concerning child support.
- (2) The order is being agreed to without coercion or duress.
- (3) The agreement is in the best interests of the child(ren) involved
- (4) The needs of the child(ren) will be adequately met by the stipulated amount
- (5) Unless otherwise indicated, the right to support has not been assigned to the county pursuant to Section 11477 of the Welfare and Institutions Code and no public assistance application is pending.

b. MONEY JUDGMENT IN COURT ORDER PURSUANT TO FC §5616

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

c. BASE CHILD SUPPORT

Please check all appropriate boxes. At least one (1) box must be checked:

CHILD SUPPORT IS RESERVED (If checked, skip directly to section V)

CHILD SUPPORT SERVICES INVOLVED

The parties currently have an open case with the Child Support Services (CSS) and a CSS representative has signed the proposed judgment.

The parties currently have an open case with CSS, no child support orders are contained in this judgment, and the court reserves jurisdiction over the issue of child support, health insurance coverage, and additional child support.

If checked, skip directly to section V.

AGREED UPON SUPPORT

Petitioner Respondent shall pay to Petitioner Respondent base child support of \$ _____ per week month, payable \$ _____ on _____ and \$ _____ on _____ of each week month, commencing _____ and continuing until the child(ren) for whom support is payable: marries, dies, is emancipated, until further order of the court or, as to an unmarried child who has attained the age of 18 years old, is a full-time high school student, and who is not self-supporting, until the time the child completes the 12th grade or attains the age of 19 years old, whichever first occurs.

d. MANDATORY ADDITIONAL CHILD SUPPORT PURSUANT TO FC §4062

Petitioner Respondent shall pay child care costs related to employment or reasonably necessary education/job training:

in the amount of \$ _____ per week month or _____ % of total.

No child care costs orders are contained in this judgment and the court reserves jurisdiction over the issue of child care costs.

Petitioner Respondent shall pay the reasonable uninsured health care costs for the child(ren): in the amount of \$ _____ per week month or _____ % of total.

e. DISCRETIONARY ADDITIONAL CHILD SUPPORT PURSUANT TO FC §4062

Petitioner Respondent shall pay costs related to _____ :
in the amount of \$ _____ per week month or _____ % of total.

f. TOTAL CHILD SUPPORT

Petitioner Respondent shall pay to Petitioner Respondent base child support of \$ _____ per week month, plus additional child support as specified in **sections (d) and/or (e)** on the previous page, for a total of \$ _____ per week month, payable \$ _____ per week month, \$ _____ on the _____ and \$ _____ on the _____ of each week month, commencing on _____ and continuing until the child(ren) for whom support is payable: marries, dies, is emancipated, until further order of the court or, as to an unmarried child has attained the age of 18 years old, is a full-time high school student, and who is not self-supporting, until the time the child completes the 12th grade or attains the age of 19 years old, whichever first occurs.

g. REQUIRED ATTACHMENT PURSUANT TO FC §4063 and §7600

The parties have attached the following form: “Notice of Rights and Responsibilities: Health Care Costs and Reimbursement Procedures and Information sheet on Changing a Child Support Order” (Form FL-192)

h. HEALTH INSURANCE COVERAGE PURSUANT TO FC §3751

If child support is not reserved, at least one (1) of the following boxes must be checked.

Health insurance coverage for the minor child(ren) must be maintained by Petitioner Respondent if that insurance is available at no cost or at reasonable cost to the parent(s) through their respective places of employment or self-employment. Both parties are ordered to cooperate in the presentation, collection, and reimbursement of any health care claims. The parent ordered to provide health insurance must seek continuation of coverage for the child after the child attains the age when the child is no longer considered eligible for coverage as a dependent under the insurance contract, if the child is incapable of self-sustaining employment because of a physically or mentally disabling injury, illness, or condition and is chiefly dependent upon the parent providing health insurance for support and maintenance.

Health Insurance is not available to the Petitioner Respondent at a reasonable cost at this time. Should health insurance coverage become available to a parent for no or for reasonable cost, that parent must apply for that coverage.

i. INCOME WITHHOLDING FOR CHILD SUPPORT PURSUANT TO FC §5230

An Income Withholding for Child Support (form FL-195) must issue. **Note:** The payor of child support is responsible for the payment of support directly to the recipient until support payments are deducted from the payor's wages, and for any support not paid by the assignment.

j. EMPLOYER INFORMATION PURSUANT TO FC §4014

The parties must notify the other parent of the name and address of his or her current employer.

V. MISCELLANEOUS PROVISIONS

The Marital Settlement Agreement/Stipulated Judgment that is also attached to the Judgment (form FL-180) contains further orders.

All provisions are deemed incorporated into the Judgment. As to the provisions that contain a checkbox () , only those provisions that are checked become part of the Judgment.

If there is any express conflict between the Marital Settlement Agreement/Stipulated Judgment and this Expedited Processing Attachment, the Expedited Processing Attachment prevails. However, this Expedited Processing Attachment is not all inclusive. The fact that this Expedited Processing Attachment is less detailed is not a conflict. The Expedited Processing Attachment only includes the minimum statutory requirements at the time of entry of judgment. It does not replace the stipulated judgment or other required documents.

VI. STIPULATION FOR JUDGMENT

The parties agree that the Judgment (form FL-180) and all attachments, including this Expedited Processing Attachment, contain the exact terms of the Judgment to be entered in this case.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and agreed to by:

Petitioner: Date Respondent: Date

Approved as confirming to the agreement of the parties:

Date Attorney for Petitioner: Attorney for Respondent: Date

Each attachment to this judgment is incorporated into this judgment, and the parties are ordered to comply with each attachment’s provisions. Jurisdiction is reserved to make other orders necessary to carry out this judgment.

Date Judge / Commissioner of the Superior Court

***: If Judgment is being submitted by way of a *Stipulated Default* (no Response [form FL-120] or Appearance, Stipulations and Waivers [form FL-130] has been filed), then the Respondent's signature must be notarized and must comply with Civil Code §1189.**

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE STREET ADDRESS: 341 THE CITY DRIVE MAILING ADDRESS: CITY AND ZIP CODE: ORANGE, CA 92868 BRANCH NAME: LAMOREAUX JUSTICE CENTER	
MARRIAGE OR PARTNERSHIP OF PETITIONER: RESPONDENT:	
<div style="text-align: center;">JUDGMENT</div> <input type="checkbox"/> DISSOLUTION <input type="checkbox"/> LEGAL SEPARATION <input type="checkbox"/> NULLITY <input type="checkbox"/> Status only <input type="checkbox"/> Reserving jurisdiction over termination of marital or domestic partnership status <input type="checkbox"/> Judgment on reserved issues Date marital or domestic partnership status ends:	CASE NUMBER:

1. This judgment contains personal conduct restraining orders modifies existing restraining orders.
 The restraining orders are contained on page(s) _____ of the attachment. They expire on (date): _____

2. This proceeding was heard as follows: Default or uncontested By declaration under Family Code section 2336
 Contested Agreement in court
 - a. Date: _____ Dept.: _____ Room: _____
 - b. Judicial officer (name): _____ Temporary judge
 - c. Petitioner present in court Attorney present in court (name): _____
 - d. Respondent present in court Attorney present in court (name): _____
 - e. Claimant present in court (name): _____ Attorney present in court (name): _____
 - f. Other (specify name): _____

3. The court acquired jurisdiction of the respondent on (date): _____
 - a. The respondent was served with process.
 - b. The respondent appeared.

THE COURT ORDERS, GOOD CAUSE APPEARING

4. a. Judgment of dissolution is entered. Marital or domestic partnership status is terminated and the parties are restored to the status of single persons
 - (1) on (specify date): _____
 - (2) on a date to be determined on noticed motion of either party or on stipulation.
- b. Judgment of legal separation is entered.
- c. Judgment of nullity is entered. The parties are declared to be single persons on the ground of (specify): _____

- d. This judgment will be entered nunc pro tunc as of (date): _____
- e. Judgment on reserved issues.
- f. The petitioner's respondent's former name is restored to (specify): _____
- g. Jurisdiction is reserved over all other issues, and all present orders remain in effect except as provided below.
- h. This judgment contains provisions for child support or family support. Each party 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. The parents must notify the court of any change in the information submitted within 10 days of the change, by filing an updated form. The *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.

CASE NAME <i>(Last name, first name of each party):</i>	CASE NUMBER:
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4. i. The children of this marriage or domestic partnership are:
- (1) Name Birthdate
- (2) Parentage is established for children of this relationship born prior to the marriage or domestic partnership
- j. Child custody and visitation (parenting time) are ordered as set forth in the attached
- (1) Settlement agreement, stipulation for judgment, or other written agreement which contains the information required by Family Code section 3048(a).
- (2) *Child Custody and Visitation Order Attachment* (form FL-341).
- (3) *Stipulation and Order for Custody and/or Visitation of Children* (form FL-355).
- (4) Previously established in another case. Case number: _____ Court: _____
- k. Child support is ordered as set forth in the attached
- (1) Settlement agreement, stipulation for judgment, or other written agreement which contains the declarations required by Family Code section 4065(a).
- (2) *Child Support Information and Order Attachment* (form FL-342).
- (3) *Stipulation to Establish or Modify Child Support and Order* (form FL-350).
- (4) Previously established in another case. Case number: _____ Court: _____
- l. Spousal, domestic partner, or family support is ordered:
- (1) Reserved for future determination as relates to petitioner respondent
- (2) Jurisdiction terminated to order spousal or partner support to petitioner respondent
- (3) As set forth in the attached *Spousal, Partner, or Family Support Order Attachment* (form FL-343).
- (4) As set forth in the attached settlement agreement, stipulation for judgment, or other written agreement.
- (5) Other (*specify*): _____
- m. Property division is ordered as set forth in the attached
- (1) Settlement agreement, stipulation for judgment, or other written agreement.
- (2) *Property Order Attachment to Judgment* (form FL-345).
- (3) Other (*specify*): _____
- n. Attorney fees and costs are ordered as set forth in the attached
- (1) Settlement agreement, stipulation for judgment, or other written agreement.
- (2) *Attorney Fees and Costs Order* (form FL-346).
- (3) Other (*specify*): _____
- o. Other (*specify*): _____

Each attachment to this judgment is incorporated into this judgment, and the parties are ordered to comply with each attachment's provisions. Jurisdiction is reserved to make other orders necessary to carry out this judgment.

Date: _____

5. Number of pages attached: _____

JUDICIAL OFFICER
 SIGNATURE FOLLOWS LAST ATTACHMENT

NOTICE

Dissolution or legal separation may automatically cancel the rights of a spouse or domestic partner under the other spouse's or domestic partner's will, trust, retirement plan, power of attorney, pay-on-death bank account, transfer-on-death vehicle registration, survivorship rights to any property owned in joint tenancy, and any other similar property interest. It does not automatically cancel the rights of a spouse or domestic partner as beneficiary of the other spouse's or domestic partner's life insurance policy. You should review these matters, as well as any credit cards, other credit accounts, insurance policies, retirement plans, and credit reports, to determine whether they should be changed or whether you should take any other actions.

A debt or obligation may be assigned to one party as part of the dissolution of property and debts, but if that party does not pay the debt or obligation, the creditor may be able to collect from the other party.

An earnings assignment may be issued without additional proof if child, family, partner, or spousal support is ordered.

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

NOTICE OF RIGHTS AND RESPONSIBILITIES
Health-Care Costs and Reimbursement Procedures

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

- 1. Notice.** You must give the other parent an itemized statement of the charges that have been billed for any health-care costs not paid by insurance. You must give this statement to the other parent within a reasonable time, but no more than 30 days after those costs were given to you.
- 2. Proof of full payment.** If you have already paid all of the uninsured costs, you must (1) give the other parent proof that you paid them and (2) ask for reimbursement for the other parent's court-ordered share of those costs.
- 3. Proof of partial payment.** If you have paid only your share of the uninsured costs, you must (1) give the other parent proof that you paid your share, (2) ask that the other parent pay his or her share of the costs directly to the health-care provider, and (3) give the other parent the information necessary for that parent to be able to pay the bill.
- 4. Payment by notified parent.** If you receive notice from a parent that an uninsured health-care cost has been incurred, you must pay your share of that cost within the time the court orders; or if the court has not specified a period of time, you must make payment (1) within 30 days from the time you were given notice of the amount due, (2) according to any payment schedule set by the health-care provider, (3) according to a schedule agreed to in writing by you and the other parent, or (4) according to a schedule adopted by the court.
- 5. Disputed charges.** If you dispute a charge, you may file a motion in court to resolve the dispute, but only if you pay that charge before filing your motion. If you claim that the other party has failed to reimburse you for a payment, or the other party has failed to make a payment to the provider after proper notice has been given, you may file a motion in court to resolve the dispute. The court will presume that if uninsured costs have been paid, those costs were reasonable. The court may award attorney fees and costs against a party who has been unreasonable.
- 6. Court-ordered insurance coverage.** If a parent provides health-care insurance as ordered by the court, that insurance must be used at all times to the extent that it is available for health-care costs.
 - a. Burden to prove.** The party claiming that the coverage is inadequate to meet the child's needs has the burden of proving that to the court.
 - b. Cost of additional coverage.** If a parent purchases health-care insurance in addition to that ordered by the court, that parent must pay all the costs of the additional coverage. In addition, if a parent uses alternative coverage that costs more than the coverage provided by court order, that parent must pay the difference.
- 7. Preferred health providers.** If the court-ordered coverage designates a preferred health-care provider, that provider must be used at all times consistent with the terms of the health insurance policy. When any party uses a health-care provider other than the preferred provider, any health-care costs that would have been paid by the preferred health provider if that provider had been used must be the sole responsibility of the party incurring those costs.

INFORMATION SHEET ON CHANGING A CHILD SUPPORT ORDER

General Information

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

When a Child Support Order May Be Modified

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

Examples

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

How to Change a Child Support Order

To change a child support order, you must file papers with the court. *Remember:* You must follow the order you have now.

What forms do I need?

If you are asking to change a child support order open with the local child support agency, you must fill out one of these forms:

- FL-680, *Notice of Motion (Governmental)* or FL-683 *Order to Show Cause (Governmental)* and
- FL-684, *Request for Order and Supporting Declaration (Governmental)*

If you are asking to change a child support order that is **not** open with the local child support agency, you must fill out one of these forms:

- FL-300, *Request for Order* or
- FL-390, *Notice of Motion and Motion for Simplified Modification of Order for Child, Spousal, or Family Support*

You must also fill out one of these forms:

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

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

Talk to the family law facilitator at your court.

After you fill out the forms, file them with the court clerk and ask for a hearing date. Write the hearing date on the form.

The clerk will ask you to pay a filing fee. If you cannot afford the fee, fill out these forms, too:

- Form FW-001, *Request to Waive Court Fees*
- 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 serve the other parent copies of your filed court forms at least **16 court days** before the hearing. Add **5 calendar days** if you serve by mail within California (see Code of Civil Procedure section 1005 for other situations).

Court days are weekdays when the court is open for business (Monday through Friday except court holidays). **Calendar days** include all days of the month, including weekends and holidays. To find court holidays, go to www.courts.ca.gov/holidays.htm.

The server must also serve blank copies of these forms:

- FL-320, *Responsive Declaration to Request for Order* and FL-150, *Income and Expense Declaration*, or
- FL-155, *Financial Statement (Simplified)*

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

Go to your hearing and ask the judge to change the support. Bring your tax returns from the last two years and your last two months' pay stubs. The judge will look at your information, listen to both parents, and make an order. After the hearing, fill out:

- FL-340, *Findings and Order After Hearing* and
- FL-342, *Child Support Information and Order Attachment*

Need help?

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

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 to Custody and/or Visitation of Children (form FL-355)
 Other (specify):

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

<u>Child's Name</u>	<u>Birth Date</u>	<u>Legal custody to: (person who makes decisions about health, education, etc.)</u>	<u>Physical custody to: (person with whom child lives)</u>
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6. **Child abduction prevention.** There is a risk that one of the parties will take the children out of California without the other party's permission. (*Child Abduction Prevention Orders Attachment (form FL-341(B))* must be attached and must be obeyed.)

7. **Visitation (Parenting Time)**

- a. Reasonable right of visitation to the party without physical custody (**not appropriate in cases involving domestic violence**)
- b. See the attached _____-page document
- c. The parties will go to child custody mediation or child custody recommending counseling at (specify date, time, and location):
- d. No Visitation (Parenting Time)
- e. Visitation (Parenting Time) for the petitioner respondent other (name): will be as follows:

(1) **Weekends starting (date):**

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

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

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

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

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

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

THIS IS A COURT ORDER.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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11. **Holiday schedule.** The children will spend holiday time as listed below in the attached schedule (*Children's Holiday Schedule Attachment (form FL-341(C))* may be used for this purpose.)

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

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

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

15. **Other** (*specify*):

THIS IS A COURT ORDER.

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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CHILD SUPPORT INFORMATION AND ORDER ATTACHMENT

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

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

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

2. **Income**

	<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/plaintiff: \$	\$	\$	<input type="text"/>
Respondent/defendant: \$	\$	\$	<input type="text"/>
Other parent: \$	\$	\$	<input type="text"/>

b. Imputation of income. The court finds that the petitioner/plaintiff respondent/defendant other parent has the capacity to earn: \$ _____ per _____ and has based the support order upon this imputed income.

3. **Children of this relationship**

- a. Number of children who are the subjects of the support order (specify): _____ %
 b. Approximate percentage of time spent with petitioner/plaintiff: _____ %
 respondent/defendant: _____ %
 other parent: _____ %

4. **Hardships**

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

	<u>Petitioner/ plaintiff</u>	<u>Respondent/ defendant</u>	<u>Other parent</u>	<u>Approximate ending time 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.
 b. The low-income adjustment does not apply because (specify reasons):

6. **Child support**

a. **Base child support**

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

<u>Child's name</u>	<u>Date of birth</u>	<u>Monthly amount</u>	<u>Payable to (name):</u>
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Payable on the 1st of the month one-half on the 1st and one-half on the 15th of the month
 other (specify):

THIS IS A COURT ORDER.

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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THE COURT FURTHER ORDERS

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

- (1) Child-care costs related to employment or reasonably necessary job training
- (a) Petitioner/plaintiff must pay: % of total or \$ per month child-care costs.
- (b) Respondent/defendant must pay: % of total or \$ per month child-care costs.
- (c) Other parent must pay: % of total or \$ per month child-care costs.
- (d) Costs to be paid as follows (*specify*):

c. **Mandatory additional child support**

- (2) Reasonable uninsured health-care costs for the children
- (a) Petitioner/plaintiff must pay: % of total or \$ per month.
- (b) Respondent/defendant must pay: % of total or \$ per month.
- (c) Other parent must pay: % of total or \$ per month.
- (d) Costs to be paid as follows (*specify*):

d. **Additional child support**

- (1) Costs related to the educational or other special needs of the children
- (a) Petitioner/plaintiff must pay: % of total or \$ per month.
- (b) Respondent/defendant must pay: % of total or \$ per month.
- (c) Other parent must pay: % of total or \$ per month.
- (d) Costs to be paid as follows (*specify*):
- (2) Travel expenses for visitation
- (a) Petitioner/plaintiff must pay: % of total or \$ per month.
- (b) Respondent/defendant must pay: % of total or \$ per month.
- (c) Other parent must pay: % of total or \$ per month.
- (d) Costs to be paid as follows (*specify*):

e. **Non-Guideline Order**

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

Total child support per month: \$

7. **Health-care expenses**

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

8. **Earnings assignment**

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

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

10. **Employment search order (Family Code, § 4505)**

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

THIS IS A COURT ORDER.

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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11. **Other orders** (*specify*):

12. **Notices**

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

13. **Child Support Case Registry Form**

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

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

THIS IS A COURT ORDER.

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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SPOUSAL, PARTNER, OR FAMILY SUPPORT ORDER ATTACHMENT

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

THE COURT FINDS

1. **Net income.** The parties' monthly income and deductions are as follows (complete a, b, or both):

	<u>Total gross monthly income</u>	<u>Total monthly deductions</u>	<u>Total hardship deductions</u>	<u>Net monthly disposable income</u>
a. Petitioner: <input type="checkbox"/> receiving TANF/CalWORKS	\$	\$	\$	\$
b. Respondent: <input type="checkbox"/> receiving TANF/CalWORKS	\$	\$	\$	\$

2. A printout of a computer calculation of the parties' financial circumstances is attached for all required items not filled out above (for temporary support only).

3. Judgment for spousal or partner support

- a. Modifies a judgment or order entered on (date):
b. The parties were married for (specify numbers): _____ years _____ months.
c. The parties were registered as domestic partners or the equivalent for (specify numbers): _____ years _____ months.
d. The parties are both self-supporting, as shown on the Declaration for Default or Uncontested Dissolution or Legal Separation (form FL-170).
e. The marital standard of living was (describe):

See Attachment 3d.

THE COURT ORDERS

4. The issue of spousal or partner support for the petitioner respondent is reserved for a later determination.
5. The court terminates jurisdiction over the issue of spousal or partner support for the petitioner respondent.

6. a. The petitioner respondent must pay to the petitioner respondent as temporary spousal support family support partner support \$ _____ per month, beginning (date): _____, payable through (specify end date): _____

payable on the (specify): _____ day of each month.
 Other (specify): _____

- b. Support must be paid by check, money order, or cash. The support payor's obligation to pay support will terminate on the death of either party, remarriage, or registration of a new domestic partnership of the support payee.
c. An earnings assignment for the foregoing support will issue. (Note: The payor of spousal, family, or partner support is responsible for the payment of support directly to the recipient until support payments are deducted from the payor's earnings, and for any support not paid by the assignment.)
d. Service of the earnings assignment is stayed provided the payor is not more than (specify number): _____ days late in the payment of spousal, family, or partner support.

THIS IS A COURT ORDER.

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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7. The petitioner respondent should make reasonable efforts to assist in providing for his or her support needs.
8. The parties must promptly inform each other of any change of employment, including the employer's name, address, and telephone number.
9. This order is for family support. 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. The parents must notify the court of any change of information submitted within 10 days of the change by filing an updated form. A *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.
10. Notice: If this form is attached to *Restraining Order After Hearing (CLETS-OAH) (Order of Protection)* (form DV-130), the orders issued on this form (FL-343) do not expire upon termination of the restraining orders issued on form DV-130.
11. Other orders (*specify*):

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

THIS IS A COURT ORDER.

PETITIONER: RESPONDENT:	CASE NUMBER:
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PROPERTY ORDER ATTACHMENT TO JUDGMENT

1. Division of community property assets

- a. There are no community property assets.
- b. The court finds that the net value of the community estate is less than \$5,000 and that the petitioner respondent cannot be found. Under Family Code section 2604, the entire community estate is awarded to the petitioner respondent.
- c. The petitioner will receive the following assets: *(Attach additional page if necessary.)*

- d. The respondent will receive the following assets: *(Attach additional page if necessary.)*

- e. The petitioner respondent will be responsible for preparing and filing a *Qualified Domestic Relations Order (QDRO)* to divide the following plan or retirement account(s) *(specify)*:

 The fee for preparation of the QDRO shall be shared as follows *(specify)*:

- f. Other orders:

- g. Each spouse will receive the assets listed above as his or her sole and separate property. The parties must execute any and all documents required to carry out this division.
- h. The court reserves jurisdiction to divide any community assets not listed here and enforce the terms of this order.

2. Division of community property debts

- a. There are no community debts.
- b. All community debts have been paid by the petitioner respondent. The petitioner respondent must reimburse the other party: \$
 The payment plan is as follows:

- c. The petitioner will be responsible for the following debts: *(Attach additional page if necessary.)*

- d. The respondent will be responsible for the following debts: *(Attach additional page if necessary.)*

PETITIONER: RESPONDENT:	CASE NUMBER:
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e. Other orders:

f. Each party will be solely responsible for paying the debts assigned to him or her and will hold the other harmless from those debts. The parties understand that the creditors are not bound by this judgment. If a creditor seeks payment from the party who is not listed as responsible for the debt, that party can file a motion to seek reimbursement from the defaulting party.

g. The court reserves jurisdiction to divide any community debts not listed here.

3. **Equalization of division of property and debt orders.** To equalize the division of the community property assets and debts, the petitioner respondent must pay to the other the sum of: \$ _____, payable as follows (*specify*):

4. **Separate property**

a. The court confirms the following assets or debts as the sole separate property, or sole responsibility, of the petitioner:

b. The court confirms the following assets or debts as the sole separate property, or sole responsibility, of the respondent:

5. The settlement agreement between the parties dated (*date*): _____ is attached and made a part of this judgment.

6. **Sale of property.** The following property will be offered for sale and sold for the fair market value as soon as a willing buyer can be found, and the net proceeds from the sale will be divided equally other (*specify*):

7. Other orders (*specify*):

PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	

PENSION BENEFITS—ATTACHMENT TO JUDGMENT
(Attach to form FL-180)

This order concerns the division of retirement and survivor benefits between the following two parties:

Name of petitioner:	Name of respondent:
Address of petitioner:	Address of respondent:

Date of marriage or registration of domestic partnership:	Date of separation:
---	---------------------

TO THE EMPLOYER/PLAN ADMINISTRATOR OF EACH PLAN IDENTIFIED BELOW:

Each party identified above is provisionally awarded without prejudice, and subject to adjustment by a later domestic relations order, a separate interest equal to one-half of all benefits accrued or to be accrued under any retirement plan in which one party has accrued a benefit, including but not limited to the plans listed below, as a result of employment of the other party during the marriage or domestic partnership and before the date of separation. In addition, pending further notice, the plan must, as allowed by law, or as allowed by the terms of the plan in the case of a governmental plan, continue to treat the parties as married persons or domestic partners for purposes of any survivor rights and benefits available under the plan to the extent necessary to provide for payment to the surviving spouse or domestic partner of an amount equal to that separate interest or of all of the survivor benefits if at the time of death of the participant there is no other eligible recipient of the survivor benefit.

TO THE PARTIES:

Each party must provide the information and take the required actions listed below to protect the other party's interest in retirement benefits:

1. List below (or on a page attached) the name and address of each employer for which you or the other party work or worked where either of you participated in a retirement plan during the marriage and before your separation. Include the name (or a description if you do not have the name) of each of these plans.

See Attached

2. For each plan you listed under item 1, promptly deliver a copy of this order to the plan's administrator. You can deliver a copy of this order in person or by mail. Provide a proof of service to the court and the other party.
If you do not know the plan's administrator, deliver a copy to
 - the employer or plan sponsor, or, if unknown,
 - the trustee or custodian of any assets of the plan.
3. Each party who is a participant in a plan listed under item 1 must join that plan as a party to this case when joinder is required by law. (See Retirement Plan Joinder—Information Sheet [form FL-318-INFO].)
4. If you are not the party who participated in a plan listed in item 1 and are concerned that you have not received proof that notice of your interest has been delivered to that plan, you are encouraged to deliver a copy of this order to the appropriate plan administrator as described in item 2. You also have a right to join any plan that requires joinder in the event that no joinder documents have been filed with the court or served on the plan's administrator.
5. Each party must promptly let each plan representative know of any change in that party's mailing address until all benefits due that party under the plan have been paid.

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): <hr/> TELEPHONE NO.: _____ FAX NO. (<i>Optional</i>): _____ E-MAIL ADDRESS (<i>Optional</i>): _____ ATTORNEY FOR (<i>Name</i>): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE STREET ADDRESS: 341 THE CITY DRIVE MAILING ADDRESS: CITY AND ZIP CODE: ORANGE, CA 92868 BRANCH NAME: LAMOREAUX JUSTICE CENTER	
PETITIONER: RESPONDENT:	
NOTICE OF ENTRY OF JUDGMENT	CASE NUMBER: _____

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

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

Date: _____ Clerk, by _____, Deputy

—NOTICE TO ATTORNEY OF RECORD OR PARTY WITHOUT ATTORNEY—

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

STATEMENT IN THIS BOX APPLIES ONLY TO JUDGMENT OF DISSOLUTION Effective date of termination of marital or domestic partnership status (<i>specify</i>): WARNING: Neither party may remarry or enter into a new domestic partnership until the effective date of the termination of marital or domestic partnership status, as shown in this box.
--

CLERK'S CERTIFICATE OF MAILING

I certify that I am not a party to this cause and that a true copy of the *Notice of Entry of Judgment* was mailed first class, postage fully prepaid, in a sealed envelope addressed as shown below, and that the notice was mailed at (*place*): _____, California, on (*date*): _____

Date: _____ Clerk, by _____, Deputy

_____ Name and address of petitioner or petitioner's attorney _____	_____ Name and address of respondent or respondent's attorney _____
_____	_____

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	COURT PERSONNEL: STAMP DATE RECEIVED HERE DO NOT FILE
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE STREET ADDRESS: 341 THE CITY DRIVE MAILING ADDRESS: CITY AND ZIP CODE: ORANGE, CA 92868 BRANCH NAME: LAMOREAUX JUSTICE CENTER	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	
<input type="checkbox"/> Mother <input type="checkbox"/> First form completed <input type="checkbox"/> Father <input type="checkbox"/> 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:

<u>Child Support:</u> (1) <input type="checkbox"/> Current base child support: \$ _____ <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order (2) <input type="checkbox"/> Additional monthly support: \$ _____ (3) <input type="checkbox"/> Total 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 (<i>date</i>):	<u>Family Support:</u> (1) <input type="checkbox"/> Current base family support: \$ _____ <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order (2) <input type="checkbox"/> Additional monthly support: \$ _____ (3) <input type="checkbox"/> Total past-due support: \$ _____ (4) <input type="checkbox"/> Payment on past-due support: \$ _____	<u>Spousal Support:</u> (1) <input type="checkbox"/> Current spousal support: \$ _____ <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order (2) <input type="checkbox"/> Total past-due support: \$ _____ (3) <input type="checkbox"/> 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:
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4. The child support order is for the following children:

- | | <u>Child's name</u> | <u>Date of birth</u> | <u>Social security number</u> |
|----|---------------------|----------------------|-------------------------------|
| 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.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	COURT PERSONNEL: STAMP DATE RECEIVED HERE DO NOT FILE
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE STREET ADDRESS: 341 THE CITY DRIVE MAILING ADDRESS: CITY AND ZIP CODE: ORANGE, CA 92868 BRANCH NAME: LAMOREAUX JUSTICE CENTER	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	
<input type="checkbox"/> Mother <input type="checkbox"/> First form completed <input type="checkbox"/> Father <input type="checkbox"/> 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:

<u>Child Support:</u> (1) <input type="checkbox"/> Current base child support: \$ _____ <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order (2) <input type="checkbox"/> Additional monthly support: \$ _____ (3) <input type="checkbox"/> Total 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 (<i>date</i>):	<u>Family Support:</u> (1) <input type="checkbox"/> Current base family support: \$ _____ <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order (2) <input type="checkbox"/> Additional monthly support: \$ _____ (3) <input type="checkbox"/> Total past-due support: \$ _____ (4) <input type="checkbox"/> Payment on past-due support: \$ _____	<u>Spousal Support:</u> (1) <input type="checkbox"/> Current spousal support: \$ _____ <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order (2) <input type="checkbox"/> Total past-due support: \$ _____ (3) <input type="checkbox"/> 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:

- | | <u>Child's name</u> | <u>Date of birth</u> | <u>Social security number</u> |
|----|---------------------|----------------------|-------------------------------|
| 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.