	FOR COURT USE ONLY
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	POR COURT OSE ONE!
TELEPHONE NO.: FAX NO. (Optional):	
E-MAIL ADDRESS (Optional):	
ATTORNEY FOR (Name):	* 1
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS:	
MAILING ADDRESS:	
CITY AND ZIP CODE:	
BRANCH NAME:	
MARRIAGE OR PARTNERSHIP OF	
PETITIONER:	
RESPONDENT:	
JUDGMENT	CASE NUMBER:
☐ DISSOLUTION ☐ LEGAL SEPARATION ☐ NULLITY	
Status only Reserving jurisdiction over termination of marital or domestic	
partnership status	
Judgment on reserved issues	
Date marital or domestic partnership status ends:	
1. This judgment contains personal conduct restraining orders modifies ex	sting restraining orders. hey expire on (date):
2. This proceeding was heard as follows: Default or uncontested By declaration	under Family Gode 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. 	
Section Control Contro	
THE COURT ORDERS, GOOD CAUSE APPEARING 4. a. Judgment of dissolution is entered. Marital or domestic partnership status is term	sinated and the narties are restored to the
status of single persons	illiated and the parties are restored to the
(1) on (specify date):	
(2) on a date to be determined on noticed motion of either party or on stipul	ation.
b. Judgment of legal separation is entered.	the control of the control of
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):	is at avaignt as provided below
 g. Jurisdiction is reserved over all other issues, and all present orders remain in eff h. This judgment contains provisions for child support or family support. Each party 	must complete and file with the court a
h. La This judgment contains provisions for child support or family support. Each party Child Support Case Registry Form (form FL-191) within 10 days of the date of the	is judgment. The parents must notify the
court of any change in the information submitted within 10 days of the change, b	y filing an updated form. The Notice
of Rights and Responsibilities—Health-Care Costs and Reimbursement Procedu	ures and Information Sheet on Changing a
Child Support Order (form FL-192) is attached.	Page 1 of 2

Form Adopted for Mandatory Use Judicial Council of California FL-180 [Rev. July 1, 2012] JUDGMENT (Family Law) Family Code, §§ 2024, 2340, 2343, 2346 www.courts.ca.gov



FL-180 [Rev. July 1, 2012]
CEB Essential
ElForms

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.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:			CASE NUMBER:	
CHILD CUSTODY AND VIS	SITATION (P.	ARENTING TIME) ORDI	ER ATTACHMEN	IT
Findings and Order After Hearing (form FL-340) Judgment (form FL-180) Judgment (form FL-250) Stipulation and Order for Custody and/or Visitation of Children (form FL-355) Other (specify):				
 Jurisdiction. This court has jurisdiction to ma Enforcement Act (Family Code sections 3400 		dy orders in this case under	r the Uniform Child	Custody Jurisdiction and
Notice and opportunity to be heard. The re laws of the State of California.	sponding party	was given notice and an o	pportunity to be hea	ard, as provided by the
Country of habitual residence. The country the United States Other (speci		dence of the child or childre	en in this case is	
4. Penalties for violating this order. If you viol	ate this order,	you may be subject to civil	or criminal penalties	s, or both.
5. Child abduction prevention. There is a risk that one of the parties will take the children out of California without the other party's permission. (Child Abduction Prevention Order Attachment (form FL-341(B)) is attached and must be obeyed.)				
6. Child custody. Custody of the minor c	hildren of the p	arties is awarded as follows	s:	
Child's Name	Birth Date	Legal custody to (person who decides about health, education, and	ut the child's	Physical custody to: (person the child regularly lives with)
7. Child custody orders with allegation (Do not complete this section if the par (parenting time), in writing or stated in	ties have enter			ustody and/or visitation
Allegations have been raised in for petitioner responde				aring that
(1) a history of abuse against any they live with or are dating or e		persons: a child, the other	parent, their curren	at spouse, or the person
(2) the habitual or continual illegal habitual or continual abuse of p			ual or continual abu	se of alcohol, or the
b The court does NOT grant so other parent/party	le or joint custo	ody of the minor children to	petitioner	respondent
c. Even though there are allega custody of the minor child as				ANTS sole or joint Attachment 7c.

THIS IS A COURT ORDER.

PETITIONER: RESPONDENT:		CASE NUMBER:
OTHER PARENT/PARTY:		
3. Visitation (Parenting Time	•)	
a. Reasonable right violence)	of visitation to the party without physical custody (not	appropriate in cases involving domestic
b. See the attached	page document	
c. The parties will go location):	o to child custody mediation or child custody recomme	ending counseling at (specify date, time, and
d. No Visitation (par	enting time)	
e. Visitation (parenti will be as follows:		other (name):
(1) Weeke	ends starting(date):	
(Note:	The first weekend of the month is the first weekend w	ith a Saturday.)
	1st 2nd 3rd 4th 5th	weekend of the month
from	at a.m. p.m./	if applicable, specify: start of school after school
to	at a.m p.m./ (day of week) (time)	if applicable, specify: start of school after school
(a) _	The parties will alternate the fifth weekends, with other parent/party having the initial fifth weekends.	
(b)	The petitioner respondent	other parent/party will have the
V. /	fifth weekend in odd even num	bered months.
(2) Altern	ate weekends starting (date):	
from	at a.m. p.m./ (day of week) (time)	/ if applicable, specify: start of school after school
to	at a.m. p.m./ (day of week) (time)	/ if applicable, specify: start of school after school
(3) Week	days starting(date):	start of school
from	at a.m. p.m./ (day of week) (time)	/ if applicable, specify: after school
to	(day of week) at a.m. p.m./	/ if applicable, specify: start of school after school
	visitation (parenting time) days and restrictions are 25 may be used for this purpose) as follows:	re: Iisted in Attachment 7e(4) (form

OTHER	PETITIONER: RESPONDENT: PARENT/PARTY:	CASE NUMBER		
9	Visitation (parenting time) with allegations of a history of abuse, substance a. Supervised visitation (parenting time). (1) Until further order of the court other (specify): other parent/party (respondent other parent/party (respondent supervised visitation (parenting time) with the minor childred (2) In addition, Supervised Visitation Order (form FL-341(A) is attantion.	, the name): en according to the schedule on page 2. ched. Into an agreement on child custody and/or e abuse under Family Code section 3011, the (name): or children as set forth in 8.		
(3) The orders for visitation (parenting time) are specific as to time, day, place, and manner of transfer of the child, as Family Code section 6323(c) requires. 10. Transportation for visitation (parenting time) and place of exchange a. The children must be driven only by a licensed and insured driver. The vehicle must be legally registered with the Department of Motor Vehicles, and must have child restraint devices properly installed, as required by law. b. Transportation to begin the visits will be provided by the petitioner respondent other (specify): c. Transportation from the visits will be provided by the petitioner respondent other (specify): d. The exchange point at the beginning of the visit will be at (address): e. The exchange point at the end of the visit will be at (address): f. During the exchanges, the party driving the children will wait in the car and the other party will wait in the home (or exchange location) while the children go between the car and the home (or exchange location). g. Other (specify):				
11	Travel with children. The petitioner respondent other must have written permission from the other parent or a court order to take the a the state of California. b the following counties (specify): c other places (specify):	parent/party <i>(name):</i> children out of		

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
12. Holiday schedule. The children will spend holiday time as listed below Holiday Schedule Attachment (form FL-341(C)) may be used for this purpose.)	in the attached schedule. (Children's
Additional custody provisions. The parties will follow the additional custody provisions—Physical Custody Attachment (form	
Joint legal custody. The parties will share joint legal custody as listed (Joint Legal Custody Attachment (form FL-341(E)) may be used for this purpose.	pelow in the attached schedule.
 15. Access to children's records. Both the custodial and noncustodial parent have the rig about their minor children (including medical, dental, and school records) and consult w to the children. 16. Other (specify): 	
THIS IS A COURT ORDER.	

FL-341 [Rev. January 1, 2023]

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

Page 4 of 4

PETITIONER/PLAINTIFF:	CASE NUMBER:			
RESPONDENT/DEFENDANT:				
OTHER PARENT/PARTY:				
CHILD SUPPORT INFORMATION AND ORDER ATTACHMENT TO Findings and Order After Hearing (form FL-340) Judgment (form FL-180) Judgment (form FL-250) Restraining Order After Hearing (CLETS-OAH) (form DV-130) Other (specify):				
THE COURT USED THE FOLLOWING INFORMATION IN DETERMINING THE AMOU	NT OF CHILD SUPPORT:			
 A printout of a computer calculation and findings is attached and incorporated in below. 				
2. Income Gross monthly	Net monthly Receiving			
a. Each parent's monthly income is as follows: income Petitioner/plaintiff: \$ Respondent/defendant: \$ Other parent/party: \$	income TANF/CalWORKS \$ \$ \$			
b. Imputation of income. The court finds that the Petitioner/plaintiff Other parent/party	Respondent/defendant has the capacity to earn:			
	pport 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:	%			
4. Hardships Other parent/party:	%			
Hardships for the following have been allowed in calculating child support:				
Petitioner/ Respondent/	Other parent/ Approximate ending time			
<u>plaintiff</u> <u>defendant</u>	party for the hardship			
a. Other minor children: \$	\$ \$			
b.	\$			
	*			
THE COURT ORDERS 5. Low-income adjustment				
a. The low-income adjustment applies.	a			
b. The low-income adjustment does not apply because (specify reasons).	:			
6. Child support a. Base child support Petitioner/plaintiff Respondent/defendant Other parent/party must pay child support beginning (date): and continuing until further order of the court, or until the child marries, dies, is emancipated, reaches				
age 19, or reaches age 18 and is not a full-time high school student, which				
Child's name Date of birth Monthly am	ount Payable to (name):			
Payable on the 1st of the month one-half on the 1st and one-half on the 15th of the month				
other (specify):				

THIS IS A COURT ORDER.

Page 1 of 3

	FL-342
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/PARTY:	CASE NUMBER:
THE COURT FURTHER ORDERS 6. b. Mandatory additional child support (1) Child-care costs related to employment or reasonably necessary job traini (a) Petitioner/plaintiff must pay: % of total or \$ (b) Respondent/defendant must pay: % of total or \$ (c) Other parent/party must pay: % of total or \$ (d) Costs to be paid as follows (specify): c. Mandatory additional child support	per month child-care costs. per month child-care costs. per month child-care costs.
(2) Reasonable uninsured health-care costs for the children (a) Petitioner/plaintiff must pay: % of total or (b) Respondent/defendant must pay: % of total or (c) Other parent/party must pay: % of total or (d) Costs to be paid as follows (specify): d. Additional child support	\$ per month. \$ per month. per month.
(1) Costs related to the educational or other special needs of the childrer (a) Petitioner/plaintiff must pay: % of total or (b) Respondent/defendant must pay: % of total or (c) Other parent/party must pay: % of total or (d) Costs to be paid as follows (specify): (2) Travel expenses for visitation	per month. per month. per month. per month.
(a) Petitioner/plaintiff must pay: % of total or (b) Respondent/defendant must pay: % of total or (c) Other parent/party must pay: % of total or (d) Costs to be paid as follows (specify):	\$ per month. \$ per month. \$ per month.
e. Non-Guideline Order This order does not meet the child support guideline set forth in Family Code Findings Attachment (form FL-342(A)) is attached.	
7. Health-care expenses a. Health insurance coverage for the minor children of the parties must be maintained petitioner/plaintiff respondent/defendant other parent/party their respective places of employment or self-employment. Both parties are ordered and reimbursement of any health-care claims. The parent ordered to provide health coverage for the child after the child attains the age when the child is no longer con under the insurance contract, if the child is incapable of self-sustaining employment disabling injury, illness, or condition and is chiefly dependent upon the parent provide maintenance.	by the if available at no or reasonable cost through to cooperate in the presentation, collection, insurance must seek continuation of asidered eligible for coverage as a dependent t because of a physically or mentally
 b. Health insurance is not available to the petitioner/plaintiff resat a reasonable cost at this time. c. The party providing coverage must assign the right of reimbursement to the company of the party providing coverage must assign the right of reimbursement to the content of the content of the party providing coverage must assign the right of reimbursement to the content of the party providing coverage must assign the right of reimbursement to the content of the party providing coverage must assign the right of the party providing coverage must assign the right of the party providing coverage must assign the right of the party providing coverage must assign the right of the party providing coverage must assign the right of the party providing coverage must assign the right of the party providing coverage must assign the right of the party providing coverage must assign the right of the party providing coverage must assign the right of the party providing coverage must assign the right of the party providing coverage must assign the right of the party providing coverage must assign the right of the party providing coverage must assign the right of the party providing coverage must assign the right of the party providing coverage must assign the right of the party providing coverage must as a party providing coverage must approximate must approximate must approximate must approximate must approximate must appr	spondent/defendant
 Earnings assignment An earnings assignment order is issued. Note: The payor of child support is responsible recipient until support payments are deducted from the payor's wages and for payment 	ele for the payment of support directly to the tof any support not paid by the assignment.

FL-342 [Rev. January 1, 2020]

CEB Essential Forms

4	FL-342	
PETITIONER/PLAINTIFF:	CASE NUMBER:	
RESPONDENT/DEFENDANT:		
OTHER PARENT/PARTY:		
9. In the event that there is a contract between a party receiving support and a private support must pay the fee charged by the private child support collector. This fee mu amount of past due support nor may it exceed 50 percent of any fee charged by the judgment created by this provision is in favor of the private child support collector and	ust not exceed 33 1/3 percent of the total e private child support collector. The money	
10. Employment search order (Family Code § 4505) Petitioner/plaintiff Respondent/defendant Other parents following terms and conditions: 11. Other orders (specify):	/party is ordered to seek employment with the	
The data state (opposity).		
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. 		
 If this form is attached to Restraining Order After Hearing (form DV-130), the su remain in effect after the restraining orders issued on form DV-130 end. 	pport orders issued on this form (form FL-342)	
13. Child Support Case Registry Form		
Both parties must complete and file with the court a <i>Child Support Case Registry Fe</i> this order. Thereafter, the parties must notify the court of any change in the informatiling 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.	,	

(C) specified below:

		FL-343
	PETITIONER: RESPONDENT:	CASE NUMBER:
2.	e The parties are both self-supporting. f The standard of living established during the marriage or domestic partnership	o was (describe): See Attachment 2f.
	g The Court finds that the parties have knowingly, intelligently, and voluntarily e	ntered into a stipulation.
3.	Jurisdiction	
Ο.		erved for later determination.
		itioner respondent.
		nicitorrespectaests.
	c. The court's jurisdiction over the issue of support will end on (specify date):	
4.	Support amount and payment terms	
	a. The petitioner respondent must pay to the petitioner	respondent
	as temporary permanent spousal support family sup	oport domestic partner support
	the following amount each month: \$	
	b. Support payments will begin (date):	
	c. Support payments are:	
	(1) payable through (specify end date):	
	(2) payable on the: day of each month.	
	(3) Other (specify):	

	A.	
	d. Support must be paid by check, money order, or cash other	method (specify):
5.	Earnings assignment	
	 An earnings assignment for the support will issue as requested by permoder. The payor of spousal, family, or domestic partner support is responsible recipient until support payments are deducted from the earnings, and for any 	titioner respondent. e for the payment of support directly to the support not paid by the assignment.
	 Service of the earnings assignment is stayed provided the payor is not more t in paying spousal, family, or domestic partner support. 	than (specify number): days late
6.	Termination (end) of support	
	 a. By law, unless the parties otherwise agree in writing, the support payor's obligation dies or the support payee remarries or registers a new domestic partnership. 	to pay support will end when either party
	b. Parties' agreement The parties agree that the support payor's obligation to pay support will not er payor's obligation to pay support will continue until (specify below the terms of payee's obligation to pay support will end):	nd as described in 6a. Instead, the support of your agreement about when the support

PETITIONER:	CASE NUMBER:	
RESPONDENT:		
7. Family support orders. This order is for family support.		
 Both parties must complete and file with the court a Child Support Case Reg the date of this order. 	istry Form (form FL-191) within 10 days of	
 The parents must notify the court of any change of information submitted wit form. 	hin 10 days of the change by filing an updated	
c. A Notice of Rights and Responsibilities (Health-Care Costs and Reimbursen Changing a Child Support Order (form FL-192) must be attached to the cour		
8. Notice of change of employment The parties must inform each other in writing within 10 days of any change of employment, and include the new employer's name, address, and telephone number.		
9. Duty to become self-supporting		
a. Notice: It is the goal of this state that each party must make reasonable good-faith efforts to become self-supporting as provided in Family Code section 4320. Failure to make reasonable good-faith efforts may be one of the factors considered by the court as a basis for modifying or terminating support.		
b The petitioner respondent should make reasonable good-faith efforts to become self-supporting.		
c. Other (specify):		
40 - 44 - 44 - 54 - 44 - 44 - 54 - 44 - 54		
10. Attachment to Restraining Order After Hearing (form DV-130)		
a. This form is attached to Restraining Order After Hearing (CLETS-OAH) (Order of Protection) (form DV-130).		
b. The orders issued on this form (FL-343) do not expire on termination of the	restraining orders issued on form DV-130.	
11. Other orders or agreements (specify):		

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

7.0		FL-345
-	PETITIONER: RESPONDENT:	£ NUMBER:
3	*	TACHMENT 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 the respondent cannot be found. Under Family Code petitioner respondent. c. The petitioner will receive the following assets: (Attach in the petitioner will receive the petit	e section 2604, the entire community estate is awarded to the
	d. The respondent will receive the following assets: (Attac	h additional page if necessary.)
	e. The petitioner respondent will be respondent (QDRO) to divide the following plan or retirement account(s)	sible for preparing and filing a Qualified Domestic Relations Order (specify):
	The fee for preparation of the QDRO shall be shared as followed	ows (specify):
	f. Other orders:	
	 g. Each spouse will receive the assets listed above as his any and all documents required to carry out this division. h. The court reserves jurisdiction to divide any community assets. 	
 Division of community property debts a. There are no community debts. b. All community debts have been paid by the petitioner respondent must rein The payment plan is as follows: 		ner respondent. burse the other party: \$
	c. The petitioner will be responsible for the following debt	s: (Attach additional page if necessary.)
	d. The respondent will be responsible for the following de	bts: (Attach additional page if necessary.)

_		FL-345
	PETITIONER:	E NUMBER:
	RESPONDENT:	
	e. Other orders:	
3.	 f. Each party will be solely responsible for paying the debts assigned to him or her and debts. The parties understand that the creditors are not bound by this judgment. If a who is not listed as responsible for the debt, that party can file a motion to seek reim g. The court reserves jurisdiction to divide any community debts not listed here. Equalization of division of property and debt orders. To equalize the division of the petitioner respondent must pay to the other the sum of: \$ 	creditor seeks payment from the party bursement from the defaulting party.
4.	Separate property a. The court confirms the following assets or debts as the sole separate property,	or sole responsibility, of the petitioner:
	b.	or sole responsibility, of the respondent:
5. 6.	Sale of property. The following property will be offered for sale and sold for the fair	ttached and made a part of this judgment. market value as soon as a willing buyer other (specify):
7.	Other orders (specify):	

_						
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARTY:			UMBER:			
		ATTORNEY'S FEES AND COSTS ORDER ATTACHMENT				
		Attached to:				
	☐ Findings and Orders After Hearing (form FL-340) ☐ Judgment (Uniform Parentage—Custody and Support) (form FL-250) ☐ Judgment (form FL-180) ☐ Other (specify):					
TH	E CC	COURT FINDS				
1.		An award of attorney's fees and costs is appropriate because there is a demonstrated disp access to funds to retain or maintain counsel and in the ability to pay for legal representation				
	a. The party requested to pay attorney's fees and costs has or is reasonably likely to have the ability to pay for legal representation for both parties.					
		 The requested attorney's fees and costs are reasonable and necessary. 				
2.		An award of attorney's fees and costs is not appropriate because (check all that apply):				
		 a. there is not a demonstrated disparity between the parties in access to funds to ret ability to pay for legal representation. 	ain or maintain counsel or in the			
 the party requested to pay attorney's fees and costs does not have or is not reason pay for legal representation for both parties. 			nably likely to have the ability to			
		c. the requested attorney's fees and costs are not reasonable or necessary.				
3.		Other (specify):				
ТН	E CC	COURT ORDERS				
4.	a.	The petitioner/plaintiff respondent/defendant other party to pay a in this legal proceeding	attorney's fees and costs			
	b.	in the amount of:				
		(1) Fees: \$ (2) Costs: \$ (3) Interest is not included and is not waived.				
	C.	Payable to petitioner/plaintiff respondent/defendant other party				
	d.	From the payment sources of (if specified):				

F		ETITIONER/PLAINTIFF: ONDENT/DEFENDANT:	CASE NUMBER:	
		OTHER PARTY:		
4.	e.	 With a payment schedule of (specify): (1) Due in full, on or before (date): (2) Due in installments, with monthly payments of (specify): \$ beginning (date): until paid in full. (3) If any payment is not timely made and more than days ow immediately become due with interest at the legal rate, which is cur default to the date payment is finally made. (4) No interest will accrue as long as payments are timely made. (5) Other (specify): 	, on the (specify): erdue, the entire unpaid baland rently 10 percent per year, fro	
5.		This amount includes (check all that apply): a. a fee in the amount of (specify) \$ to hire an attorney matter go forward. b. attorney's fees and costs incurred to date in the amount of (specify): \$ c. estimated attorney's fees and costs in the amount of (specify): \$ d. attorney's fees and costs for limited scope representation in the amount e. any amounts previously ordered that have not yet been paid (specify) f. Other (specify):	unt of (specify): \$	proceedings in the
6.		Other orders (specify):		

NOTICE: Any party required to pay attorney's fees and costs must pay interest on overdue amounts at the legal rate, which is currently 10 percent per year.

•		FL-347
Р	PETITIONER:	CASE NUMBER:
RE	SPONDENT:	
	BIFURCATION OF STATUS OF MARRIAGE OR DOMI	ESTIC PARTNERSHIP
	ATTACHMENT TO JUDGMENT (FL-180) I FINDINGS A	AND ORDER AFTER HEARING (FL-340)
	court grants the request of petitioner respondent to bifurcate and colution of the status of the marriage or domestic partnership apart from other issued	grant a separate trial on the issue of the ues.
Date	e marital or domestic partnership status ends (specify):	
THE	COURT FINDS	
1.	A preliminary declaration of disclosure with a completed schedule of assets and been served on the nonmoving party, or the parties have stipulated in writing to disclosure until a later time.	
2.	Each retirement or pension plan of the parties has been joined as a party to the precluded or made unnecessary by applicable law.	proceeding for dissolution unless joinder is
THE	COURT ORDERS	
3.	a. To preserve the claims of each party in all retirement plan benefits on entry of the marriage or domestic partnership, the court makes one of the following of is a participant:	
	 A final domestic relations order or qualified domestic relations order und party's interest in retirement plan benefits, including survivor and death to the content of the c	plan benefits, including survivor and death benefits, in FL-348) incorporated as an attachment to the o (Judgment (Family Law) (form FL-180)). This
	b. Name of plan:	Type of order attached 3a(1) 3a(2) 3a(3)
	See attachment 3b for additional plans.	
	 c. The moving party must promptly serve on the retirement or pension plan add a and b above and a copy of the judgment granting dissolution of the status FL-180). 	
4.	Jurisdiction is reserved for later determination of all other pending issues in this	s case.
5.	The court makes the following additional orders as conditions for granting the s marriage or domestic partnership. In the case of the moving party's death, the cestate and will be enforceable against any asset, including the proceeds thereo have been enforceable before the person's death.	order continues to be binding on that moving party's
	a. Division of property The petitioner respondent must indemnify and hold the other p reassessments, interest, and penalties payable by the oth community estate that would not have been payable if the parties were still was made.	ner party in connection with the division of the
	The state of the s	Dona 4 of

6. Number of pages attached:

Other:

j. Other conditions that are just and equitable

WARNING: Judgment (Family Law) (form FL-180) (status only) must be completed in addition to this form for the status of the marriage or domestic partnership to be ended.

	12-040
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.

Page 1 of 1

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Form Approved for Optional Use Judicial Council of California

ن نا NOTIC کے RIGHTS AND RESPONSIBIL

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 ... EET ON CHANGING A CHILD SU. PORT 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.

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.



	FL-190
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, Statember, and address):	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO.(Optional):	
E-MAIL ADDRESS (Optional) :	
ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
STREET ADDRESS:	
MAILING ADDRESS:	
CITY AND ZIP CODE:	
BRANCH NAME:	
PETITIONER:	
RESPONDENT:	
NOTICE OF ENTRY OF JUDGMENT	CASE NUMBER:
You are notified that the following judgment was entered on (date):	
Dissolution	
2. Dissolution - status only	
Dissolution - reserving jurisdiction over termination of marital status or domes	tic nartnership
4. Legal separation	tic partifership
5. Nullity	
6. Parent-child relationship	
7. Judgment on reserved issues	
8. Other (specify):	
o. Giller (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 m	azy order the exhibits destroyed or
otherwise disposed of after 60 days from the expiration of the appeal time.	ay order the exhibits destroyed of
The state of the s	
STATEMENT IN THIS BOX APPLIES ONLY TO JUDGMENT (OF DISSOLUTION
Effective date of termination of marital or domestic partnership status(specify):	
WARNING: Neither party may remarry or enter into a new domestic partnership until	the effective date of the termination
of marital or domestic partnership status, as shown in this box.	
CLERK'S CERTIFICATE OF MAILING	
I certify that I am not a party to this cause and that a true copy of the Notice of Entry of Judgm	gentwas mailed first class, postage
fully prepaid, in a sealed envelope addressed as shown below, and that the notice was maile	
at (place): , California, on (date)	
Date: Clerk. by	P. Stories
Date: Name and address of petitioner or petitioner's attorney Name and address of petitioner or petitioner's attorney	, Deputy
Name and addre	ss or respondent or respondent's attorney —

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

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, Stat	imber, and address):	COURT PERSONNEL:
<u> </u>		STAMP DATE RECEIVED HERE
TELEPHONE NO.:	FAX NO.(Optional):	DO NOT FILE
E-MAIL ADDRESS (Optional):	, , , , , , , , , , , , , , , , , , , ,	
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COU	NTY OF	
STREET ADDRESS:		
MAILING ADDRESS:		
CITY AND ZIP CODE:		
The state of the s		
PETITIONER/PLAINTIFF:		
PETITIONER/PLAINTIFF.		
DESDONDENT/DEEENDANT.		
RESPONDENT/DEFENDANT:		
OTHER DARENT		
OTHER PARENT:	OF DECICEDY FORM	
	SE REGISTRY FORM	CASE NUMBER:
	First form completed	
Father	Change to previous information	
THIS FORM WILL NOT	BE PLACED IN THE COURT FILE	. IT WILL BE
	ENTIAL FILE WITH THE STATE	
Notice: Pages 1 and 2 of this form must be	e completed and delivered to the court alor	ng with the court order for support.
	lo not need to be delivered to the court. If y	
	urt within 10 days of the date on which you	
	s form must be delivered to the court on an	
	ourt informed in writing of any changes of	
- manger are imperiment and you noop and	Todat informed in writing of any onlinges of	your address and telephone number.
1. Support order information (this information	is on the court order you are filing or have rec	eived)
a. Date order filed:	is an are count or don't ou are mining or mate room	
b. Initial child support or family support	ort order	
	ily support amount ordered for children listed l	
payable on past-due support:	my support amount stacted for simulation listed i	below, plas any mentiny amount ordered
Child Support:	Family Support:	Spousal Support:
(1) Current \$	Current \$	Current \$
base child	base family	
I Reserved or	der Reserved orde	er spousal Reserved order
support: \$0 (zero) ord	der support: \$0 (zero) orde	support: \$0 (zero) order
(2) Additional \$	Additional \$	
monthly	monthly	
support:	support:	
(3) Total \$	Total \$	☐ Total \$
past-due	past-due	past-due
support:	support:	support:
(4) Payment \$	Payment \$	Payment \$
on past-	on past-	on past-
due support:	due support:	due support:
The state of the s	ordered ordered but stayed until (date	
:		7 *
Person required to pay child or family supp	ort (name):	
Relationship to child (specify):		
3. Person or agency to receive child or family	support navments (name):	
Relationship to child (if applicable):	support payments (name).	
Treiationship to Child (if applicable).		
	TYPE OF PRINT IN INIV	
	TYPE OR PRINT IN INK	
		P 4 -4 4

	PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:			· E NUMBER:
4. T	he child support order is for the following children: <u>Child's name</u> .	<u>D</u> :	ate	e of birth Social security number
perso	Additional children are listed on a page attached to this doc are required to complete the following information about yoursel on, but you are encouraged to provide as much as you can. This tained in a confidential file with the State of California.	lf. You	ar	re not required to provide information about the other confidential and will not be filed in the court file. It will be
5. F	ather's name:	6.	Mo	fother's name:
a	Date of birth:		a.	. Date of birth:
b.	Social security number:		b.	. Social security number:
C.	Street address:		C.	
d.	City, state, zip code: Mailing address:		d.	City, state, zip code: . Mailing address:
e.	City, state, zip code: Driver's license number:		•	City, state, zip code:
0.	State:		e.	
f			_	State:
f.	Telephone number:		f.	Telephone number:
g.	Employed Not employed Self-employed Employer's name:		g.	Employed Not employed Self-employed Employer's name:
	Street address: City, state, zip code: Telephone number:			Street address: City, state, zip code: Telephone number:
7.	A restraining order, protective order, or nondisclosure order due to domestic violence is in effect. a. The order protects:			
l decla	are under penalty of perjury under the laws of the State of Califo	ornia t	hat	t the foregoing is true and correct
Date:				and drid dollars.
	(TYPE OR PRINT NAME)	> —		(SIGNATURE OF PERSON COMPLETING THIS FORM)

INFORMATION SH' TFOR CHILD SUPPORT CASE F ISTRY FORM

(Do Nor deliver this Information Sheet to the court cierk.)

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.

<u>Page 1, first box, top of form, left side:</u> 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.

<u>Page 1, second box, top of form, left side:</u> 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.

<u>Page 1, third box, top of form, left side:</u> 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."
 - 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 amou. . . of past due support, check the box in Item 3 the . . . cates 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.

