

SUPERIOR COURT OF CALIFORNIA
COUNTY OF KERN

REQUEST FOR ORDER

1. COMPLETE THE FORMS ATTACHED. Type or print in blue or black ink only. Writing must be legible. See FL-300-INFO for more information and other required forms. You may download fillable forms from www.courts.ca.gov/forms.
2. DATE, PRINT NAME AND SIGN ALL FORMS BEFORE FILING.
3. MAKE COPIES OF EACH FORM. Make two (2) copies of each form, front and back pages. **Note:** You may need additional copies if there are multiple parties involved.
4. FILING FEE. There is a fee to file. If you cannot afford the fee, you may be eligible to have the fee “waived” by completing an **Application for Fee Waiver** – *ask the clerk for a packet.*
5. FILE YOUR FORMS. The original form and all copies must be filed with the Family Law Department. The clerk will keep the original and return the file stamped copies to you for further action. One copy is for your records; the other copies are for service to the other party(ies).
6. SERVE YOUR DOCUMENTS. “SERVICE” means that someone other than you, over the age of 18, must **personally** deliver (serve) a copy of the filed endorsed papers to the other party. You must also serve the other party with the blank Responsive Declaration to Request for Order – *ask the clerk for a packet.* If you prefer, you can arrange to have the Sherriff’s Department or private process server serve the papers at a cost. See additional information regarding service deadlines on form FL-300-INFO.
7. FILE THE PROOF OF SERVICE. After service has been completed, the person who served the papers must complete and sign the “Proof of Personal Service,” included in this packet. Once completed, the form **must** be filed with the Family Law Department no later than **five (5) court days before the hearing.** *Note: Your case may not be heard unless proof of service is on file.
8. FOLLOW-UP. These documents only request a hearing before a judge on the issues addressed. Following the hearing, a “Findings and Order After Hearing” must be prepared consisting of additional forms that adhere and formalize any order made in Court.

NOTICE

PERSONNEL OF THE CLERKS OFFICE OF THE SUPERIOR COURT
ARE NOT ALLOWED BY LAW TO GIVE LEGAL ADVICE OR ASSIST IN
THE PREPARATION OF ANY FORMS.

PURSUANT TO CA RULE OF COURT 2.200, A PARTY WHOSE ADDRESS CHANGES WHILE AN ACTION IS PENDING MUST SERVE ON ALL PARTIES AND FILE A WRITTEN NOTICE OF CHANGE OF ADDRESS WITH THE COURT- Ask the clerk for Notice of Change of Address and Other Contact Information form

1 USE Request for Order (form FL-300):

- To schedule a court hearing and ask the court to make new orders or to change orders in your case.
- When *Restraining Order After Hearing* (form DV-130) has expired, and you want to change the orders that are still in effect (examples: child custody, visitation (parenting time), child support, and other orders).
- To change or end *Juvenile Restraining Order After Hearing* (form JV-255) when the case is closed (dismissed) and the order was granted under the Code of Civil Procedure.

2 DO NOT USE Request for Order (form FL-300):

- To ask for a restraining order against your spouse or domestic partner, a former spouse or domestic partner, or someone you have a child with. Read *How to Ask for a Temporary Restraining Order* (form DV-505-INFO).
- To ask to change or end a *Restraining Order After Hearing* granted under the Domestic Violence Prevention Act, including form DV-130 and form JV-255 in a juvenile case. For more information, read *How Do I Ask to Change or End a Domestic Violence Restraining Order?* (form DV-300-INFO).
- Before you have filed a Petition to start your family law case (form FL-300 may be filed with the Petition).
- If you and the other party have an agreement. For information about how to write up your agreement, get it approved by the court, and filed in your case, see www.courts.ca.gov/selfhelp-agreeFL, speak with an attorney, or get help at your court's Self-Help Center or Family Law Facilitator's Office.
- When specific Judicial Council forms must be used to ask the court for other orders. For example, to ask:
–For an order for contempt, use form FL-410. –To set aside a child support order, use form FL-360 or form FL-640. –To set aside a voluntary declaration of paternity, use form FL-280.

3 Forms checklist

- a. Form FL-300, *Request for Order*, is the basic form you need to file with the court. Depending on your request, you may need these additional forms:
- b. To request child custody or visitation (parenting time) orders, you may need to complete some of these forms:
- ☐ FL-105, *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act*
 - ☐ FL-311, *Child Custody and Visitation (Parenting Time) Application Attachment*
 - ☐ FL-312, *Request for Child Abduction Prevention Orders*
 - ☐ FL-341(C), *Children's Holiday Schedule Attachment*
 - ☐ FL-341(D), *Additional Provisions—Physical Custody Attachment*
 - ☐ FL-341(E), *Joint Legal Custody Attachment*
- c. If you want child support, you need this form:
- ☐ A current form FL-150, *Income and Expense Declaration*. You may use form FL-155, *Financial Statement (Simplified)*, instead of form FL-150 if you meet the requirements listed on page 2 of form FL-155.
- d. If you want spousal or partner support or orders about your finances, you need these forms:
- ☐ A current FL-150, *Income and Expense Declaration*
 - ☐ FL-157, *Spousal or Partner Support Declaration Attachment* (if the request is to change a support judgment)
- e. If you want attorney's fees and costs, you need these forms:*
- ☐ A current FL-150, *Income and Expense Declaration*
 - ☐ FL-319, *Request for Attorney's Fees and Costs Attachment* (or provide the information in a declaration)
 - ☐ FL-158, *Supporting Declaration for Attorney's Fees and Costs* (or provide the information in a declaration)
- (*The above forms are not required when asking for attorney's fees and costs under the Domestic Violence Prevention Act.)
- f. To request temporary emergency (ex parte) orders, you need these forms:
- ☐ FL-305, *Temporary Emergency Orders* to serve as the proposed temporary emergency orders.
 - ☐ Your declaration describing how and when you gave notice about the request for temporary emergency orders. You may use form FL-303, *Declaration Regarding Notice and Service of Request for Temporary Emergency (Ex Parte) Orders*.
 - ☐ Other forms required by local courts. See item 9 on page 3 of this form for more information.
- g. If you plan to have witnesses testify at the hearing, you need form:
- ☐ FL-321, *Witness List*
- h. If you want to request a separate trial (bifurcation) on an issue, you need form:
- ☐ FL-315, *Request or Response to Request for Separate Trial*



4 Complete form FL-300 (Page 1)

Caption: Complete the top part with your name, address, and telephone number. Below that, fill in the court's address.

Write the name of the Petitioner, Respondent, or Other Parent/Party. (You must use the party names as they appear in the petition.)

In the next section, check “CHANGE” if you want to change an existing order. Check “TEMPORARY EMERGENCY (EX PARTE) ORDER” if you are asking that the court make emergency orders that will be effective until the hearing date.

Then, check the boxes that apply to the orders you are requesting. Finally, in the box on the right, write your case number.

Item 1: List the name(s) of the other person(s) in your case who will receive your request. In some cases, this might include a grandparent who is joined as a party in the case, a local child support agency, or a lawyer who represents a child in the case.

Item 2: Leave this blank. The court clerk will fill in the date, time, and location of the hearing.

Item 3: This is a notice to all other parties.

Items 4-5: Leave these blank. The court will complete them if the orders are granted.

Item 6: In some counties, the court clerk will check item 6 and provide the details for your required child custody mediation or recommending counseling appointment. Other courts require the party or the party's lawyer to make the appointment and then complete item 6 before filing form FL-300.

Ask your court's Family Law Facilitator or Self-Help Center to find out what your court requires.

Items 7-8: Leave these blank. The court will complete them, if needed.

5 Complete form FL-300 (pages 2-4)
6 Complete additional forms and make copies

Complete any additional forms that you need to file with the *Request for Order*. Make at least two copies of your full packet.

Note: You may file one form FL-150 to respond to items 3, 4, and 6.

7 File your documents

Give your paperwork and the copies you made to the court clerk to process. You may take them to the clerk's office in person, mail them, or, in some counties, you can e-file them.

The clerk will keep the original and give you back the copies you made with a court date and time stamped on the first page of the *Request for Order*. The procedure may be different in some courts if you are requesting temporary emergency orders.

8 Pay filing fees

A fee is due at the time of filing.

If you cannot afford to pay the filing fee, and you do not already have a valid fee waiver order in this case, you can ask the court to waive the fee by completing and filing form FW-001, *Request to Waive Court Fees* and form FW-003, *Order on Court Fee Waiver*.

9**Temporary Emergency (Ex Parte) Orders**
(nondomestic violence restraining orders)

Courts can make temporary orders in your family law case to respond to emergencies that cannot wait to be heard on the court's regular hearing calendar.

The emergency must involve an immediate danger or irreparable harm to a party or children in the case, or an immediate loss or damage to property.

To request these orders:

- Complete form FL-300. Describe the emergency and explain why you need the temporary emergency orders before the hearing.
- Complete form FL-305 to serve as your proposed temporary orders.
- Include a declaration describing how and when you notified the other parties (or why you could not give notice) about your request and the hearing (see form FL-303).
- Complete other forms if required by your local court rules.
- Follow your court's local procedures for reserving the day for the hearing, submitting your paperwork, and paying filing fees.

10 General information about "service"

"Service" is the act of giving your legal papers to all persons named as parties in the case so that they know what orders you are asking for and have information about the hearing.

If the other parties are NOT properly served, the judge cannot make the orders you requested on the date of the hearing.

11 Serve the Request for Order and blank forms

The other party must be "served" with a:

- Copy of the *Request for Order* and all the other forms and attachments filed with the court clerk.
- Copy of any temporary emergency orders granted.
- Blank form FL-320, *Responsive Declaration to Request for Order*.
- Blank form FL-150, *Income and Expense Declaration* (if you served form FL-150 or FL-155).

12 Who can be a "server"

You cannot serve the papers. Have someone else (who is at least 18 years old) do it. The server can be a friend, a relative who is not involved in your case, a sheriff, or a professional process server.

13 "Personal Service"

Personal service means that your server walks up to each person to be served, makes sure the right person is served, and then hand-delivers a copy of all the papers (and the blank forms). If the person served does not take the papers, the server may leave the papers near the person.



Note: Sometimes the papers may be personally served on the other party's lawyer (if the other party has one) in the family law case.

14 "Service by mail"

Service by mail means that your server places copies of all the documents (and blank forms) in a sealed envelope and mails them to the address of each party being served (or to the party's lawyer, if the party has one).



The server must be 18 years of age or over and live or work in the county where the mailing took place.

Important! For questions about personal service or service by mail, talk with a lawyer or check with your court's Family Law Facilitator or Self-Help Center at www.courts.ca.gov/1083.htm.

15 When to use personal service or service by mail
Personal Service

Personal service is the best way to make sure the other adults in your case are correctly served. Sometimes you **must** use personal service.

You **must** use personal service when the court:

- ☒ Ordered personal service;
- ☒ Granted temporary emergency orders;
- ☒ Does not yet have the power to make orders that apply to the other party because the person has either NOT previously:
 - Been served with a *Summons* and *Petition*;^{*}
 - OR
 - Appeared in the case by filing a:
 - a. *Response* to a *Petition*;
 - b. *Appearance*, *Stipulations*, and *Waivers*;
 - c. Written notice of appearance;
 - d. Request to strike all or part of the *Petition*; or
 - e. Request to transfer the case.

^{*}Note: A *Request for Order* may be served at the same time as the family law *Summons* and *Petition*.

1. After serving, the server must fill out a *Proof of Personal Service* (form [FL-330](#)) and give it to you. If the server needs instructions, give them form [FL-330-INFO](#), *Information Sheet for Proof of Personal Service*
2. Take the completed *Proof of Personal Service* form to the clerk's office (or e-file it, if available in your court) at least 5 court days before your hearing.

Deadline: The deadline for personal service is **16 court days** before the hearing date, unless the court orders a different deadline.

Service by Mail

If you are not required to use personal service, you may use service by mail.

Important! Check with your court's Family Law Facilitator's Office or Self-Help Center, or ask a lawyer to be sure you are allowed to use service by mail in your case.

A *Request for Order* to change a judgment or final order on the issue of child custody, visitation (parenting time), or child support may be served by mail if:

- ☒ The documents do not include temporary emergency orders;
- ☒ The court did not order personal service; and
- ☒ You have verified the other party's current residence or office address. (You may use *Address Verification* (form [FL-334](#)).)

To change a judgment or final order on any other issue, including spousal or domestic partner support, the *Request for Order* may need to be personally served on the other party.

1. After serving, the server must fill out a *Proof of Service by Mail* (form [FL-335](#)) and give it to you. If the server needs instructions, give them *Information Sheet for Proof of Service by Mail* (form [FL-335-INFO](#)).
2. Take the completed *Proof of Personal Service* form to the clerk's office (or e-file it, if available in your court) at least 5 court days before your hearing.

Deadline: Unless the court orders a different time, service by mail must be completed at least **16 court days PLUS 5 calendar days** before the hearing date (if service is in California). Other time lines apply for service outside of California.

16 Get ready for your hearing

- Take at least two copies of your documents and filed forms to the hearing. Include a filed *Proof of Service* form.
- Find more information about preparing for your hearing at www.courts.ca.gov/1094.htm.
- For information about having the other party testify in court, go to www.courts.ca.gov/29283.htm.

17 After the hearing, the order made on form [FL-340](#), *Findings and Order After Hearing*, must be filed and served.
18 Do you have questions or need help?

- Find a lawyer through your local bar association, the State Bar of California at calbar.ca.gov, or the Lawyer Referral Service at 1-866-442-2529.
- For free and low-cost legal help (if you qualify), go to www.lawhelpca.org.
- Contact the Family Law Facilitator or Self-Help Center for information and assistance, and referrals to local legal services providers. Go to www.courts.ca.gov/selfhelp-courtresources.htm.

Note: Read form FL-300-INFO for information about how to complete this form. To ask to change or end an order that was granted in a Restraining Order After Hearing (form DV-130 or JV-255), read form FL-300-INFO and form DV-300-INFO.

1. TO (name(s)): _____
 Petitioner ☐ Respondent ☐ Other Parent/Party ☐ Other (specify): _____

a. Date: _____ Time: _____ ☐ Dept.: _____ ☐ Room: _____
 b. Address of court ☐ same as noted above ☐ other (*specify*): _____

COURT ORDER
(FOR COURT USE ONLY)

4. ☐ Time ☐ for service ☐ until the hearing ☐ is shortened. Service must be on or before *(date)*:
5. ☐ A *Responsive Declaration to Request for Order* (form FL-320) must be served on or before *(date)*:
6. ☐ The parties must attend an appointment for child custody mediation or child custody recommending counseling as follows *(specify date, time, and location)*:
7. ☐ The orders in *Temporary Emergency (Ex Parte) Orders* (form FL-305) apply to this proceeding and must be personally served with all documents filed with this *Request for Order*.
8. ☐ Other *(specify)*:

Date: _____

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

REQUEST FOR ORDER

Note: Place a mark ☒ in front of the box that applies to your case or to your request. If you need more space, mark the box for "Attachment." For example, mark "Attachment 2a" to indicate that the list of children's names and birth dates continues on a paper attached to this form. Then, on a sheet of paper, list each attachment number followed by your request. At the top of the paper, write your name, case number, and "FL-300" as a title. (You may use *Attached Declaration (form MC-031)* for this purpose.)

1. ☐ RESTRAINING ORDER INFORMATION

One or more domestic violence restraining/protective orders are now in effect between (specify):

☐ Petitioner ☐ Respondent ☐ Other Parent/Party (Attach a copy of the orders if you have one.)

The orders are from the following court or courts (specify county and state):

- | | |
|---|----------------------|
| a. ☐ Criminal: County/state (specify): | Case No. (if known): |
| b. ☐ Family: County/state (specify): | Case No. (if known): |
| c. ☐ Juvenile: County/state (specify): | Case No. (if known): |
| d. ☐ Other: County/state (specify): | Case No. (if known): |

2. ☐ CHILD CUSTODY

☐ I request temporary emergency orders

☐ VISITATION (PARENTING TIME)

a. I request that the court make orders about the following children (specify):

<u>Child's Name</u>	<u>Date of Birth</u>	☐ Legal Custody to (person who decides: health, education, etc):	☐ Physical Custody to (person with whom child lives):
---------------------	----------------------	---	--

b. ☐ The orders I request for ☐ child custody ☐ visitation (parenting time) are:

(1) ☐ Specified in the attached forms:

☐ Form FL-305	☐ Form FL-311	☐ Form FL-312	☐ Form FL-341(C)
☐ Form FL-341(D)	☐ Form FL-341(E)	☐ Other (specify):	

(2) ☐ As follows (specify):

☐ Attachment 2a.

☐ Attachment 2b.

c. The orders that I request are in the best interest of the children because (specify):

☐ Attachment 2c.

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

2. d. ☐ This is a change from the current order for ☐ child custody ☐ visitation (parenting time).
- (1) ☐ The order for legal or physical custody was filed on *(date)*: . The court ordered *(specify)*:
- (2) ☐ The visitation (parenting time) order was filed on *(date)*: . The court ordered *(specify)*:

3. ☐ CHILD SUPPORT ☐ Attachment 2d.
- (Note: An earnings assignment may be issued. See *Income Withholding for Support* (form FL-195))
- a. I request that the court order child support as follows:
- Child's name and age

☐ I request support for each child based on the child support guideline.

☐ Monthly amount (\$) requested (if not by guideline)

- ☐ Attachment 3a.
- b. ☐ I want to change a current court order for child support filed on *(date)*:
 The court ordered child support as follows *(specify)*:
- c. I have completed and filed with this *Request for Order* a current *Income and Expense Declaration* (form FL-150) or I filed a current *Financial Statement (Simplified)* (form FL-155) because I meet the requirements to file form FL-155.
- d. The court should make or change the support orders because *(specify)*: ☐ Attachment 3d.

4. ☐ SPOUSAL OR DOMESTIC PARTNER SUPPORT
- (Note: An *Earnings Assignment Order For Spousal or Partner Support* (form FL-435) may be issued.)
- a. ☐ Amount requested *(monthly)*: \$
- b. ☐ I want the court to ☐ change ☐ end the current support order filed on *(date)*:
 The court ordered \$ per month for support.
- c. ☐ This request is to modify (change) spousal or partner support after entry of a judgment.
 I have completed and attached *Spousal or Partner Support Declaration Attachment* (form FL-157) or a declaration that addresses the same factors covered in form FL-157.
- d. I have completed and filed a current *Income and Expense Declaration* (form FL-150) in support of my request.
- e. The court should make, change, or end the support orders because *(specify)*: ☐ Attachment 4e.

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

5. ☐ **PROPERTY CONTROL** ☐ I request temporary emergency orders
- a. The ☐ petitioner ☐ respondent ☐ other parent/party be given exclusive temporary use, possession, and control of the following property that we ☐ own or are buying ☐ lease or rent (*specify*):
- b. The ☐ petitioner ☐ respondent ☐ other parent/party be ordered to make the following payments on debts and liens coming due while the order is in effect:
- | | | | |
|---------------|------------|------------------|-----------------|
| Pay to: _____ | For: _____ | Amount: \$ _____ | Due date: _____ |
| Pay to: _____ | For: _____ | Amount: \$ _____ | Due date: _____ |
| Pay to: _____ | For: _____ | Amount: \$ _____ | Due date: _____ |
| Pay to: _____ | For: _____ | Amount: \$ _____ | Due date: _____ |
- c. ☐ This is a change from the current order for property control filed on (*date*):
- d. Specify in Attachment 5d the reasons why the court should make or change the property control orders.
6. ☐ **ATTORNEY'S FEES AND COSTS**
- I request attorney's fees and costs, which total (*specify amount*): \$ _____ . I filed the following to support my request:
- a. A current *Income and Expense Declaration* (form FL-150).
- b. A *Request for Attorney's Fees and Costs Attachment* (form FL-319) or a declaration that addresses the factors covered in that form.
- c. A *Supporting Declaration for Attorney's Fees and Costs Attachment* (form FL-158) or a declaration that addresses the factors covered in that form.
7. ☐ **OTHER ORDERS REQUESTED** (*specify*): ☐ Attachment 7.
8. ☐ **TIME FOR SERVICE / TIME UNTIL HEARING** I urgently need:
- a. ☐ To serve the *Request for Order* no less than (*number*): _____ court days before the hearing.
- b. ☐ The hearing date and service of the *Request for Order* to be sooner.
- c. I need the order because (*specify*): ☐ Attachment 8.
9. ☐ **FACTS TO SUPPORT** the orders I request are listed below. The facts that I write in support and attach to this request cannot be longer than 10 pages, unless the court gives me permission. ☐ Attachment 9.

I declare under penalty of perjury under the laws of the State of California that the information provided in this form and all attachments is true and correct.

Date: _____

(TYPE OR PRINT NAME)

(SIGNATURE OF APPLICANT)



Requests for Accommodations

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least five days before the proceeding. Contact the clerk's office or go to www.courts.ca.gov/forms for *Request for Accommodations by Persons With Disabilities and Response* (form MC-410). (Civ. Code, § 54.8.)

SHORT TITLE: _____	CASE NUMBER: _____
-----------------------	-----------------------

ATTACHMENT (Number) : _____

(This Attachment may be used with any Judicial Council form.)

(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)

Page _____ of _____
(Add pages as required)

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

- Employer:
- Employer's address:
- Employer's phone number:
- Occupation:
- Date job started:
- If unemployed, date job ended:
- I work about _____ hours per week.
- I get paid \$ _____ gross (before taxes) ☐ per month ☐ per week ☐ per hour.

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

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

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

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

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

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

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

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

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

Number of years in this business (specify):

Name of business (specify):

Type of business (specify):

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

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

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

10. **Deductions**

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

11. **Assets**

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

* Check the box if the spousal support order or judgment was executed by the parties and the court before January 1, 2019, or if a court-ordered change maintains the spousal support payments as taxable income to the recipient and tax deductible to the payor.

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

12. The following people live with me:

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

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

a. Home:

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

r. TOTAL EXPENSES (a-q) (do not add in the amounts in a(1)(a) and (b)) \$
--

s. Amount of expenses paid by others \$

14. Installment payments and debts not listed above

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

15. Attorney fees (This information is required if either party is requesting attorney fees.):

- a. To date, I have paid my attorney this amount for fees and costs (specify): \$
- b. The source of this money was (specify):
- c. I still owe the following fees and costs to my attorney (specify total owed): \$
- d. My attorney's hourly rate is (specify):

I confirm this fee arrangement.

Date:

(TYPE OR PRINT NAME OF ATTORNEY)

(SIGNATURE OF ATTORNEY)

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

CHILD SUPPORT INFORMATION**(NOTE: Fill out this page only if your case involves child support.)****16. Number of children**

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

17. Children's health-care expenses

- a. ☐ I do ☐ I do not have health insurance available to me for the children through my job.
- b. Name of insurance company:
- c. Address of insurance company:

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

18. Additional expenses for the children in this case

Amount per month

- a. Child care so I can work or get job training \$ _____
- b. Children's health care not covered by insurance \$ _____
- c. Travel expenses for visitation \$ _____
- d. Children's educational or other special needs *(specify below)*: \$ _____

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

Amount per month

For how many months?

- a. Extraordinary health expenses not included in 18b \$ _____
- b. Major losses not covered by insurance *(examples: fire, theft, other insured loss)* \$ _____
- c. (1) Expenses for my minor children who are from other relationships and are living with me \$ _____
 (2) Names and ages of those children *(specify)*:

(3) Child support I receive for those children \$ _____

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

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

PETITIONER:
RESPONDENT:

CASE NUMBER:

SPOUSAL OR DOMESTIC 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)
- ☐ Request for Order (form FL-300)
- ☐ Other (specify):

1. Spousal or domestic partner support.

- a. I am the (specify all that apply):
- (1) ☐ petitioner ☐ respondent.
- (2) ☐ support payee (party asking for support) ☐ support payor (party being asked to pay support).
- b. I request that the court (check all that apply)
- (1) ☐ enter a judgment for spousal or domestic partner support for ☐ petitioner ☐ respondent.
- (2) ☐ modify the judgment for spousal or domestic partner support for ☐ petitioner ☐ respondent.
- (3) ☐ deny the request to modify the judgment for spousal or domestic partner support.
- (4) ☐ 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.

SECTION 1: FACTS ABOUT BOTH PARTIES

3. Length of marriage or domestic partnership (Family Code section 4320(f))

- a. (1) Date of marriage:
- (2) Date of separation:
- (3) Time from date of marriage to date of separation:..... _____ years _____ months
- b. (1) Date domestic partnership was registered:
- (2) Date of separation:
- (3) Time from date of registration of the domestic partnership to date of separation: _____ years _____ months
- c. If applicable, total combined years and months for the marriage (a(3)) and the domestic partnership (b(3))..... _____ years _____ months

4. Standard of living of the marriage or domestic partnership (Family Code section 4320(a)) ☐ See Attachment 4

The standard of living established during the marriage or domestic partnership was (describe, for example, information from your income tax return, type and frequency of vacations, value of home and other real estate, value of investments, type of vehicles owned, credit card use or nonuse, ability to save for retirement):

PETITIONER: RESPONDENT:	CASE NUMBER:
----------------------------	--------------

5. **Age and health of the parties** (Family Code section 4320(h))

- a. The age of the party asking for support is:
- b. The age of the party being asked to pay support is:
- c. The health condition of the party asking for support is (*describe*):

☐ See Attachment 5c

- d. The health condition of the party being asked to pay support is (*describe*):

☐ See Attachment 5d

6. **Documented history of domestic violence** (Family Code section 4320(i))

☐ See Attachment 6

The court will consider all documented evidence of any history of domestic violence between the parties or perpetrated by either party against either party's child, including but not limited to the following:

- a. A plea of nolo contendere ("no contest").
- b. Emotional distress resulting from domestic violence against the party asking for support by the party being asked to pay support.
- c. Any history of violence against the party being asked to pay support by the party asking for support.
- d. A *Restraining Order After Hearing* (form DV-130).
- e. A finding by a court as part of a case involving divorce, separation, or a child custody proceeding, or any other proceeding in family court in which the court has found that the spouse or domestic partner committed domestic violence.
- f. Other evidence of any history of violence between the parties.

Attach to this form copies of the documents that you want the court to consider. Label them "Attachment 6."

7. **Documented evidence of criminal conviction** (Family Code section 4320(m))

- a. ☐ **Felony conviction of the party asking for support**

The party being asked to pay support requests that the court find that the party asking for support is prohibited by law from receiving support (including medical, life, or other insurance benefits or payments) under Family Code section 4324.5 because:

- (1) The party asking for support was convicted of a violent sexual felony or domestic violence felony against the party being asked to pay support within five years after the conviction (and any time served in custody, on probation or on parole); and
- (2) The petition for divorce was filed within five years after the spouse's or domestic partner's conviction (and any time served in custody or on parole).

- b. ☐ **Misdemeanor conviction of the party asking for support**

☐ See Attachment 7b

- (1) There is a rebuttable presumption that the party asking for support is prohibited from receiving support from the party being asked to pay support under Family Code section 4325 because:

- (A) The party asking for support was either convicted of a domestic violence misdemeanor against the party being asked to pay support in this case or convicted of a misdemeanor against the other party that resulted in a term of probation under Penal Code section 1203.097; and
- (B) The conviction was entered by the court within five years before the petition for divorce was filed (or the conviction was entered at any time during the divorce case).

- (2) Based on a preponderance of the evidence,

- (A) ☐ The party being asked to pay support asks the court to find that the presumption has not been rebutted.
- (B) ☐ The party asking for support asks the court find that the presumption has been rebutted.

Attach to this form a declaration and documents that you want the court to consider. Label them "Attachment 7b"

PETITIONER: RESPONDENT:	CASE NUMBER:
----------------------------	--------------

SECTION 2: FACTS ABOUT THE PARTY ASKING FOR SUPPORT**8. Earning capacity** (Family Code section 4320(a)(1))

- a. The marketable skills (training, job skills, and work history) of the party asking for support (*describe*): ☐ See Attachment 8a
- b. The current job market for the job skills of the party asking for support is (*specify*): ☐ See Attachment 8b
- c. The time and expenses required for the party asking for support to acquire the appropriate education and training to develop the skills for the job market described in (b) (*specify*): ☐ See Attachment 8c
- d. The possible need for retraining or education to acquire other, more marketable skills or employment (*specify*): ☐ See Attachment 8d
- e. Indicate the extent to which the party asking for support is able to earn enough money to maintain the standard of living established during the marriage or domestic partnership.

PETITIONER: RESPONDENT:	CASE NUMBER:
----------------------------	--------------

9. **Earning capacity** (Family Code section 4320(a)(2)) ☐ See Attachment 9
- a. The party asking for support ☐ has ☐ has not had periods of unemployment because of the time needed to attend to domestic duties. *(Complete (b) if there were periods of unemployment.)*
- b. Specify the extent to which the present or future earning capacity of the party asking for support is impaired by periods of unemployment to devote time to domestic duties during the marriage or domestic partnership.
-
10. **Contributions to the education and training of the party being asked to pay support** ☐ See Attachment 10
- a. The party asking for support ☐ did ☐ did not contribute to the education, training, career position, or license of the party being asked to pay support *(If the party asking for support did contribute, complete item b below.)*
- b. Specify the extent to which the party asking for support contributed to the education, training, career position, or license of the party being asked to pay support.
-
11. **Care for children** (Family Code section 4320(g)) ☐ See Attachment 11
- a. The party asking for support ☐ has ☐ has not had periods of unemployment to care for the children of the marriage or domestic partnership. *(Complete (b) if there were periods of unemployment.)*
- b. The party asking for support ☐ is ☐ is not able to be gainfully employed without unduly interfering with the interests of the children in the care of the party asking for support *(specify):*
-
12. **Needs of the party asking for support** (Family Code section 4320(d)) ☐ See Attachment 12
- Specify the needs of the party asking for support based on the standard of living established during the marriage or domestic partnership, as described in question 4.
-
13. **Assets and debts** (Family Code section 4320(e)) ☐ See Attachment 13
- a. The assets, including separate property, of the party asking for support are *(specify):*

PETITIONER: RESPONDENT:	CASE NUMBER:
----------------------------	--------------

b. The debts, including separate property, of the party asking for support are *(specify)*:

14. **Tax consequences** (Family Code section 4320(j))

☐ See Attachment 14

The immediate and specific tax consequences for the party asking for support are *(specify)*:

15. **Goal to become self-supporting** (Family Code section 4320(l))

☐ See Attachment 15

Notice: When ordering spousal or domestic partner support in a judgment, the court may advise (warn) the party asking for support to make reasonable efforts to become self-supporting within a reasonable period of time, considering all the factors in Family Code section 4320. The court may decide that this warning (often called a “Gavron” warning) is not appropriate if the case involves a marriage or domestic partnership of long duration (about 10 years or longer). Generally, failure to become self-supporting after the court gives the warning can result in an order to reduce the amount of the support award.

- a. This ☐ is ☐ is not a marriage or domestic partnership of long duration (ten years or more).
- b. The party asking for support ☐ is ☐ is not self-supporting *(If not, specify below what steps, if any, the party asking for support will take to become self-supporting within a reasonable period of time):*

c. Other *(specify below)*:

PETITIONER: RESPONDENT:	CASE NUMBER:
----------------------------	--------------

SECTION 3: FACTS ABOUT THE PARTY BEING ASKED TO PAY SUPPORT**16. Ability to pay support / earning capacity** (Family Code sections 4320(a) and (c))☐ See Attachment 16

- a. The earned income of the party being asked to pay support is *(specify)*: ☐ unknown
- b. The unearned income of the party being asked to pay support is *(specify)*: ☐ unknown
- c. This party ☐ does ☐ does not have the ability to earn enough money to maintain the standard of living described in 4 for both spouses or domestic partners. *(If not, explain why below.)*

- d. Based on the above responses, this party ☐ is ☐ is not able to pay spousal or domestic partner support.

17. Needs of the party being asked to pay support (Family Code section 4320(d))☐ See Attachment 17

Specify the needs of the party being asked to pay support based on the standard of living established during the marriage or domestic partnership, as described in question 4.

18. Assets and debts (Family Code section 4320(e))☐ See Attachment 18

- a. The assets, including separate property, of the party being asked to pay support are *(specify)*:
- b. The debts, including separate property, of the party being asked to pay support are *(specify)*:

19. Tax consequences (Family Code section 4320(j))☐ See Attachment 19

The immediate and specific tax consequences for the party being asked to pay support *(specify)*:

PETITIONER: RESPONDENT:	CASE NUMBER:
----------------------------	--------------

SECTION 4: BALANCE OF HARSHIPS AND OTHER FACTORS**20. Balance of hardships** (Family Code section 4320(k))
☐ See Attachment 20

Describe below any special financial difficulties to the party if ordered to pay support compared to the hardship to the party who is asking for support. *(For example, consider the ability of a party to pay support versus the need of the other an party to receive financial support).*

21. Indicate below other factors, if any, that the court should consider that are just and equitable in ordering spousal or domestic partner.(Family Code section 4320(n))
☐ See Attachment 21

Number of pages attached: _____

- Date:

(SIGNATURE OF PERSON WHO SERVED THE PAPERS)

INFORMATION SHEET FOR PROOF OF PERSONAL SERVICE

Use these instructions to complete the *Proof of Personal Service* (form FL-330).

A person at least 18 years of age or older must serve the documents. There are two ways to serve documents: (1) personal delivery and (2) by mail. See the *Proof of Service by Mail* (form FL-335) if the documents are being served by mail. The person who serves the documents must complete a proof of service form for the documents being served. **You cannot serve documents if you are a party to the action.**

INSTRUCTIONS FOR THE PERSON WHO SERVES THE DOCUMENTS (TYPE OR PRINT IN BLACK INK)

You must complete a proof of service for each package of documents you serve. For example, if you serve the respondent and the other parent, you must complete two proofs of service; one for the respondent and one for the other parent.

Complete the top section of the proof of service forms as follows:

First box, left side: In this box print the name, address, and phone number of the person for whom you are serving the documents.

Second box, left side: Print the name of the county in which the legal action is filed and the court's address in this box. Use the same address for the court that is on the documents you are serving.

Third box, left side: Print the names of the petitioner/plaintiff, respondent/defendant, and other parent in this box. Use the same names listed on the documents you are serving.

First box, top of form, right side: Leave this box blank for the court's use.

Second box, right side: Print the case number in this box. This number is also stated on the documents you are serving.

Third box, right side: Print the hearing date, time, and department. Use the same information that is on the documents you are serving.

1. You are stating that you are over the age of 18 and that you are neither a party of this action nor a protected person listed in any of the orders.
2. Print the name of the party to whom you handed the documents.
3. List the name of each document that you delivered to the party.
4.
 - a. Write in the date that you delivered the documents to the party.
 - b. Write in the time of day that you delivered the documents to the party.
 - c. Print the address where you delivered the documents.
5. Check the box that applies to you. If you are a private person serving the documents for a party, check box "a."
6. Print your name, address, and telephone number. If applicable, include the county in which you are registered as a process server and your registration number.
7. You must check this box if you are not a California sheriff or marshal. You are stating under penalty of perjury that the information you have provided is true and correct.
8. Do not check this box unless you are a California sheriff or marshal.

Print your name, fill in the date, and sign the form.

If you need additional assistance with this form, contact the family law facilitator in your county.