

How to Request Judgment Of Dissolution or Legal Separation

WHEN TO USE THIS PACKET

These forms can be used to request the court to enter a final judgment of divorce or a judgment of legal separation.

You must have had your spouse served with a Summons, Petition, Declarations of Disclosure, Schedule of Assets and Debts, and an Income and Expense Declaration. Once service was completed, a Proof of Service must have been filed with the court. The other party may or may not have filed a Response in your case.

If the respondent has not filed a Response, then you must have filed a Request to Enter Default (separate packet). You may proceed using this packet, even if the parties have agreed and prepared a Marital Settlement Agreement.

If the respondent filed a Response (and served a Declarations of Disclosure, Schedule of Assets and Debts, and an Income and Expense Declaration), the parties must agree in writing to enter a judgment of divorce. This may be done by filing a document called “Appearance Stipulation and Waiver” (FL-130) **instead of** a Default. If this is the case, fees (or a Fee Waiver) will be due from the Respondent). A Marital Settlement Agreement must be attached to the judgment.

**INSTRUCTIONS AND
SAMPLE
FORMS**

FL-170

ATTORNEY OR PARTY WITHOUT ATTORNEY (Print, Date the number, and address) TELEPHONE NO. 1 EMAIL ADDRESS (optional) ATTORNEY FOR (print) SUPERIOR COURT OF CALIFORNIA, COUNTY OF FRESNO STREET ADDRESS 2 1100 Van Ness Avenue MAILING ADDRESS CITY AND ZIP CODE Fresno, CA 93724-0002 BRANCH NAME Central Branch	FOR COURT USE ONLY
PETITIONER: 3 RESPONDENT:	CASE NUMBER: 4
5 DECLARATION FOR DEFAULT OR UNCONTESTED <input type="checkbox"/> DISSOLUTION <input type="checkbox"/> LEGAL SEPARATION	

(NOTE: Items 1 through 16 apply to both dissolution and legal separation proceedings.)

1. I declare that if I appeared in court **6** I have sworn, I would testify to the truth of the facts in this declaration.
2. I agree that my case will be processed by default and that I will not appear before the court unless I am ordered by the court to do so.
3. All the information in the Petition Response is true and correct.
4. Default or uncontested. (Check a or b.)
 - 7** a. The default of the respondent was entered or is being requested, and I am not seeking any relief not requested in the petition. OR
 - b. The parties have agreed that the matter may proceed as an uncontested matter without notice, and the agreement is attached or is incorporated in the attached settlement agreement or stipulated judgment.
5. Settlement agreement. (Check a or b.)
 - 8** a. The parties have entered into an agreement a stipulated judgment regarding their property, their marriage or domestic partnership rights, including support, the original of which is or has been submitted to the court. I request that the court approve the agreement. OR
 - b. There is no agreement or stipulated judgment, and the following statements are true (check at least one, including item (2) if a community estate exists):
 - (1) There are no community or quasi-community assets or community debts to be disposed of by the court.
 - (2) The community and quasi-community assets and debts are listed on the attached completed current Property Declaration (form FL-160), which includes an estimate of the value of the assets and debts that I propose to be distributed to each party. The division in the proposed Judgment (Family Law) (form FL-100) is a fair and equal division of the property and debts, or if there is a negative estate, the debts are assigned fairly and equitably.
6. Declaration of disclosure. (Check a, b, or c.)
 - 9** a. Both the petitioner and respondent have filed, or are filing concurrently, a Declaration Regarding Service of Declaration of Disclosure (form FL-141) and an Income and Expense Declaration (form FL-150).
 - b. This matter is proceeding by default. I am the petitioner in this action and have filed a proof of service of the preliminary Declaration of Disclosure (form FL-140) with the court. I hereby waive receipt of the final Declaration of Disclosure (form FL-140) from the respondent.
 - c. This matter is proceeding as an uncontested action. Service of the final Declaration of Disclosure (form FL-140) is mutually waived by both parties. A waiver provision executed by both parties under penalty of perjury is contained in the settlement agreement or proposed judgment or another, separate stipulation.
7. Child custody should be ordered as set forth in the proposed Judgment (Family Law) (form FL-100).
8. Child visitation should be ordered as set forth in the proposed Judgment (Family Law) (form FL-100).
9. Spousal, partner, and family support. (If a support order or attorney fees are requested, submit a completed Income and Expense Declaration (form FL-150) unless a current form is on file. Include your best estimate of the other party's income. Check at least one of the following.)
 - 11** a. I knowingly give up forever any right to receive spousal or partner support.
 - b. I ask the court to reserve jurisdiction to award spousal or partner support in the future to (name):
 - c. Spousal support should be ordered as set forth in the proposed Judgment (Family Law) (form FL-100).
 - d. Family support should be ordered as set forth in the proposed Judgment (Family Law) (form FL-100).

Form Integrated by Minors/18+
 Superior Courts of California
 FL-170 (Rev. January 1, 2015)

**DECLARATION FOR DEFAULT OR UNCONTESTED
 DISSOLUTION OR LEGAL SEPARATION
 (Family Law)**

Family Code, § 2000
 www.courtinfo.ca.gov
 American LegalNet, Inc.
 www.AmericanLegalNet.com

How to fill out

DECLARATION FOR DEFAULT OR UNCONTESTED DISSOLUTION OR LEGAL SEPARATION (FL-170)

DIRECTIONS FOR FULL JUDGMENT

- ▶ Find the number on the sample form. *Example:* **1**
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in black ink

- 1** Print your name, address and phone number.
- 2** If not filled in for you, write "Fresno" after COUNTY OF. The address is: 1100 Van Ness Ave., Fresno CA 93724-0002. The Branch Name is: Central Division.
- 3** Write the name of the Petitioner and Respondent. The Petitioner is the party that starts the case against another person, the Respondent.
- 4** Write in your case number.
- 5** Check the correct box - Dissolution (Divorce) or Legal Separation
- 6** Check the "Petition" box.
- 7** If you are proceeding by Default, check box 4(a). If you are **NOT** proceeding by Default, check box 4(b).
- 8** If you have a written agreement with the other party, check box 5(a) and mark the appropriate box regarding the type of agreement you are attaching to the judgment. **OR** if you do not have an agreement in writing, check box 5(b). If there is no property to be divided check box 5(b)(1). If there is property to be divided check box 5(b)(2).
- 9** Check box 6(a) if you have a written agreement. Check box 6(b) if you are proceeding by Default with no agreement.
- 10** If you have a child(ren) WITH THE OTHER PARTY IN THIS CASE, check boxes 7 and 8.
- 11** Check box 9(c).

FL-170

PETITIONER RESPONDENT	DATE NUMBER
--------------------------	-------------

10. Child support should be ordered as set forth in the proposed Judgment (Family Law) form FL-100.

11. a. I am receiving am not receiving intend to apply for public assistance for the child or children listed in the proposed order.
 b. To the best of my knowledge, the other party is is not receiving public assistance.

12. The petitioner respondent is presently receiving public assistance, and all support should be made payable to the local child support agency at the address set forth in the proposed judgment. A representative of the local child support agency has signed the proposed judgment.

13. If there are minor children, check and complete item a and item b or c:
 a. My gross (before taxes) monthly income is (specify): \$
 b. The estimated gross monthly income of the other party is (specify): \$
 c. I have no knowledge of the estimated monthly income of the other party for the following reasons (specify):
 d. I request that this order be based on the petitioner's respondent's earning ability. The facts in support of my estimate of earning ability are (specify):
 Continued on Attachment 13d.

14. Paternity of the children of the petitioner and respondent born prior to their marriage or domestic partnership should be ordered as set forth in the proposed Judgment (Family Law) form FL-100. A declaration regarding paternity is attached.

15. Attorney fees should be ordered as set forth in the proposed Judgment (Family Law) form FL-100.

16. The petitioner respondent requests restoration of his or her former name as set forth in the proposed Judgment (Family Law) form FL-100.

17. There are irreconcilable differences that have led to the irretrievable breakdown of the marriage or domestic partnership, and there is no possibility of saving the marriage or domestic partnership through counseling or other means.

18. This declaration may be reviewed by a commissioner sitting as a temporary judge, who may determine whether to grant this request or require my appearance under Family Code section 2336.

STATEMENTS IN THIS BOX APPLY ONLY TO DISSOLUTIONS—Items 19 through 21

19. If this is a dissolution of marriage or of a domestic partnership created in another state, the petitioner and/or the respondent has been a resident of this county for at least three months and of the state of California for at least six months continuously and immediately preceding the date of the filing of the petition for dissolution of marriage or domestic partnership.

20. I ask that the court grant the request for a judgment for dissolution of marriage or domestic partnership based upon irreconcilable differences and that the court make the orders set forth in the proposed Judgment (Family Law) form FL-100 submitted with this declaration.

21. This declaration is for the termination of marital or domestic partner status only. I ask the court to reserve jurisdiction over all issues whose determination is not requested in this declaration.

THIS STATEMENT APPLIES ONLY TO LEGAL SEPARATIONS

22. I ask that the court grant the request for a judgment for legal separation based upon irreconcilable differences and that the court make the orders set forth in the proposed Judgment (Family Law) form FL-100 submitted with this declaration.
 I understand that a judgment of legal separation does not terminate a marriage or domestic partnership and that I am still married or a partner in a domestic partnership.

23. Other (specify):

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

(PETITIONER) (SIGNATURE OF DECLARANT)

FL-170 (Rev. January 1, 2007) **DECLARATION FOR DEFAULT OR UNCONTESTED DISSOLUTION or LEGAL SEPARATION (Family Law)** Page 2 of 2

DECLARATION FOR DEFAULT OR UNCONTESTED DISSOLUTION OR LEGAL SEPARATION (FL-170)

- page two -

DIRECTIONS FOR FULL JUDGMENT

- ▶ Find the number on the sample form.
Example: 15
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in black ink.

- 12. List the full name of both parties in the case.
- 13. Write in your case number.
- 14. If you have children you **MUST** check box 10 **AND** one box in 11(a) **AND** one box in 11(b).
- 15. Check the correct box in item 12 if the child(ren) in this case is/are receiving public assistance (TANF).
- 16. If you have children from this case you **MUST** complete all of item 13. You must include your gross monthly income and an estimate of what the other parent earns per month and how you came up with this amount.
- 17. If you and your spouse have a child(ren) together that was/were born before you were married and you want the court to make a paternity order – check box 14.
- 18. Do **not** check box 15 – you do not have an attorney if **YOU** are completing these documents.
- 19. If the petitioner is the wife and would like her former/maiden name restored, mark box 16. Note: the husband cannot request this for the wife.
- 20. Do not check box 21.
- 21. For item 23, **if** you have a written agreement that you will attach to the judgment or do not have children or assets/debts, skip this step. **If** you do not have a written agreement **and you have** children or property from this marriage, you must check this box and write “See attachment 23.” Complete Attachment 23 (included in this packet) discussing the current custody/visitation, and what you want the court to order in the judgment. Note: you must ask for the same custody/visitation you requested in your petition if there is no written agreement or a court order. You must discuss the earning ability of each party and his/her tax filing status and the amount of exemptions each person claims. If there are assets and/or debts, you must also discuss the division of those assets/debts.
- 22. Date and print your name on the left and then sign your name on the right.

SAMPLE ATTACHMENT 23 TO THE DECLARATION FOR DEFAULT SAMPLE

The parties in this case were married on 02-14-00 and we separated on 12-25-05.

1) Issues related to Child Custody & Visitation

We have 2 minor child(ren) from this relationship and their names and dates of birth are:

1. OLDEST BABY DOE, Date of birth: 11-14-00
2. SECOND OLDEST BABETTE DOE, Date of birth: 9-15-02
3. _____, Date of birth: _____
4. _____, Date of birth: _____

- The current custody/visitation order, filed on _____, shall remain in full force and effect and is attached to the judgment.
- The UCCJEA previously filed with the court is current or a new UCCJEA is being submitted.
- The child(ren) currently live with the mother father. The child(ren) visit do not visit with the other parent. The current visitation pattern is as follows: **FATHER IS VISITING ON THE 1ST, 3RD, AND WHEN APPLICABLE THE FIFTH WEEKEND BEGINNING FRIDAY 6PM TO SUNDAY 6PM**
- I am proposing that the court make the following orders for **custody**:
 - Legal custody to: Mother Father ▪ Physical Custody to: Mother Father
 - Mother Father to be the primary custodial parent.
- I am proposing that the court make the following orders for **visitation**:
 - Mother Father to have visitation as follows: **FATHER MAY VISIT ON THE 1ST, 3RD, AND WHEN APPLICABLE THE FIFTH WEEKEND BEGINNING FRIDAY 6PM TO SUNDAY 6PM**

2) Issues related to Child Support, Child Care, and Health Insurance:

Petitioner Respondent is incarcerated and is expected to be released on or about _____.

- The children reside with the mother 80% of the time and with the father 20% of the time.
- The child(ren) are are not receiving public assistance. I am the other parent is receiving TANF for the child(ren) in this case.
- I am presently working not working. My gross monthly income is \$1387. My tax filing status is **HEAD OF HOUSEHOLD**, and I claim 4 exemption(s).
I have ONE other minor child(ren) of mine from a different relationship living with me.
- The other parent is presently working not working. His/her monthly income is estimated (or the other party has the ability to earn at least) \$1387 and his/her tax filing status is **SINGLE**, and he/she claims 1 exemption(s).
The other parent has 0 other minor children of his/hers from a different relationship living with him/her.

3) Spousal Support

I am requesting the court to do the following as to Spousal Support:

- No spousal support shall be paid by either party, and the court hereby terminates its jurisdiction to award spousal support in the future (can only do this if the marriage was for less than 10 years).
- The court hereby reserves the issue of Spousal Support (if the marriage was for 10 years or more).

4) Property Division

I am requesting the court to make the following orders regarding community property/debt:

- There are no property issues before this Court and the Court shall terminate its jurisdiction over the property issues.
- Each party shall be awarded all personal property in his/her possession, including all retirement plan/pension plan/employment benefits in his/her own name.

Petitioner requests to be awarded the following assets and debts:
(List all property and debt to be awarded to Petitioner)
2004 TOYOTA TERCEL LICENSE #0ABC000 VIN#12345678912345678 AND THE DEBT THEREON

Respondent to be awarded the following assets and debts:
(List all property and debt to be awarded to Respondent)
2005 TOYOTA CAMRY LICENSE #1ABC111 VIN#91234567891234567 AND THE DEBT THEREON

5) Attorney's Fees

There are no attorneys in this case. I am requesting the court to order that no attorney's fees shall be paid to either party.

6) Other

Other information the court should know prior to entering a judgment: _____

Dated: February 20, 2009

Signed: John Doe

FL-180

<p>ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, Date of Birth, and Address)</p> <p>1</p> <p>TELEPHONE NO. _____ FAX NO. (Optional) _____ ATTORNEY FOR (Name) _____</p> <p style="text-align: center;">No. 10 Cases</p>	<p style="text-align: center;">PRE-COURT SUMMONS</p>
<p style="text-align: center;">SUPERIOR COURT OF CALIFORNIA, COUNTY OF FRESNO</p> <p>STREET ADDRESS: 1100 Van Ness Avenue MAILING ADDRESS: Fresno, California 93724-0002 CITY AND ZIP CODE: Fresno, California 93724-0002 Branch Name: Central Branch</p> <p style="text-align: right;">2</p>	
<p>MARRIAGE OF</p> <p>PETITIONER: _____ RESPONDENT: _____</p> <p style="text-align: center;">3</p>	
<p style="text-align: center;">JUDGMENT</p> <p><input type="checkbox"/> DISSOLUTION <input type="checkbox"/> LEGAL SEPARATION <input type="checkbox"/> NULLITY</p> <p><input type="checkbox"/> Status only <input type="checkbox"/> Reserving jurisdiction over termination of marital or domestic partnership status <input type="checkbox"/> Judgment on reserved issues</p> <p>Date marital or domestic partnership status ends: _____</p> <p style="text-align: right;">4</p>	
<p>7</p> <p><input type="checkbox"/> This judgment contains personal conduct restraining orders. The restraining orders are contained on page(s) _____ of the attachment. They expire on (date) _____.</p> <p><input type="checkbox"/> This proceeding was heard as follows: <input type="checkbox"/> Default or uncontested <input type="checkbox"/> By declaration under Family Code section 2336 <input type="checkbox"/> Contested</p> <p>a. Date: _____ Dept.: _____ County: _____ b. Judicial officer (name): _____ <input type="checkbox"/> Temporary judge c. <input type="checkbox"/> Petitioner present in court <input type="checkbox"/> Attorney present in court (name): _____ d. <input type="checkbox"/> Respondent present in court <input type="checkbox"/> Attorney present in court (name): _____ e. <input type="checkbox"/> Claimant present in court (name): _____ <input type="checkbox"/> Attorney present in court (name): _____ f. <input type="checkbox"/> Other (specify name): _____</p> <p>3. The court acquired jurisdiction of the respondent on (date): 9 a. <input type="checkbox"/> The respondent was served with process. b. <input type="checkbox"/> The respondent appeared.</p> <p>THE COURT ORDERS, GOOD CAUSE APPEARING</p> <p>4. a. <input type="checkbox"/> Judgment of dissolution is entered. Marital or domestic partnership status is terminated and the parties are restored to the status of single persons: (1) <input type="checkbox"/> on (specify date): _____ (2) <input type="checkbox"/> on a date to be determined on noticed motion of either party or on stipulation. b. <input type="checkbox"/> Judgment of legal separation is entered. c. <input type="checkbox"/> Judgment of nullity is entered. The parties are declared to be single persons on the ground of (specify): _____</p> <p>d. <input type="checkbox"/> This judgment will be entered nunc pro tunc as of (date): _____ e. <input type="checkbox"/> Judgment on reserved issues. f. The <input type="checkbox"/> petitioner's <input type="checkbox"/> respondent's former name is restored to (specify): _____ g. <input type="checkbox"/> Jurisdiction is reserved over all other issues, and all present orders remain in effect except as provided below. h. <input type="checkbox"/> This judgment contains provisions for child support or family support. Each party must complete and file with the court a Child Support Case Registry Form (Form FL-191) within 10 days of the date of this judgment. The parents must notify the court of any change in the information submitted within 10 days of the change, by filing an updated form. The Notice of Rights and Responsibilities—Child Care Costs and Reimbursement Procedures and Information Sheet on Changing a Child Support Order (Form FL-192) is attached.</p>	
<p>Form prepared by Attorney for Justice Center of California, 10-10-00 (Rev. January 1, 2005).</p> <p style="text-align: center;">JUDGMENT (Family Law)</p> <p style="text-align: right;">Family Code §§ 2336-2340 2341-2346 www.courtinfo.ca.gov</p> <p style="text-align: right;">Marshall Legal Services www.marshalllegal.com</p>	

How to fill out

JUDGMENT (FL-180)

DIRECTIONS FOR FULL JUDGMENT

- ▶ Find the number on the sample form. *Example:* **1**
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in black ink

- 1** Write your name, address and phone number.
- 2** If not filled in for you, write “Fresno” after COUNTY OF. The address is: 1100 Van Ness Ave., Fresno CA 93724-0002. The Branch Name is: Central Branch.
- 3** Write the name of the Petitioner and Respondent. The Petitioner is the party that starts the case against another person, the Respondent.
- 4** Write in your case number.
- 5** Check the correct box - Dissolution (divorce) or Legal Separation
- 6** If this is a legal separation, leave this blank. If this is a divorce, the status of the marriage **cannot** terminate earlier than six months and one day from the date the respondent was served with the summons and petition when you started the divorce. If this date is two or more months in the future, write that date. If the date is in the past or is less than two months into the future, leave this date blank.
- 7** If Domestic Violence Orders exist between you and your spouse check the correct boxes & attach copy of order.
- 8** At Item 2 check the “by declaration under Family Code section 2336” Box.
- 9** At Item 3 write in the date your spouse was served with the original papers and check Box 3(a).
- 10** If this is a divorce, check Box 4(a) and 4(a)(1). The date at item 4(a)(1) requires the same instructions as above in item **6**. If this is a Legal Separation, check box 4(b) case.
- 11** If the petitioner is the wife and would like her former/maiden name restored, mark Item 4(f) and write in that name. Note: the husband may not request this for the wife.
- 12** If you have children from this relationship, you **MUST** check box 4(h) **AND** complete a Child Support Case Registry Form (FL-191).

FL-180

CASE NO. (Last name, first name of each party): 13	Case No.: 14
---	---

4. (b)(1)(i) A settlement agreement between the parties is attached.
 (j) A written stipulation for judgment between the parties is attached.
 (k) The children of this marriage or domestic partnership:

(1) The children of this marriage or domestic partnership are:
 Name: _____ Birthdate: _____

(2) Parentage is established for children of this relationship born prior to the marriage or domestic partnership.

l. Child custody and visitation are ordered as set forth in the attached:
 (1) settlement agreement, stipulation for judgment, or other written agreement.
 (2) Child Custody and Visitation Order Attachment (form FL-341).
 (3) Stipulation and Order for Custody and/or Visitation of Children (form FL-355).
 (4) other (specify): _____

m. Child support is ordered as set forth in the attached:
 (1) settlement agreement, stipulation for judgment, or other written agreement.
 (2) Child Support Information and Order Attachment (form FL-342).
 (3) Stipulation to Establish or Modify Child Support and Order (form FL-350).
 (4) other (specify): _____

n. Spousal or partner support is ordered as set forth in the attached:
 (1) settlement agreement, stipulation for judgment, or other written agreement.
 (2) Spousal/ Partner or Family Support Order Attachment (form FL-343).
 (3) other (specify): _____

NOTICE: It is the goal of this state that each party will make reasonable good faith efforts to become self-supporting as provided for in Family Code section 4302. The failure to make reasonable good faith efforts may be one of the factors considered by the court as a basis for modifying or terminating spousal or partner support.

o. Property division is ordered as set forth in the attached:
 (1) settlement agreement, stipulation for judgment, or other written agreement.
 (2) Property Order Attachment to Judgment (form FL-345).
 (3) other (specify): _____

p. Other (specify): _____

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

JUDICIAL OFFICE

5. Number of pages attached: _____ STANDARD FOLLOWS LAST ATTACHMENT

NOTICE

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

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

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

Any party required to pay support must pay interest on overdue amounts at the legal rate, which is currently 15 percent.

FL-180 (Rev. January 1, 2007) Page 1 of 1

JUDGMENT (FL-180)

- page two -

DIRECTIONS FULL JUDGMENT

- ▶ Find the number on the sample form.
Example: 13
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in black ink.

- 13 List the full name of both parties in the case.
- 14 Write in your case number.
- 15 Check box 4(i) if you are attaching a written and notarized Marital Settlement Agreement (MSA). If the other party filed a response and you have a written agreement (stipulation) for the judgment, mark box 4(j).
- 16 If you have no children from this marriage from this marriage, leave this section blank. If you have children from this relationship check box 4(k) and box (1). For each child of this relationship, write the first and last name and the date of birth. If any of the child(ren) from this relationship were born prior to the date of marriage, mark box (2).
- 17 If you do not have children from this marriage, leave this section blank. If you have children from this relationship, check box 4(l). If you have an MSA or stipulated judgment, mark box 4(l)(1). If not, mark box 4(l)(4) and write, **“See attachment 4p.”**
- 18 If you do not have children from this marriage, leave this section blank. If you have children from this marriage, mark box 4(m). If you have an MSA or stipulated judgment, mark box 4(m)(1). If not, mark box 4(m)(4) and write, **“See attachment 4p.”**
- 19 Mark box 4(n). If you have an MSA or stipulated judgment, mark box 4(n)(1). If not, mark box 4(n)(3) and write, **“See attachment 4p.”**
- 20 Mark box 4(o). If you have an MSA or stipulated judgment, mark box 4(o)(1). If not, mark box 4(o)(3) and write, **“See attachment 4p.”**
- 21 Mark box 4p and write, **“See attachment 4p.”**
- 22 Read this information.

1

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

FL-192

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.

The Department of Family Services
1900 North West 21st Street
Tallahassee, Florida 32310

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

Florida
Court Rule 12.000, 12.010
1000
This form is available at
http://www.flcourts.org

How to fill out

**NOTICE OF RIGHTS
AND
RESPONSIBILITIES
(FL-192)**

**DIRECTIONS
FOR FULL JUDGMENT**

- ▶ Find the number on the sample form. *Example:* 1
- ▶ Go to the same number below to find out how to fill out the form.

1 IF YOU DO NOT HAVE CHILDREN FROM THIS RELATIONSHIP, DO NOT ATTACH THIS FORM TO THE JUDGMENT.

IF YOU HAVE CHILDREN FROM THIS RELATIONSHIP, YOU MUST ATTACH THIS FORM TO THE JUDGMENT.

THERE IS NOTHING FOR YOU TO DO ON THIS FORM.

READ THIS FORM.

SAMPLE

Attachment 4p to Judgment

SAMPLE

The Court finds the following:

Petitioner Respondent has resided in this county for at least three months and in California for at least six months preceding the filing of the Petition for Dissolution of Marriage. The date of marriage was 2-14-00 and the date of separation was 12-25-05. Irreconcilable differences in this marriage have led to the irremediable breakdown of the marriage.

It is ordered as follows:

There is attached hereto, and labeled Exhibit _____, an original Marital Settlement Agreement signed by both parties, consisting of _____ pages. The Marital Settlement Agreement is incorporated and merged into this judgment as though fully set forth herein. The parties are ordered to comply with each and every executory provision in the Marital Settlement Agreement. The court reserves jurisdiction to: enforce and administer the executory provisions of the Marital Settlement Agreement; to award attorney’s fees and costs to the prevailing party in any action to enforce the provisions thereof; to join any person that may be joined according to law; to value and divide equally between the parties and community assets and obligations not mentioned in Exhibit _____.

1) Child Custody

The parties have no minor children.

There is attached hereto and made part hereof, labeled as Exhibit ____, a certified copy of Family Court Services or other court order, signed and filed by the court on _____. This attachment consisting of _____ pages is incorporated and merged into and made part of this judgment as though fully set forth herein.

The parties have 2 minor child(ren).

The custody of the minor children shall be awarded as follows:

Child’s Name	Date of Birth	Legal Custody	Physical Custody
OLDEST BABY DOE	11-14-00	JOINT	JOINT
SECOND ELDEST BABETTE DOE	9-15-02	JOINT	JOINT

Primary physical custody of the minor child shall be with the JANE DOE.

2) Child Visitation

The parties have no minor children, and no visitation orders shall be made.

The non-custodial parent shall have the following visitation rights:

Reasonable right of visitation as agreed between the parties.

Every weekend from _____ at _____ a.m./p.m. until _____ at _____ a.m./p.m.

Every 2nd and 4th weekend from _____ at _____ a.m./p.m. until _____ at _____ a.m./p.m.

SAMPLE Attachment 4p to Judgment SAMPLE

Every 1st, 3rd, and when applicable, 5th weekend beginning FRIDAY at 6:00 p.m. and ending SUNDAY at 6:00 p.m.

Other (describe): _____

3) ***Family Code Section 3048***

This Court has jurisdiction to make orders regarding child custody under the Uniform Child Custody Jurisdiction and Enforcement Act;

Notice and opportunity to be heard were given to the responding party/parties as provided by the laws of the State of California;

The custody and visitation rights of each party are set forth herein;

A violation of this order may subject the party in violation to civil or criminal penalties, or both;

The country of habitual residence of the child is the United States of America;

The parties have considered the factors set forth in the Family Code Section 3048(b)(1) and find that there is is not a risk of abduction of the child(ren) by either parent

Restrictions:

Visitation / Exchange of the children shall be supervised by the following Agency: _____ address: _____

Phone: _____. Costs of Supervised Visitation or Supervised Exchange shall be paid as follows: _____% by Father and _____% by Mother.

Visitation shall be supervised by

An adult designated by the custodial parent.

The following designated person (s): _____

No visitation pending further Court order or mediation with Family Court Services.

Mother Father shall not relocate the child(ren)'s residence from:

California

Counties: **FRESNO**

United States without prior written consent of the parties or further order of this Court.

Each parent shall promptly notify the other of any change of address or telephone number of the minor children, except where a restraining order is issued.

Neither parent shall make disparaging remarks about the other parent in the presence of the minor children.

SAMPLE

Attachment 4p to Judgment

SAMPLE

3) ***Child Support***

There is Attached hereto and made a part hereof, labeled as Exhibit _____, a certified copy of the order from the Department of Child Support Division, signed and filed on _____. This attachment consisting of _____ pages is incorporated and merged into and made a part of this Judgment as though fully set forth herein.

1. Father / Mother shall pay child support for the following minor child(ren) in the following amounts:

Name of Child	Date of Birth	Amount of Monthly Support
OLDEST BABY DOE	11-14-00	
2ND ELDEST BABETTE DOE	9-15-02	

for a total of \$_____ per month commencing on _____ and continuing on the 1st day of each and every month thereafter, until the child marries, dies, becomes self-supporting, becomes an active member of the armed services, reaches the age of 19, or reaches the age of 18 and is no longer a full-time high school student, or until further order of the court, whichever occurs first.

- 2. Interest shall accrue on the entire principal balance owing and not on each installment as it becomes due. This is not an installment judgment.
- 3. No provision of this judgment shall operate to limit any right to collect the principal (total amount of unpaid support) or to charge and collect interest and penalties as allowed by law. All payments ordered are subject to modification.
- 5. Support shall be paid to the Department of Child Support Services SDU, P.O. Box 989067, West Sacramento, CA 95798.
- 6. The Fresno County Department of Child Support Services shall enforce all payments.
- 7. A Wage and Earnings Assignment Order shall issue for ongoing support and arrearages.
- 8. Both Parents shall:
 - a. Provide and maintain health insurance coverage for the child(ren) if it is available through employment, a group plan, or otherwise available at no or reasonable cost, and shall keep the Department of Child Support Services informed of the availability of the coverage;
 - b. If health insurance is not available, provide coverage when it becomes available;
 - c. Within 20 days of the Department of Child Support Services' request, complete and return a health insurance form;
 - d. Provide to the Department of Child Support Services all information and forms necessary to obtain health care services for the child(ren);

SAMPLE Attachment 4p to Judgment SAMPLE

- e. Present any claim to secure payment or reimbursement to the other parent or caretaker who incurs costs for health care services for the child(ren).
- 9. Unreimbursed medical, drug, dental, orthodontic, and vision expenses shall be shared equally (one half each) by the Petitioner and Respondent, and the parties shall comply with the provisions of Family Code Section 4063 regarding payment and reimbursement of the unreimbursed costs.
- 10. A Health Insurance Coverage Assignment shall issue.
- 11. Both Parents shall provide written notification to the Clerk of any change in residence and to the office of the Department of Child Support Services of any change in residence, income, or employment within 10 days.
- 12. Each party shall be responsible for 50% of child care costs related to employment or to reasonably necessary education or training for employment skills.
- 13. The Mother Father shall claim the child(ren) for tax purposes.

4) *Spousal Support*

- No spousal support shall be paid by either party, and the court hereby terminates its jurisdiction to award spousal support in the future.
- The court hereby reserves the issue of Spousal Support.
- The parties hereby waive the right to receive spousal support.

5) *Property Division*

- There are no property issues before this Court and the Court shall terminate its jurisdiction over property issues.
- Each party shall be awarded all personal property in his/her possession.
- PETITIONER** shall be awarded the following assets and debts:

RESIDENCE located at: _____.

Legal Description of the residence is attached as Exhibit ____.

[Petitioner indemnifies and holds harmless Respondent in the event Petitioner defaults on the mortgage payment and the property goes into foreclosure.]

VEHICLES:

Year: 2004 Make: TOYOTA Model: TERCEL AND THE DEBT THEREON

License Plate NO: 0ABC000

OTHER PROPERTY/DEBT:

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

SAMPLE Attachment 4p to Judgment SAMPLE

RESPONDENT shall be awarded the following assets and debts:

RESIDENCE located at: _____

Legal Description of the residence is attached as Exhibit ____.

[Respondent indemnifies and holds harmless Petitioner in the event Respondent defaults on the mortgage payment and the property goes into foreclosure.]

VEHICLES:

Year: 2004 Make: TOYOTA Model: CAMRY AND THE DEBT THEREON

License Plate NO: 1ABC111

OTHER PROPERTY/DEBT:

6) Attorney's Fees

No attorney's fees shall be paid to either party.

7) Other Orders:

Each party is ordered to execute any documents to effectuate this order.

IT IS SO ORDERED.

Dated: _____

Judge of the Superior Court

How to fill out

NOTICE OF ENTRY OF JUDGMENT (FL-190)

DIRECTIONS

- ▶ Find the number on the sample form. *Example: 1*
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in black ink.

- 1 Write your name, address and telephone number.
- 2 If not filled in for you, write "Fresno" after COUNTY OF. The address is: 1100 Van Ness Ave., Fresno CA 93724-0002. The Branch Name is: Central Division.
- 3 Write the name of the Petitioner and Respondent. The Petitioner is the party that started the case against another person, the Respondent.
- 4 Write in your case number.
- 5 Mark box 1 if this is a divorce. Mark box 4 if this is a legal separation.
- 6 If this is a legal separation, leave this blank. If this is a divorce, the status of the marriage **cannot** terminate earlier than six months and one day from the date the respondent was served with the summons and petition when you started the divorce. If this date is two or more months in the future, write that date. If the date is in the past or is less than two months into the future, leave this date blank.
- 7 Write "Fresno" after the word "(place)."
- 8 Write the name and address of the Petitioner inside of this box.
- 9 Write the name and address of the Respondent inside of this box.
You **MUST** attach two **stamped** envelopes to the Notice of Entry of Judgment (one addressed to each party).

NOTE: DO NOT DATE OR SIGN ANYWHERE ON THIS DOCUMENT

FL-191

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): <div style="text-align: center; font-size: 24pt; font-weight: bold;">1</div> TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	COURT PERSONNEL: STAMP DATE RECEIVED HERE <div style="text-align: center; font-weight: bold;">DO NOT FILE</div>
SUPERIOR COURT OF CALIFORNIA • COUNTY OF FRESNO 1100 Van Ness Avenue Fresno, California 93724-0002	
PETITIONER/PLAINTIFF: _____ RESPONDENT/DEFENDANT: _____	
OTHER PARENT: CHILD SUPPORT CASE REGISTRY FORM <input type="checkbox"/> Mother <input type="checkbox"/> First form completed <input type="checkbox"/> Father <input type="checkbox"/> Change to previous information	
<div style="font-size: 24pt; font-weight: bold;">5</div>	CASE NUMBER: <div style="font-size: 24pt; font-weight: bold;">4</div>

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

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

1. Support order information (this information is on the court order you are filing or have received).
 - a. Date order filed:
 - b. Initial child support or family support order Modification
 - c. Total monthly base current child or family support amount ordered for children listed below, plus any monthly amount ordered payable on past-due support:

Child Support:	Family Support:	Spousal Support:
<div style="font-size: 24pt; font-weight: bold;">6</div> (1) <input type="checkbox"/> Current base child support: \$ _____ <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order	(1) <input type="checkbox"/> Current base family support: \$ _____ <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order	(1) <input type="checkbox"/> Current spousal support: \$ _____ <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order
(2) <input type="checkbox"/> Additional monthly support: \$ _____	(2) <input type="checkbox"/> Additional monthly support: \$ _____	
(3) <input type="checkbox"/> Total past-due support: \$ _____	(3) <input type="checkbox"/> Total past-due support: \$ _____	(3) <input type="checkbox"/> Total past-due support: \$ _____
(4) <input type="checkbox"/> Payment on past-due support: \$ _____	(4) <input type="checkbox"/> Payment on past-due support: \$ _____	(4) <input type="checkbox"/> Payment on past-due support: \$ _____
(5) Wage withholding was <input type="checkbox"/> ordered <input type="checkbox"/> ordered but stayed until (date): _____		
2. Person required to pay child or family support (name):

7

 Relationship to child (specify): _____
3. Person or agency to receive child or family support payments (name):

8

 Relationship to child (if applicable): _____

TYPE OR PRINT IN INK

CHILD SUPPORT CASE REGISTRY FORM

Form Adopted for Mandatory Use Judicial Council of California FL-191 (Rev. July 1, 2008) Page 1 of 4 Family Code, § 4014 www.courtinfo.ca.gov

How to fill out

**CHILD SUPPORT
CASE REGISTRY
FORM
(FL-191)**

Page 1

DIRECTIONS

- ▶ Find the number on the sample form. *Example:* ❶
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in black ink.
- ▶ **NOTE:**
IF YOU DO NOT HAVE CHILDREN FROM THIS RELATIONSHIP, YOU DO NOT NEED TO COMPLETE THIS FORM.

- ❶ Write your name, address and telephone number.
- ❷ If not filled in for you, write "Fresno" after COUNTY OF. The address is: 1100 Van Ness Ave., Fresno CA 93724-0002. The Branch Name is: Central Division.
- ❸ Write the name of the Petitioner and Respondent. The Petitioner is the party that started the case against another person, the Respondent.
- ❹ Write in your case number.
- ❺ Mark the box that represents whether you are the mother or the father of the children in this case, and whether this is the first time you have completed this form, or if it is a modification of a prior form you filed.
- ❻ Mark box 1(c)(1).
- ❼ Write the name of the parent that is to pay child support and the relationship to the child(ren).
- ❽ Write the name of the parent that is to receive child support, if the Fresno County Department of Child support is not involved in your child support. If they are involved in your case, then write "Department of Child Support Services SDU." They are the "Claimant."

How to fill out

**CHILD SUPPORT CASE
REGISTRY FORM
(FL-191)**

Page 2

DIRECTIONS

- ▶ Find the number on the sample form. *Example:* 9
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in black ink.
- ▶ **NOTE:**
IF YOU DO NOT HAVE CHILDREN FROM THIS RELATIONSHIP, YOU DO NOT NEED TO COMPLETE THIS FORM.

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

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

11 a. <u>Child's name</u>	<u>Date of birth</u>	<u>Social security number</u>
b.		
c.		

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

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

5. Father's name: a. Date of birth: 12 b. Social security number: c. Street address: City, state, zip code: d. Mailing address: City, state, zip code: e. Driver's license number: State: f. Telephone number: g. <input type="checkbox"/> Employed <input type="checkbox"/> Not employed <input type="checkbox"/> Self-employed Employer's name: Street address: City, state, zip code: Telephone number:	6. Mother's name: a. Date of birth: 13 b. Social security number: c. Street address: City, state, zip code: d. Mailing address: City, state, zip code: e. Driver's license number: State: f. Telephone number: g. <input type="checkbox"/> Employed <input type="checkbox"/> Not employed <input type="checkbox"/> Self-employed Employer's name: Street address: City, state, zip code: Telephone number:
---	---

14 7. A restraining order, protective order, or nondisclosure order due to domestic violence is in effect.

15 a. The order protects: Father Mother Children

16 b. From: Father Mother

17 c. The restraining order expires on (date):

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

Date: **18**

(TYPE OR PRINT NAME)

(SIGNATURE OF PERSON COMPLETING THIS FORM)

FL-191 (Rev. July 1, 2009) **CHILD SUPPORT CASE REGISTRY FORM** Page 2 of 4

- 9** Write the name of the Petitioner and Respondent. The Petitioner is the party that starts the case against another person, the Respondent.
- 10** Write in your case number.
- 11** Write the name, date of birth, **and** social security number of each child for whom support was ordered.
- 12** At item 5 fill in all the information requested for the father.
- 13** At item 6 write in all the information requested for the mother.
- 14** Check the box at item 7 if there is a domestic violence order in effect.
- 15** At item 7(a) check the box (es) to show whom the order protects.
- 16** At item 7(b) check the box to show whom the order is against.
- 17** At item 7(c) write in the date that the order expires.
- 18** Date this document, type or print your full name to the left; sign your full name to the right.

FORMS

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): TELEPHONE NO.: _____ FAX NO. (<i>Optional</i>): _____ E-MAIL ADDRESS (<i>Optional</i>): _____ ATTORNEY FOR (<i>Name</i>): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF FRESNO STREET ADDRESS: 1100 Van Ness Avenue MAILING ADDRESS: CITY AND ZIP CODE: Fresno, CA 93724-0002 BRANCH NAME: Central Branch	
PETITIONER: RESPONDENT:	
DECLARATION FOR DEFAULT OR UNCONTESTED <input type="checkbox"/> DISSOLUTION <input type="checkbox"/> LEGAL SEPARATION	CASE NUMBER: _____

(NOTE: Items 1 through 16 apply to both dissolution and legal separation proceedings.)

1. I declare that if I appeared in court and were sworn, I would testify to the truth of the facts in this declaration.
2. I agree that my case will be proven by this declaration and that I will not appear before the court unless I am ordered by the court to do so.
3. All the information in the *Petition* *Response* is true and correct.
4. **Default or uncontested** (*Check a or b.*)
 - a. The default of the respondent was entered or is being requested, and I am not seeking any relief not requested in the petition. **OR**
 - b. The parties have agreed that the matter may proceed as an uncontested matter without notice, and the agreement is attached or is incorporated in the attached settlement agreement or stipulated judgment.
5. **Settlement agreement** (*Check a or b.*)
 - a. The parties have entered into **an agreement** **a stipulated judgment** regarding their property their marriage or domestic partnership rights, including support, the original of which is or has been submitted to the court. I request that the court approve the agreement. **OR**
 - b. **There is no agreement or stipulated judgment**, and the following statements are true (*check at least one, including item (2) if a community estate exists*):
 - (1) There are no community or quasi-community assets or community debts to be disposed of by the court.
 - (2) The community and quasi-community assets and debts are listed on the attached **completed** current *Property Declaration* (form FL-160), which includes an estimate of the value of the assets and debts that I propose to be distributed to each party. The division in the proposed *Judgment (Family Law)* (form FL-180) is a fair and equal division of the property and debts, or if there is a negative estate, the debts are assigned fairly and equitably.
6. **Declaration of disclosure** (*Check a, b, or c.*)
 - a. Both the petitioner and respondent have filed, or are filing concurrently, a *Declaration Regarding Service of Declaration of Disclosure* (form FL-141) and an *Income and Expense Declaration* (form FL-150).
 - b. This matter is proceeding by default. I am the petitioner in this action and have filed a proof of service of the preliminary *Declaration of Disclosure* (form FL-140) with the court. I hereby waive receipt of the final *Declaration of Disclosure* (form FL-140) from the respondent.
 - c. This matter is proceeding as an uncontested action. Service of the final *Declaration of Disclosure* (form FL-140) is mutually waived by both parties. A waiver provision executed by both parties under penalty of perjury is contained in the settlement agreement or proposed judgment or another, separate stipulation.
7. **Child custody** should be ordered as set forth in the proposed *Judgment (Family Law)* (form FL-180).
8. **Child visitation** should be ordered as set forth in the proposed *Judgment (Family Law)* (form FL-180).
9. **Spousal, partner, and family support** (*If a support order or attorney fees are requested, submit a completed Income and Expense Declaration (form FL-150) unless a current form is on file. Include your best estimate of the other party's income. Check at least one of the following.*)
 - a. I knowingly give up forever any right to receive spousal or partner support.
 - b. I ask the court to reserve jurisdiction to award spousal or partner support in the future to (*name*):
 - c. Spousal support should be ordered as set forth in the proposed *Judgment (Family Law)* (form FL-180).
 - d. Family support should be ordered as set forth in the proposed *Judgment (Family Law)* (form FL-180).

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

10. **Child support** should be ordered as set forth in the proposed *Judgment (Family Law)* (form FL-180).
11. a. I am receiving am not receiving intend to apply for public assistance for the child or children listed in the proposed order.
 b. To the best of my knowledge, the other party is is not receiving public assistance.
12. The petitioner respondent is presently receiving public assistance, and all support should be made payable to the local child support agency at the address set forth in the proposed judgment. A representative of the local child support agency has signed the proposed judgment.
13. If there are minor children, check and complete item a and item b or c:
 - a. My gross (before taxes) monthly income is (specify): \$
 - b. The estimated gross monthly income of the other party is (specify): \$
 - c. I have no knowledge of the estimated monthly income of the other party for the following reasons (specify):
 - d. I request that this order be based on the petitioner's respondent's earning ability. The facts in support of my estimate of earning ability are (specify):

Continued on Attachment 13d.
14. **Parentage** of the children of the petitioner and respondent born prior to their marriage or domestic partnership should be ordered as set forth in the proposed *Judgment (Family Law)* (form FL-180). A declaration regarding parentage is attached.
15. **Attorney fees** should be ordered as set forth in the proposed *Judgment (Family Law)* (form FL-180).
16. The petitioner respondent requests restoration of his or her former name as set forth in the proposed *Judgment (Family Law)* (form FL-180).
17. There are irreconcilable differences that have led to the irremediable breakdown of the marriage or domestic partnership, and there is no possibility of saving the marriage or domestic partnership through counseling or other means.
18. This declaration may be reviewed by a commissioner sitting as a temporary judge, who may determine whether to grant this request or require my appearance under Family Code section 2336.

STATEMENTS IN THIS BOX APPLY ONLY TO DISSOLUTIONS—Items 19 through 21

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

THIS STATEMENT APPLIES ONLY TO LEGAL SEPARATIONS

22. I ask that the court grant the request for a judgment for legal separation based upon irreconcilable differences and that the court make the orders set forth in the proposed *Judgment (Family Law)* (form FL-180) submitted with this declaration.

I understand that a judgment of legal separation does not terminate a marriage or domestic partnership and that I am still married or a partner in a domestic partnership.

23. Other (specify):

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

Date:

_____ (TYPE OR PRINT NAME)

▶ _____ (SIGNATURE OF DECLARANT)

ATTACHMENT 23 TO THE DECLARATION FOR DEFAULT

The parties in this case were married on _____ and we separated on _____.

1) Issues related to Child Custody & Visitation

We have _____ minor child(ren) from this relationship and their names and dates of birth are:

- 1. _____, Date of birth: _____
- 2. _____, Date of birth: _____
- 3. _____, Date of birth: _____
- 4. _____, Date of birth: _____

The current custody/visitation order, filed on _____, shall remain in full force and effect and is attached to the judgment.

• The UCCJEA previously filed with the court is current or a new UCCJEA is being submitted.

• The child(ren) currently live with the mother father. The child(ren) visit do not visit with the other parent. The current visitation pattern is as follows: _____

• I am proposing that the court make the following orders for **custody**:

- Legal custody to: Mother Father
- Physical Custody to: Mother Father
- Mother Father to be the primary custodial parent.

• I am proposing that the court make the following orders for **visitation**:

- Mother Father to have visitation as follows: _____

2) Issues related to Child Support, Child Care, and Health Insurance:

Petitioner Respondent is incarcerated and is expected to be released on or about _____.

• The children reside with the mother ___% of the time and with the father ___% of the time.

• The child(ren) are are not receiving public assistance. I am the other parent is receiving TANF for the child(ren) in this case.

• I am presently working not working. My gross monthly income is \$_____. My tax filing status is _____, and I claim _____ exemption(s).

I have _____ other minor child(ren) of mine from a different relationship living with me.

• The other parent is presently working not working. His/her monthly income is estimated (or the other party has the ability to earn at least) \$_____ and his/her tax filing status is _____, and he/she claims _____ exemption(s).

The other parent has _____ other minor child(ren) of his/hers from a different relationship living with him/her.

3) **Spousal Support**

I am requesting the court to do the following as to Spousal Support:

- No spousal support shall be paid by either party, and the court hereby terminates its jurisdiction to award spousal support in the future (can only do this if the marriage was for less than 10 years).
- The court hereby reserves the issue of Spousal Support (if the marriage was for 10 years or more).

4) **Property Division**

I am requesting the court to make the following orders regarding community property/debt:

- There are no property issues before this Court and the Court shall terminate its jurisdiction over the property issues.
- Each party shall be awarded all personal property in his/her possession, including all retirement plan/pension plan/employment benefits in his/her own name.
- Petitioner requests to be awarded the following assets and debts:
(List all property and debt to be awarded to Petitioner)

- Respondent to be awarded the following assets and debts:
(List all property and debt to be awarded to Respondent)

5) **Attorney's Fees**

There are no attorneys in this case. I am requesting the court to order that no attorney's fees shall be paid to either party.

6) **Other**

Other information the court should know prior to entering a judgment: _____

Dated: _____

Signed: _____

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address) : TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF FRESNO STREET ADDRESS: 1100 Van Ness Avenue MAILING ADDRESS: CITY AND ZIP CODE: Fresno, California 93724-0002 BRANCH NAME: Central Branch	
MARRIAGE OF PETITIONER: RESPONDENT:	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p style="text-align: center;">JUDGMENT</p> <p> <input type="checkbox"/> DISSOLUTION <input type="checkbox"/> LEGAL SEPARATION <input type="checkbox"/> NULLITY <input type="checkbox"/> Status only <input type="checkbox"/> Reserving jurisdiction over termination of marital or domestic partnership status <input type="checkbox"/> Judgment on reserved issues Date marital or domestic partnership status ends: </p> </div> <div style="width: 35%;"> CASE NUMBER: </div> </div>	

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

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

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

THE COURT ORDERS, GOOD CAUSE APPEARING

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

- d. This judgment will be entered nunc pro tunc as of (date): _____
- e. Judgment on reserved issues.
- f. The petitioner's respondent's former name is restored to (specify): _____
- g. Jurisdiction is reserved over all other issues, and all present orders remain in effect except as provided below.
- h. This judgment contains provisions for child support or family support. Each party must complete and file with the court a *Child Support Case Registry Form* (form FL-191) within 10 days of the date of this judgment. The parents must notify the court of any change in the information submitted within 10 days of the change, by filing an updated form. The *Notice of Rights and Responsibilities—Health Care Costs and Reimbursement Procedures and Information Sheet on Changing a Child Support Order* (form FL-192) is attached.

CASE NAME <i>(Last name, first name of each party):</i>	CASE NUMBER:
---	--------------

4. *(Cont'd.)*

- i. A settlement agreement between the parties is attached.
- j. A written stipulation for judgment between the parties is attached.
- k. The children of this marriage or domestic partnership.
 - (1) The children of this marriage or domestic partnership are:

Name	Birthdate
------	-----------
 - (2) Parentage is established for children of this relationship born prior to the marriage or domestic partnership.
- l. Child custody and visitation are ordered as set forth in the attached
 - (1) settlement agreement, stipulation for judgment, or other written agreement.
 - (2) *Child Custody and Visitation Order Attachment* (form FL-341).
 - (3) *Stipulation and Order for Custody and/or Visitation of Children* (form FL-355).
 - (4) other *(specify)*:
- m. Child support is ordered as set forth in the attached
 - (1) settlement agreement, stipulation for judgment, or other written agreement.
 - (2) *Child Support Information and Order Attachment* (form FL-342).
 - (3) *Stipulation to Establish or Modify Child Support and Order* (form FL-350).
 - (4) other *(specify)*:
- n. Spousal or partner support is ordered as set forth in the attached
 - (1) settlement agreement, stipulation for judgment, or other written agreement.
 - (2) *Spousal, Partner, or Family Support Order Attachment* (form FL-343).
 - (3) other *(specify)*:

NOTICE: It is the goal of this state that each party will make reasonable good faith efforts to become self-supporting as provided for in Family Code section 4320. The failure to make reasonable good faith efforts may be one of the factors considered by the court as a basis for modifying or terminating spousal or partner support.
- o. Property division is ordered as set forth in the attached
 - (1) settlement agreement, stipulation for judgment, or other written agreement.
 - (2) *Property Order Attachment to Judgment* (form FL-345).
 - (3) other *(specify)*:
- p. Other *(specify)*:

Each attachment to this judgment is incorporated into this judgment, and the parties are ordered to comply with each attachment's provisions.

Jurisdiction is reserved to make other orders necessary to carry out this judgment.

Date: _____

 JUDICIAL OFFICER

5. Number of pages attached: _____

SIGNATURE FOLLOWS LAST ATTACHMENT

NOTICE

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

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

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

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

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

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

1. Notice. You must give the other parent an itemized statement of the charges that have been billed for any health-care costs not paid by insurance. You must give this statement to the other parent within a reasonable time, but no more than 30 days after those costs were given to you.

2. Proof of full payment. If you have already paid all of the uninsured costs, you must (1) give the other parent proof that you paid them and (2) ask for reimbursement for the other parent's court-ordered share of those costs.

3. Proof of partial payment. If you have paid only your share of the uninsured costs, you must (1) give the other parent proof that you paid your share, (2) ask that the other parent pay his or her share of the costs directly to the health-care provider, and (3) give the other parent the information necessary for that parent to be able to pay the bill.

4. Payment by notified parent. If you receive notice from a parent that an uninsured health-care cost has been incurred, you must pay your share of that cost within the time the court orders; or if the court has not specified a period of time, you must make payment (1) within 30 days from the time you were given notice of the amount due, (2) according to any payment schedule set by the health-care provider, (3) according to a schedule agreed to in writing by you and the other parent, or (4) according to a schedule adopted by the court.

5. Disputed charges. If you dispute a charge, you may file a motion in court to resolve the dispute, but only if you pay that charge before filing your motion.

If you claim that the other party has failed to reimburse you for a payment, or the other party has failed to make a payment to the provider after proper notice has been given, you may file a motion in court to resolve the dispute. The court will presume that if uninsured costs have been paid, those costs were reasonable. The court may award attorney fees and costs against a party who has been unreasonable.

6. Court-ordered insurance coverage. If a parent provides health-care insurance as ordered by the court, that insurance must be used at all times to the extent that it is available for health-care costs.

- a. **Burden to prove.** The party claiming that the coverage is inadequate to meet the child's needs has the burden of proving that to the court.
- b. **Cost of additional coverage.** If a parent purchases health-care insurance in addition to that ordered by the court, that parent must pay all the costs of the additional coverage. In addition, if a parent uses alternative coverage that costs more than the coverage provided by court order, that parent must pay the difference.

7. Preferred health providers. If the court-ordered coverage designates a preferred health-care provider, that provider must be used at all times consistent with the terms of the health insurance policy. When any party uses a health-care provider other than the preferred provider, any health-care costs that would have been paid by the preferred health provider if that provider had been used must be the sole responsibility of the party incurring those costs.

INFORMATION SHEET ON CHANGING A CHILD SUPPORT ORDER

General Information

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

When a Child Support Order May Be Modified

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

Examples

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

How to Change a Child Support Order

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

What forms do I need?

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

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

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

- FL-301, *Notice of Motion* **or** FL-300, *Order to Show Cause* **and**
- FL-310, *Application for Order and Supporting Declaration* **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, *Application for Waiver of Court Fees and Costs*
- Form FW-003, *Order on Application for Waiver of Court Fees and Costs*

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 determine court and calendar days, go to

www.courtinfo.ca.gov/selfhelp/courtcalendars/.

The server must also serve blank copies of these forms:

- FL-320, *Responsive Declaration to Order to Show Cause or Notice of Motion* **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.

Attachment 4p to Judgment

The Court finds the following:

Petitioner Respondent has resided in this county for at least three months and in California for at least six months preceding the filing of the Petition for Dissolution of Marriage. The date of marriage was _____ and the date of separation was _____. Irreconcilable differences in this marriage have led to the irremediable breakdown of the marriage.

It is ordered as follows:

There is attached hereto, and labeled Exhibit _____, an original Marital Settlement Agreement signed by both parties, consisting of _____ pages. The Marital Settlement Agreement is incorporated and merged into this judgment as though fully set forth herein. The parties are ordered to comply with each and every executory provision in the Marital Settlement Agreement. The court reserves jurisdiction to: enforce and administer the executory provisions of the Marital Settlement Agreement; to award attorney’s fees and costs to the prevailing party in any action to enforce the provisions thereof; to join any person that may be joined according to law; to value and divide equally between the parties and community assets and obligations not mentioned in Exhibit _____.

1) Child Custody

The parties have no minor children.

There is attached hereto and made part hereof, labeled as Exhibit____, a **certified copy** of Family Court Services or other court order, signed and filed by the court on _____. This attachment consisting of _____ pages is incorporated and merged into and made part of this judgment as though fully set forth herein.

The parties have _____ minor child(ren).

The custody of the minor children shall be awarded as follows:

Child’s Name	Date of Birth	Legal Custody	Physical Custody

Primary physical custody of the minor child shall be with the _____.

2) Child Visitation

The parties have no minor children, and no visitation orders shall be made.

The non-custodial parent shall have the following visitation rights:

Reasonable right of visitation as agreed between the parties.

Every weekend from _____ at _____ a.m./p.m. until _____ at _____ a.m./p.m.

Every 2nd and 4th weekend from _____ at _____ a.m./p.m. until _____ at _____ a.m./p.m.

Every 1st, 3rd, and when applicable, 5th weekend beginning _____ at _____ a.m./ p.m. and ending _____ at _____ a.m./p.m.

Other (describe): _____

3) **Family Code Section 3048**

This Court has jurisdiction to make orders regarding child custody under the Uniform Child Custody Jurisdiction and Enforcement Act;

Notice and opportunity to be heard were given to the responding party/parties as provided by the laws of the State of California;

The custody and visitation rights of each party are set forth herein;

A violation of this order may subject the party in violation to civil or criminal penalties, or both;

The country of habitual residence of the child is the United States of America;

The parties have considered the factors set forth in the Family Code Section 3048(b)(1) and find that there is is not a risk of abduction of the child(ren) by either parent

Restrictions:

Visitation / Exchange of the children shall be supervised by the following Agency: _____ address: _____ Phone: _____. Costs of Supervised Visitation or Supervised Exchange shall be paid as follows: _____% by Father and _____% by Mother.

Visitation shall be supervised by

An adult designated by the custodial parent.

The following designated person (s): _____

No visitation pending further Court order or mediation with Family Court Services.

Mother Father shall not relocate the child(ren)'s residence from:

California

Counties: _____

United States without prior written consent of the parties or further order of this Court.

Each parent shall promptly notify the other of any change of address or telephone number of the minor children, except where a restraining order is issued.

Neither parent shall make disparaging remarks about the other parent in the presence of the minor children.

3) **Child Support**

There is Attached hereto and made a part hereof, labeled as Exhibit _____, a **certified copy** of the order from the Department of Child Support Division, signed and filed on _____. This attachment consisting of _____ pages is incorporated and merged into and made a part of this Judgment as though fully set forth herein.

1. Father / Mother shall pay child support for the following minor child(ren) in the following amounts:

Name of Child	Date of Birth	Amount of Monthly Support

for a total of \$_____ per month commencing on _____ and continuing on the 1st day of each and every month thereafter, until the child marries, dies, becomes self-supporting, becomes an active member of the armed services, reaches the age of 19, or reaches the age of 18 and is no longer a full-time high school student, or until further order of the court, whichever occurs first.

- 2. Interest shall accrue on the entire principal balance owing and not on each installment as it becomes due. This is not an installment judgment.
- 3. No provision of this judgment shall operate to limit any right to collect the principal (total amount of unpaid support) or to charge and collect interest and penalties as allowed by law. All payments ordered are subject to modification.
- 5. Support shall be paid to the Department of Child Support Services SDU, P.O. Box 989067, West Sacramento, CA 95798.
- 6. The Fresno County Department of Child Support Services shall enforce all payments.
- 7. A Wage and Earnings Assignment Order shall issue for ongoing support and arrearages.
- 8. Both Parents shall:
 - a. Provide and maintain health insurance coverage for the child(ren) if it is available through employment, a group plan, or otherwise available at no or reasonable cost, and shall keep the Department of Child Support Services informed of the availability of the coverage;
 - b. If health insurance is not available, provide coverage when it becomes available;
 - c. Within 20 days of the Department of Child Support Services' request, complete and return a health insurance form;
 - d. Provide to the Department of Child Support Services all information and forms necessary to obtain health care services for the child(ren);

e. Present any claim to secure payment or reimbursement to the other parent or caretaker who incurs costs for health care services for the child(ren).

9. Unreimbursed medical, drug, dental, orthodontic, and vision expenses shall be shared equally (one half each) by the Petitioner and Respondent, and the parties shall comply with the provisions of Family Code Section 4063 regarding payment and reimbursement of the unreimbursed costs.

10. A Health Insurance Coverage Assignment shall issue.

11. Both Parents shall provide written notification to the Clerk of any change in residence and to the office of the Department of Child Support Services of any change in residence, income, or employment within 10 days.

12. Each party shall be responsible for 50% of child care costs related to employment or to reasonably necessary education or training for employment skills.

13. The Mother Father shall claim the child(ren) for tax purposes.

4) **Spousal Support**

No spousal support shall be paid by either party, and the court hereby terminates its jurisdiction to award spousal support in the future.

The court hereby reserves the issue of Spousal Support.

The parties hereby waive the right to receive spousal support.

5) **Property Division**

There are no property issues before this Court and the Court shall terminate its jurisdiction over property issues.

Each party shall be awarded all personal property in his/her possession.

PETITIONER shall be awarded the following assets and debts:

RESIDENCE located at: _____.

Legal Description of the residence is attached as Exhibit ____.

[Petitioner indemnifies and holds harmless Respondent in the event Petitioner defaults on the mortgage payment and the property goes into foreclosure.]

VEHICLES:

Year: _____ Make: _____ Model: _____ License Plate NO: _____

OTHER PROPERTY/DEBT:

CASE NAME: _____

CASE NO: _____

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

RESPONDENT shall be awarded the following assets and debts:

RESIDENCE located at: _____.

Legal Description of the residence is attached as Exhibit ____.

[Respondent indemnifies and holds harmless Petitioner in the event Respondent defaults on the mortgage payment and the property goes into foreclosure.]

VEHICLES:

Year: _____ Make: _____ Model: _____ License Plate NO: _____

OTHER PROPERTY/DEBT:

6) Attorney's Fees

No attorney's fees shall be paid to either party.

7) Other Orders:

Each party is ordered to execute any documents to effectuate this order.

IT IS SO ORDERED.

Dated: _____

Judge of the Superior Court

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): <hr/> TELEPHONE NO.: _____ FAX NO. (<i>Optional</i>): _____ E-MAIL ADDRESS (<i>Optional</i>): _____ ATTORNEY FOR (<i>Name</i>): _____	FOR COURT USE ONLY
PETITIONER: RESPONDENT:	
NOTICE OF ENTRY OF JUDGMENT	CASE NUMBER: _____

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

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

Date: _____ Clerk, by _____, Deputy

—NOTICE TO ATTORNEY OF RECORD OR PARTY WITHOUT ATTORNEY—

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

STATEMENT IN THIS BOX APPLIES ONLY TO JUDGMENT OF DISSOLUTION

Effective date of termination of marital or domestic partnership status (*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 Judgment* was mailed first class, postage fully prepaid, in a sealed envelope addressed as shown below, and that the notice was mailed at (*place*): _____, California, on (*date*): _____

Date: _____ Clerk, by _____, Deputy

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

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	COURT PERSONNEL: STAMP DATE RECEIVED HERE DO NOT FILE
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	
CHILD SUPPORT CASE REGISTRY FORM <input type="checkbox"/> Mother <input type="checkbox"/> First form completed <input type="checkbox"/> Father <input type="checkbox"/> Change to previous information	CASE NUMBER: _____

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

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

1. Support order information (*this information is on the court order you are filing or have received*).
 - a. Date order filed:
 - b. Initial child support or family support order Modification
 - c. Total monthly base current child or family support amount ordered for children listed below, plus any monthly amount ordered payable on past-due support:

<u>Child Support:</u> (1) <input type="checkbox"/> Current base child support: \$ <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order (2) <input type="checkbox"/> Additional monthly support: \$ (3) <input type="checkbox"/> Total past-due support: \$ (4) <input type="checkbox"/> Payment on past-due support: \$	<u>Family Support:</u> <input type="checkbox"/> Current base family support: \$ <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order <input type="checkbox"/> Additional monthly support: \$ <input type="checkbox"/> Total past-due support: \$ <input type="checkbox"/> Payment on past-due support: \$	<u>Spousal Support:</u> <input type="checkbox"/> Current spousal support: \$ <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order <input type="checkbox"/> Total past-due support: \$ <input type="checkbox"/> Payment on past-due support: \$
--	--	--
 - (5) Wage withholding was ordered ordered but stayed until (date):
2. Person required to pay child or family support (name):
Relationship to child (specify):
3. Person or agency to receive child or family support payments (name):
Relationship to child (if applicable):

TYPE OR PRINT IN INK

SH-FL

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

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

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

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

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

5. Father's name:

6. Mother's name:

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

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

City, state, zip code:

City, state, zip code:

d. Mailing address:

d. Mailing address:

City, state, zip code:

City, state, zip code:

e. Driver's license number:

e. Driver's license number:

State:

State:

f. Telephone number:

f. Telephone number:

g. Employed Not employed Self-employed

g. Employed Not employed Self-employed

Employer's name:

Employer's name:

Street address:

Street address:

City, state, zip code:

City, state, zip code:

Telephone number:

Telephone number:

7. A restraining order, protective order, or nondisclosure order due to domestic violence is in effect.

- a. The order protects: Father Mother Children
- b. From: Father Mother
- c. The restraining order expires on (date):

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

Date:

(TYPE OR PRINT NAME)



(SIGNATURE OF PERSON COMPLETING THIS FORM)