# How to Request Judgment of Paternity

# WHEN TO USE THIS PACKET

These forms can be used to request the court to enter a judgment establishing paternity, to include custody, visitation, child support, and a name change (and amending the birth certificate) of the minor child between unmarried parents.

You must have had the other parent served with a Summons, Petition, and a UCCJEA. 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 written agreement.

If the respondent filed a Response, in order to use this packet the parties must agree in writing to enter a judgment of paternity. This may be done by filing a document called "Stipulation For Entry of Judgment" (FL-240) **instead of** a Default. If this is the case, fees (or a Fee Waiver) will be due from the Respondent). A written agreement must be attached to the judgment.

If you are uncertain whether to use this packet, you should seek assistance from the Self-Help Center.

PARTY WITHOUT ATTORNEY OR ATTORNEY	STATE BAR NUMBER:	FOR COURT USE ONLY
NAME:		TON COOK! USE ONL!
FIRM NAME:		
STREET ADDRESS:		
CITY:	STATE: ZIP CODE:	
TELEPHONE NO.:	FAX NO.:	
E-MAIL ADDRESS:		
ATTORNEY FOR (name):		
SUPERIOR COURT OF CALIFORNIA,	COUNTY OF	
STREET ADDRESS:		
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME:		
PETITIONER:		
RESPONDENT:		
		CASE NUMBER:
DECLARATION FOR DE	FAULT OR UNCONTESTED JUDGMENT	CAGE NOWBER.
1. I declare that if I appeared in cou	urt and were sworn, I would testify to the truth of the fa	acts in this declaration.
2. I request that proof will be by this	s declaration and that I will not appear before the cour	rt unless I am, ordered by the court to appear.
3. All the information in the F	Petition to Determine Parental Relationship 🔃 Res	sponse
Petition for Custody and S	Support of Minor Children Response is true	and correct.
4. Respondent and/or	Petitioner is/are the parent(s) of the minor	children.
5. A voluntary declaration of parent copy if available).	tage or paternity form has has not be	en signed regarding these children (attach a
6. DEFAULT OR UNCONTESTED	(Check a or b)	
	ondent was entered or is being requested, and I am n	not seeking any relief not requested in the
•	ated (agreed in writing) that the matter may proceed a	as an uncontested matter without notice, and
	be ordered as set forth in the proposed <i>Judgment</i> (for	m FL-250).
a. Petitioner Resp	oondent is presently receiving public assistance (7	· · · · · · · · · · · · · · · · · · ·
payable to the local ch	ild support agency at (specify address):	
h NOTE: If a support order is	s requested, submit a completed <i>Income and Exp</i> e	ense Declaration (form FI -150) or
	lified) (form FL-155), unless a current form is on fi	
	be ordered as set forth in the proposed <i>Judgment</i> (for	•
	be ordered as set forth in the proposed <i>Judgment</i> (for	•
	ENTING TIME) should be ordered as set forth in the page of PREGNANCY AND BIRTH should be ordered as	
FL-250). 12. NAMES OF THE CHILDR	EN should be changed as set forth in the proposed Ju	udament (form FL-250).
13. This declaration may be reviewe	d by a commissioner sitting as a temporary judge who	• •
or require my appearance.		
	Advisement and Waiver of Rights Re: Determination of	of Parental Relationship (form FL-235), which
is signed and attached to this de 15. Other (specify):	ciaration.	
To Other (apecity).		
I declare under nepalty of periury un	nder the laws of the State of California that the foregoin	ng is true and correct
Date:	idel the laws of the State of California that the folegon	ng is true and correct.
	<b>Š</b>	
	<u></u>	
(TYPE OR PRINT NA	ME)	(SIGNATURE OF DECLARANT) Page 1 of 1
Form Adopted for Mandatory Use DEC	LARATION FOR DEFAULT OR UNCONTESTE	
Judicial Council of California FL-230 [Rev. January 1, 2020]	(Uniform Parentage, Custody and Suppor	3000 at sag

**Print this form** 

Save this form



PETITIONER:	CASE NUMBER:
RESPONDENT:	

#### ADVISEMENT AND WAIVER OF RIGHTS RE: DETERMINATION OF PARENTAL RELATIONSHIP

- 1. **RIGHT TO BE REPRESENTED BY A LAWYER.** I understand that I have the right to be represented by a lawyer of my own choice at my own expense. If I cannot afford a lawyer, I can contact the Lawyer Referral Association of the local bar association or the Family Law Facilitator for assistance.
- 2. **RIGHT TO A TRIAL.** I understand that I have a right to have a judge determine whether I am the parent of the children named in this action.
- 3. **RIGHT TO CONFRONT AND CROSS-EXAMINE WITNESSES.** I understand that in a trial I have the right to confront and cross-examine the witnesses against me and to present evidence and witnesses in my own defense.
- 4. **RIGHT TO HAVE GENETIC TESTING.** I understand that, where the law permits, I have the right to have the court order genetic testing. The court will decide who pays for the tests. The court could order that I pay none, some, or all of the costs of the tests.
- 5. **OBLIGATIONS.** I understand that if I admit that I am the parent of the children in this action that those children will be my children for legal purposes.
- 6. **WAIVER.** I understand that I am admitting that I am the parent of the children named in the stipulation and am giving up the rights stated above (except the right to an attorney if I have an attorney).
- 7. **CHILD SUPPORT.** I understand that I will have the duty to contribute to the support of the children named in this action and that this duty of support will continue for each child until the obligation is terminated by law.

8. **CRIMINAL NON-SUPPORT.** I understand that if I willfully fail to support the children, criminal proceedings may be initiated against me.

<ul> <li>9. UNDERSTANDING.</li> <li>a. I have read and understand the Judgment (Uniform Parentage — Custody and Support) (form FL-250) and this Advisement and Waiver of Rights.</li> <li>b. I understand the translation.</li> </ul>	IF I AM REPRESENTED BY AN ATTORNEY, I ACKNOWLEDGE THAT MY ATTORNEY HAS READ AND EXPLAINED TO ME THE CONTENTS OF THE STIPULATION, RECITALS, AND WAIVERS, AND I ACKNOWLEDGE THAT I UNDERSTAND THEM.
Date:	
(TYPE OR PRINT NAME)	(SIGNATURE OF DECLARANT)
INTERPRETER'S DECLARATIO	N
1. The Petitioner Respondent is unable to read or understand the J Support) (form FL-250) and this Advisement and Waiver of Rights because:	ludgment (Uniform Parentage—Custody and
<ul><li>a the primary language of the party is (specify):</li><li>b Other (specify):</li></ul>	
	Custody and Support) (form FL-250) and this erstood the Judgment (Uniform Parentage—
Date:	
(TYPE OR PRINT NAME)	(SIGNATURE OF INTERPRETER)

Form Approved for Optional Use Judicial Council of California FL-235 [Rev. January 1, 2020]

ADVISEMENT AND WAIVER OF RIGHTS RE: DETERMINATION OF PARENTAL RELATIONSHIP

Family Code, § 7600 et seq. www.courts.ca.gov.

(Uniform Parentage)

For your protection and privacy, please press the Clear This Form button after you have printed the form.

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	CASE NAME: Case Number:
1	ATTACHMENT 15 TO THE DECLARATION FOR DEFAULT
2	
3	
4	The parties in this case were not married and have the following child(ren) as a result of the relationship.
5	1) <u>Issues related to Child Custody &amp; Visitation</u>
6	We have minor child(ren) from this relationship and their names and dates of birth are:  1. , Date of birth:
7	2. , Date of birth: , Date of birth:
8	4. , Date of birth:
9	The current custody/visitation order, filed on , shall remain in full force and
10	effect and is attached to the judgment.
11	• The child(ren) currently live with themotherfather. The child(ren)visitdo not visit with the other parent. The current visitation pattern is as follows:
12	
13	I am proposing that the court make the following orders for <b>custody</b> :
14	<ul> <li>Legal custody to:  Mother Father</li> <li>Mother Father to be the primary custodial parent.</li> </ul>
15	• I am proposing that the court make the following orders for <b>visitation</b> :
16	Mother    Father to have visitation as follows:
17	
18	
19	2) <u>Issues related to Child Support, Child Care, and Health Insurance</u> :
20	The current child support order, filed on , shall remain in full force and effect
21	and is attached to the judgment.
22	I request the issue of child support to be reserved as to:  Mother  Father.
23	Petitioner Respondent is incarcerated and is expected to be released on or about
24	• The children reside with the mother % of the time and with the father % of the time.
25	• The child(ren) are are not receiving public assistance. I am the other parent is receiving TANF for the child(ren) in this case.
26	
27	
28	

	CASE NAME: Case Number:
1	
2	• I am presently working not working. My gross monthly income is \$ . My tax filing
3	status is , and I claim exemption(s).
4	I have other minor child(ren) of mine from a different relationship living with me.
5	• 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
6	other party has the ability to earn at least) \$ and his/her tax filing status is , and he/she claims exemption(s).
7	The other parent has other minor child(ren) of his/hers from a different relationship living with him/her.
8	nim/ner.
9	3) Other
10	Other information the court should know prior to entering a judgment:
11	
12	
13	
14	Dated: Signed:
15	
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FRES-0076 Rev. 07/01/2012

PARTY WITHOUT ATTORNEY OR ATTORNEY	STATE BAR NUMBER:	TE-230
NAME:	STATE BAR NOWIDER.	FOR COURT USE ONLY
FIRM NAME:		
STREET ADDRESS:		
CITY:	STATE: ZIP CODE:	
TELEPHONE NO.:	FAX NO.:	
E-MAIL ADDRESS:		
ATTORNEY FOR (name):		
SUPERIOR COURT OF CALIFORNI	A COUNTY OF	
STREET ADDRESS:	A, 000KTT 01	
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME:		
PETITIONER:		
RESPONDENT:		
	JUDGMENT	CASE NUMBER:
1. This judgment	contains personal conduct restraining orders m	nodifies existing restraining orders.
The restraining orders are		of the attachment.
They expire on (date):		must be attached.
2. a. This matter proceeded as b. Date:	follows: Default or uncontested By declar	ation Contested Room:
zato.	Бери.	
<ul><li>c. Judicial officer (name):</li><li>d Petitioner present</li></ul>	Attorney present (name):	Temporary judge
e. Respondent present	,	
	The petitioner appeared without counsel and was advised	of relevant rights
(2)1	The petitioner signed Advisement and Waiver of Rights R form FL-235).	
(3) 1	The petitioner is married to the respondent, and no other	action is pending.
(4) 1	The petitioner signed a voluntary declaration of parentage	e or paternity.
	There is a prior judgment of parentage in a family support	-
	The respondent appeared without counsel and was advis	
	The respondent signed Advisement and Waiver of Rights	Re: Determination of Parental Relationship
	form FL-235).	action is panding
. ,	The respondent is married to the petitioner, and no other	
	The respondent signed a voluntary declaration of parenta	
, ,	There is a prior judgment of parentage in a family support	, juvernie or adoption court case.
h. Other parties or attorneys	present (specify):	
3. THE COURT FINDS Name: Name:		
Name:		
are the parents of the following	g children:	
Child's name		Date of birth
4. THE COURT ORDERS		
	sitation are as specified in one or more of the attached fo	rms:
	tody and Visitation Order Attachment (form FL-341)	
(2) Stipulation (3) Other (spe	n and Order for Custody and/or Visitation of Children (for ecify):	m FL-355)

Page 1 of 2

	FL-25
PETITIONER:	CASE NUMBER:
RESPONDENT:	
<ul> <li>THE COURT FURTHER ORDERS</li> <li>a. Child support is as stated in one or more of the attached: <ul> <li>(1) Child Support Information and Order Attachment (form FL-342)</li> <li>(2) Stipulation to Establish or Modify Child Support and Order (form FG)</li> <li>(3) Other (specify):</li> </ul> </li> <li>b. Both parties must complete and file with the court a Child Support Case Registry FG date of this judgment. Thereafter, the parents must notify the court of any change in the court of any chang</li></ul>	Form (form FL-191) within 10 days of the
of the change.  C. The form Notice of Rights and Responsibilities—Health Care Costs and Reimburs	
on Changing a Child Support Order (form FL-192) is attached.	
d. The last names of the children are changed to (specify):	
<ul> <li>e.  The birth certificates must be amended to conform to this court order by</li> <li>(1)  adding the following parent's name:</li> <li>(2)  changing the last name of the children.</li> </ul>	
<ul> <li>f. Attorney fees and costs are as stated in the attached Attorney's Fees and Cog.</li> <li>g. Reasonable expenses of pregnancy and birth are as stated in the attachment.</li> <li>h. Other (specify):</li> </ul>	
Continued on Attachment 5h.	
6. Number of pages attached:	
Date:	
(TYPE OR PRINT NAME)	JUDICIAL OFFICER
	ATURE FOLLOWS LAST ATTACHMENT
NOTICE: Any party required to pay child support must pay interest on ownwhich is currently 10 percent.	verdue amounts at the "legal" rate,

FL-250 [Rev. January 1, 2020]

**JUDGMENT** 

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Clear this form

# 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 healthcare 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. Going to court. Sometimes parents get into disagreements about health-care costs. If you and the other parent cannot resolve the situation after talking about it, you can request that the court make a decision.
- a. Disputed charges. If you dispute a charge made by the other parent, you may file a request for the court to resolve the dispute, but only if you pay that charge before filing your request.

- b. Nonpayment. If you claim that the other parent has failed to pay you back for a payment, or they have failed to make a payment to the provider after proper notice, you may file a request for the court to resolve the dispute. The court will presume that if uninsured costs have been paid, those costs were reasonable.
- c. Attorney's fees. If the court decides one parent has been unreasonable, it can order that parent to pay the other parent's attorney's fees and costs.
- d. Court forms. Use forms FL-300 and FL-490 to get a court date. See form FL-300-INFO for information about completing, filing, and serving your court papers.
- 6. Court-ordered insurance coverage. If a parent provides health-care insurance as ordered by the court, that insurance must be used at all times to the extent that it is available for health-care costs.
- a. Burden to prove. The parent claiming that the coverage is inadequate to meet the child's needs has the burden of proving that to the court.
- b. Cost of additional coverage. If a parent purchases health-care insurance in addition to that ordered by the court, that parent must pay all the costs of the additional coverage. In addition, if a parent uses alternative coverage that costs more than the coverage provided by court order, that parent must pay the difference.
- 7. Preferred health providers. If the court-ordered coverage designates a preferred health-care provider, that provider must be used at all times consistent with the terms of the health insurance policy. When any parent uses a health-care provider other than the preferred provider, any health-care costs that would have been paid by the preferred health provider if that provider had been used must be the sole responsibility of the parent incurring those costs.

# Information About Child Support for Incarcerated or Confined Parents

1. Child support. As of September 27, 2022, child support automatically stops if the parent who has to pay is confined against their will for more than 90 days in a row in jail, prison, juvenile detention, a mental health facility, or other institution.

Exception. Child support does not automatically stop if the parent who has to pay has money available to pay child support.

2. Past confinement. Child support also stops during past confinement if it was ordered from October 8, 2015, through December 31, 2019, or January 1, 2021, through September 26, 2022, and the parent who has to pay was confined for more than 90 days in a row during the same time frame.

Exceptions for past confinement. Child support does not automatically stop if the parent who has to pay was in jail or prison for failing to pay child support or for domestic violence against the other parent or the child, or if they had money available to pay support.

- 3. Timing. Child support automatically restarts the first day of the first full month after the parent is released. If you need to change your child support order, see page 2.
- 4. More info. For more information about child support and incarcerated parents, see Family Code section 4007.5 or go to https://selfhelp.courts.ca.gov/child-support/incarcerated-parent.

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## NOTICE OF RIGHTS AND RESPONSIBILITIES

# Information Sheet on Changing a Child Support Order

#### **General Info**

The court has made a child support order in your case. This order will remain the same unless one of the parents requests that the support be changed (modified). An order for child support can be modified by filing a request to change child support and serving the other parent. If both parents agree on a new child support amount, they can complete, sign, and file with the court a *Stipulation to Establish or Modify Child Support and Order* (form FL-350). (**Note:** If the local child support agency is involved in your case, it must be served with any request to change child support and approve any agreement.)

#### Online Self-Help Guide

For more information about how child support works, visit: <a href="https://selfhelp.courts.ca.gov/child-support">https://selfhelp.courts.ca.gov/child-support</a>.

#### When a Child Support Order May Be Changed

The court considers several things when ordering the payment of child support.

- First, the number of children is considered, along with the percentage of time each parent has physical custody of the children.
- Next, the net disposable incomes of both parents are determined (which is how much money is left each month after taxes and certain other items like health insurance, union dues, or other child support ordered and paid are subtracted from a parent's paycheck). The court can also look at earning ability if a parent is not working.
- The court considers both parents' tax filing status and may consider hardships, such as the cost of raising a child of another relationship who lives with a parent.

A parent can request to change an existing order for child support when circumstances change significantly. For example if the net disposable income of one of the parents changes, parenting time changes, or a new child is born.

#### **Examples**

- You have been ordered to pay \$500 per month in child support. You lose your job. You will continue to owe \$500 per month, plus 10 percent interest on any unpaid support, unless you file a motion to modify your child support to a lower amount and the court orders a reduction.
- You are currently receiving \$300 per month in child support from the other parent, whose net income has just increased substantially. You will continue to receive \$300 per month unless you file a motion to modify your child support to a higher amount and the court orders an increase.
- You are paying child support based 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, you must fill out one of these forms:

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

You must also fill out one of these forms, and attach proof of income for the past two months (like your paycheck stubs):

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

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

Contact the family law facilitator in your county. You can find them here: <a href="https://www.courts.ca.gov/selfhelp-facilitators.htm">https://www.courts.ca.gov/selfhelp-facilitators.htm</a>.

After you fill out the forms, file them with the court clerk and ask for a hearing date. Write the hearing date on the form. The clerk may ask you to pay a filing fee. If you cannot afford the fee, fill out these forms, too:

- Form FW-001, Request to Waive Court Fees and
- Form FW-003, Order on Court Fee Waiver (Superior Court)

You must serve the other parent. If the local child support agency is involved, serve it too.

- This means someone 18 or over—not you—must deliver copies of your filed court forms to the other parent, at least 16 court days before the hearing. Add 5 calendar days if delivered by mail within California (see Code of Civil Procedure section 1005 for other situations).
- Court days are weekdays when the court is open for business (Monday through Friday except court holidays).
   Calendar days include all days of the month, including weekends and holidays. To find court holidays, go to www.courts.ca.gov/holidays.htm.

Blank copies of both of these forms must also be served:

- Form FL-320, Responsive Declaration to Request for Order
- Form FL-150, Income and Expense Declaration

Then the server fills out and signs a *Proof of Service* Take this form, plus one copy, to the clerk and file it at least one week before your hearing.

Go to your hearing and ask the judge to change the support. Bring your tax returns from the last two years and your 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:

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

#### Need help?

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

CA	SE NAME:		CASE NO:	
	<u>Attach</u>	ment 5h to Judg	<u>ament</u>	
It is	s ordered as follows:			
	There is attached hereto, and labele consisting of pages. The fully set forth herein. The parties are order the Agreement. The court reserves jurison the Agreement; to award attorney's fees provisions thereof; to join any person that	e Agreement is inco ered to comply with liction to: enforce and and costs to the pre	orporated and merged each and every execund administer the execevailing party in any ac	cutory provisions of
1)	Child Custody:			
	There is attached hereto and made Court Services or other court order, signs attachment consisting of judgment as though fully set forth herein.	ed and filed by the o	court on	, a <b>certified copy</b> of Family . This nerged into and made part of th
	The parties have The custody of the minor children shall be	mino e awarded as follow	r child(ren). vs:	
Cł	nild's Name	Date of Birth	Legal Custody	Physical Custody
	Primary physical custody of the mind	or child shall be with	the	•
2)	Child Visitation			
	The parties have no minor children,			
	The non-custodial parent shall have the f	•	_	
	Reasonable right of visitation as			<b>7</b>
	Every weekend from at	at	a.m.	p.m. until
	Every 2nd and 4th weekend from at	ı	at a.m. p.m.	a.m. p.m. until
	Every 1st, 3rd, and when applicated at a.mp.m. and		peginning at	☐a.m. ☐p.m.
	Other (describe):			
	,			
3)	Family Code Section 3048			
	This Court has jurisdiction to make order Custody Jurisdiction and Enforcement A		ustody under the Unifo	rm Child
	Notice and opportunity to be heard were laws of the State of California;	given to the respon	ding party/parties as p	provided by the
	The custody and visitation rights of each	party are set forth h	nerein;	
	A violation of this order may subject the	party in violation to	civil or criminal penalti	es, or both;

	CASE NAME: CASE NO:						
1	The country of habitual residence of the child is the United States of America;						
2	The parties have considered the factors set forth in the Family Code Section 3048(b)(1) and find that there is not a risk of abduction of the child(ren) by either parent.						
	Restrictions:						
4	Visitation / La Exchange of the children shall be supervised by the following Agency:						
5 6	Phone: . Costs of Supervised Visitation or Supervised Exchange						
7	☐ Visitation shall be supervised by						
	An adult designated by the custodial parent.						
8	The following designated person(s):	•					
9							
10							
11	California Counties:						
12							
13							
	minor children, except where a restraining order is issued						
14	Neither parent shall make disparaging remarks about the other parent in the presence of the minor						
15							
16	3) Child Support						
17 18	order from the Department of Child Support Division, signed and filed on . This attachment consisting of						
19							
20	amounts:						
21	Name of Child Date of Birth Amount of Monthly Support						
22		_					
23		$\dashv$					
24	for a total of \$ per month commencing on and continuing on the 1st day						
25	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						
26							
27	2. Interest shall accrue on the entire principal balance owing and not on each installment as it						
28	becomes due. This is not an installment judgment.						

	CASE NAME:	CASE NO:					
1	3. No provision of this judgment shall operate to lir	nit any right to collect the principal (total amount					
2	of unpaid support) or to charge and collect interest and penalties as allowed by law. All payments						
3	ordered are subject to modification.						
4	5. Support shall be paid to the Department of Child Support Services SDU, P.O. Box 989067, West						
	Sacramento, CA 95798.						
5	6. The Fresno County Department of Child Support Services shall enforce all payments.						
6	7. A Wage and Earnings Assignment Order shall is	ssue for ongoing support and arrearages.					
7	8. Both Parents shall:						
8	a. Provide and maintain health insurance cove	erage for the child(ren) if it is available through					
9	employment, a group plan, or otherwise ava	ailable at no or reasonable cost, and shall keep the					
10	Department of Child Support Services infor	ned of the availability of the coverage;					
	b. If health insurance is not available, provide	coverage when it becomes available;					
		Support Services' request, complete and return a					
12	health insurance form;  d. Provide to the Department of Child Support	Services all information and forms necessary to					
13	obtain health care services for the child(ren	·					
14		mbursement to the other parent or caretaker who					
15	incurs costs for health care services for the	child(ren).					
16	Unreimbursed medical, drug, dental, orthodontic	c, and vision expenses shall be shared equally (one					
7	half each) by the Petitioner and Respondent, an	d the parties shall comply with the provisions of					
8	Family Code Section 4063 regarding payment a	nd reimbursement of the unreimbursed costs.					
19	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					
20	office of the Department of Child Support Services of any change in residence, income, or						
21	employment within 10 days.						
22	12. Each party shall be responsible for 50% of child	care costs related to employment or to reasonably					
23	necessary education or training for employment	skills.					
24	13. The  Mother  Father shall claim the ch	uild(ren) for tax purposes.					
25	7) Other Orders:						
26							
27	IT IS SO ORDERED.						
28	Dated:						
		Judge of the Superior Court					



		FL-130
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address		FOR COURT USE ONLY
TELEPHONE NO.: FAX NO. (0)	otional):	
E-MAIL ADDRESS (Optional):		
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF		
STREET ADDRESS:		
MAILING ADDRESS: CITY AND ZIP CODE:		
BRANCH NAME:		
PETITIONER:		
RESPONDENT:		
NOTICE OF ENTRY OF JUDGME	NT	CASE NUMBER:
L You are notified that the following judgment was entered on	(date):	
1. Dissolution		
2. Dissolution—status only		`
3. Dissolution—reserving jurisdiction over terminatio	n of marital status or domestic	partnership
4. Legal separation		F
5. Nullity		
6. Parent-child relationship		
7. Judgment on reserved issues		
8. Other (specify):		
Date:	Clerk, by	, Deputy
—NOTICE TO ATTORNEY OF R	ECORD OR PARTY WITHOU	T ATTORNEY—
Under the provisions of Code of Civil Procedure section 195 otherwise disposed of after 60 days from the expiration of the		t may order the exhibits destroyed or
STATEMENT IN THIS BOX APP Effective date of termination of marital or domestic partner	ership status (specify):	
WARNING: Neither party may remarry or enter into a of marital or domestic partnership status, as shown in		ntil the effective date of the termination
CLERK'S CE	ERTIFICATE OF MAILING	
I certify that I am not a party to this cause and that a true co fully prepaid, in a sealed envelope addressed as shown belo		
at (place):	, California, on <i>(date):</i>	
Date:	Clerk, by	, Deputy
Name and address of petitioner or petitioner's attorney	Name and add	lress of respondent or respondent's attorney
		1
<u> </u>		 Page 1 of 1
Form Adopted for Mandatory Use Judicial Council of California  NOTICE OI	F ENTRY OF JUDGMENT	Family Code, §§ 2338, 7636,7637 www.courts.ca.gov

Judicial Council of California FL-190 [Rev. January 1, 2005]

(Family Law—Uniform Parentage—Custody and Support)

For your protection and privacy, please press the Clear This Form button after you have printed the form.

Print this form

Save this form

Clear this form

	L-131
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	COURT PERSONNEL: STAMP DATE RECEIVED HERE
TELEPHONE NO.: FAX NO. (Optional):	DO NOT FILE
E-MAIL ADDRESS (Optional):	
ATTORNEY FOR (name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
STREET ADDRESS:	
MAILING ADDRESS:	
CITY AND ZIP CODE:  BRANCH NAME:	
PETITIONER/PLAINTIFF:	
RESPONDENT/DEFENDANT: OTHER PARENT:	
CHILD SUPPORT CASE REGISTRY FORM	CASE NUMBER:
Mother First form completed	
Father Change to previous information	
THIS FORM WILL NOT BE PLACED IN THE COURT	FILE IT WILL BE
MAINTAINED IN A CONFIDENTIAL FILE WITH THE ST	
MAINTAINED IN A GONT IDENTIAL TILE WITH THE GI	ATE OF OALH ORNA.
Notice: Pages 1 and 2 of this form must be completed and delivered to the court alor Pages 3 and 4 are instructional only and do not need to be delivered to the court. If y complete this form and deliver it to the court within 10 days of the date on which you Any later change to the information on this form must be delivered to the court on a change. It is important that you keep the court informed in writing of any changes of	you did not file the court order, you must u received a copy of the support order. nother form within 10 days of the
Support order information (this information is on the court order you are filing or have re-	ceived).
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:
(1) Current \$ Current \$ base child Reserved order base family Reserved or	Current \$ der spousal Reserved order
Support: Support:	support.
\$0 (zero) order \$0 (zero) ord	der \$0 (zero) order
(2) Additional \$ Additional \$	
monthly monthly	
support: support:	
(3) Total \$ Total \$	Total \$
past-due past-due	past-due
support: support:	support:
(4) Payment \$ Payment \$	Payment \$
on past-	on past-
due support: due support:	due support:
(5) Wage withholding was ordered ordered but stayed until (date):	
<ol> <li>Person required to pay child or family support (name):</li> <li>Relationship to child (specify):</li> </ol>	
3. Person or agency to receive child or family support payments (name): Relationship to child (if applicable):	
TYPE OR PRINT IN INK	
	Page 1 of 4

	DETITIONED/DI AINTIEE:			Т		
RES	PETITIONER/PLAINTIFF: PONDENT/DEFENDANT:				CASE NUMBER:	
0	OTHER PARENT:					
4. Th	ne child support order is for the following children:					
a.	<u>Child's name</u>			Dat	e of birth	Social security number
b.						
c.						
	Additional children are listed on a page attached to this doc	cum	nent			
perso	re required to complete the following information about yoursel n, but you are encouraged to provide as much as you can. This ained in a confidential file with the State of California.					
5. Fa	ather's name:	6.	Мс	other's name:		
a.	Date of birth:		a.	Date of birth:		
b.	Social security number:		b.	Social security	number:	
c.	Street address:		c.	Street address	::	
	City, state, zip code:			City, state, zip	code:	
d.	Mailing address:		d.	Mailing addres	ss:	
	City, state, zip code:			City, state, zip	code:	
e.	Driver's license number:		e.	Driver's license	e number:	
	State:			State:		
f.	Telephone number:		f.	Telephone nur	mber:	
g.	Employed Not employed Self-employed Employer's name:		g.	Employer's na		oyed Self-employed
	Street address:			Street address	s:	
	City, state, zip code:			City, state, zip	code:	
	Telephone number:			Telephone nui	mber:	
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):						
l decl	are under penalty of perjury under the laws of the State of Calif	forn	nia tl	hat the foregoin	g is true and corre	ct.
Date:						
				<b>₽</b> `		
				<u> </u>		
	(TYPE OF PRINT NAME)				(CICNIATURE OF BERCO	AN COMPLETING THE FORM

### INFORMATION SHEET FOR CHILD SUPPORT CASE REGISTRY FORM

(Do NOT deliver this Information Sheet to the court clerk.)

Please follow these instructions to complete the *Child Support Case Registry Form* (form FL-191) if you do not have an attorney to represent you. Your attorney, if you have one, should complete this form.

Both parents must complete a *Child Support Case Registry Form*. The information on this form will be included in a national database that, among other things, is used to locate absent parents. When you file a court order, you must deliver a completed form to the court clerk along with your court order. If you did not file a court order, you must deliver a completed form to the court clerk **WITHIN 10 DAYS** of the date you received a copy of your court order. If any of the information you provide on this form changes, you must complete a new form and deliver it to the court clerk within 10 days of the change. The address of the court clerk is the same as the one shown for the superior court on your order. This form is confidential and will not be filed in the court file. It will be maintained in a confidential file with the State of California.

#### INSTRUCTIONS FOR COMPLETING THE CHILD SUPPORT CASE REGISTRY FORM (TYPE OR PRINT IN INK):

If the top section of the form has already been filled out, skip down to number 1 below. If the top section of the form is blank, you must provide this information.

<u>Page 1, first box, top of form, left side</u>: Print your name, address, telephone number, fax number, and e-mail address, if any, in this box. Attorneys must include their State Bar identification numbers.

<u>Page 1, second box, top of form, left side</u>: Print the name of the county and the court's address in this box. Use the same address for the court that is on the court order you are filing or have received.

<u>Page 1. third box, top of form, left side</u>: Print the names of the petitioner/plaintiff, respondent/defendant, and other parent in this box. Use the same names listed on the court order you are filing or have received.

<u>Page 1.</u> fourth box, top of form, left side: Check the box indicating whether you are the mother or the father. If you are the attorney for the mother, check the box for mother. If you are the attorney for the father, check the box for father. Also, if this is the first time you have filled out this form, check the box by "First form completed." If you have filled out form FL-191 before, and you are changing any of the information, check the box by "Change to previous information."

Page 1, first box, right side: Leave this box blank for the court's use in stamping the date of receipt.

Page 1, second box, right side: Print the court case number in this box. This number is also shown on the court papers.

#### Instructions for numbered paragraphs:

- 1. a. Enter the date the court order was filed. This date is shown in the "COURT PERSONNEL: STAMP DATE RECEIVED HERE" box on page 1 at the top of the order on the right side. If the order has not been filed, leave this item blank for the court clerk to fill in.
  - b. If the court order you filed or received is the first child or family support order for this case, check the box by "Initial child support or family support order." If this is a change to your order, check the box by "Modification."
  - c. Information regarding the amount and type of support ordered and wage withholding is on the court order you are filing or have received.
    - (1) If your order provides for any type of current support, check all boxes that describe that support. For example, if your order provides for both child and spousal support, check both of those boxes. If there is an amount, put it in the blank provided. If the order says the amount is reserved, check the "Reserved order" box. If the order says the amount is zero, check the "\$0 (zero) order" box. Do not include child care, special needs, uninsured medical expenses, or travel for visitation here. These amounts will go in (2). Do NOT complete the Child Support Case Registry form if you receive spousal support only.
    - (2) If your order provides for a set monthly amount to be paid as additional support for such needs as child care, special needs, uninsured medical expenses or travel for visitation check the box in Item 2 and enter the monthly amount. For example, if your order provides for base child support and in addition the paying parent is required to pay \$300 per month, check the box in item 2 underneath the "Child Support" column and enter \$300. Do NOT check this box if your order provides only for a payment of a percentage, such as 50% of the childcare.

- (3) If your order determined the amount of past due support, check the box in Item 3 that states the type of past due support and enter the amount. For example, if the court determined that there was \$5000 in past due child support and \$1000 in past due spousal support, you would check the box in item 3 in the "Child Support" column and enter \$5000 and you would also check the box in item 3 in the "Spousal Support" column and enter \$1000.
- (4) If your order provides for a specific dollar amount to be paid towards any past due support, check the box in Item 4 that states the type of past due support and enter the amount. For example, the court ordered \$350 per month to be paid on the past due child support, you would check the box in Item 4 in the "Child Support" column and enter \$350.
- (5) Check the "ordered" box if wage withholding was ordered with no conditions. Check the box "ordered but stayed until" if wage withholding was ordered but is not to be deducted until a later date. If the court delayed the effective date of the wage withholding, enter the specific date. Check only one box in this item.
- 2. a. Write the name of the person who is supposed to pay child or family support.
  - b. Write the relationship of that person to the child.
- Write the name of the person or agency supposed to receive child or family support payments.
  - b. Write the relationship of that person to the child.
- 4. List the full name, date of birth, and social security number for each child included in the support order. If there are more than five children included in the support order, check the box below item 4e and list the remaining children with dates of birth and social security numbers on another sheet of paper. Attach the other sheet to this form.

The local child support agency is required, under section 466(a)(13) of the Social Security Act, to place in the records pertaining to child support the social security number of any individual who is subject to a divorce decree, support order, or paternity determination or acknowledgment. This information is mandatory and will be kept on file at the local child support agency.

Top of page 2, box on left side: Print the names of the petitioner/plaintiff, respondent/defendant, and other parent in this box. Use the same names listed on page 1.

Top of page 2, box on right side: Print your court case number in this box. Use the same case number as on page 1, second box, right side.

You are required to complete information about yourself. If you know information about the other person, you may also fill in what you know about him or her.

- 5. If you are the father in this case, list your full name in this space. See instructions for a-g under item 6 below.
- 6. If you are the mother in this case, list your full name in this space.
  - a. List your date of birth.
  - b. Write your social security number.
  - c. List the street address, city, state, and zip code where you live.
  - d. List the street address, city, state, and zip code where you want your mail sent, if different from the address where you live.
  - e. Write your driver's license number and the state where it was issued.
  - f. List the telephone number where you live.
  - g. Indicate whether you are employed, not employed, self-employed, or by checking the appropriate box. If you are employed, write the name, street address, city, state, zip code, and telephone number where you work.
- 7. If there is a restraining order, protective order, or nondisclosure order, check this box.
  - a. Check the box beside each person who is protected by the restraining order.
  - b. Check the box beside the parent who is restrained.
  - c. Write the date the restraining order expires. See the restraining order, protective order, or nondisclosure order for this date.

If you are in fear of domestic violence, you may want to ask the court for a restraining order, protective order, or nondisclosure order.

You must type or print your name, fill in the date, and sign the Child Support Case Registry Form under penalty of perjury. When you sign under penalty of perjury, you are stating that the information you have provided is true and correct.

FL-191 [Rev. July 1, 2005]

CHILD SUPPORT CASE REGISTRY FORM

Page 4 of 4

Clear this form