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SUPERIOR COURT OF CALIFORNIA
COUNTY OF SAN DIEGO

REQUEST FOR ORDER PACKET

FORMS INCLUDED IN THIS PACKET		
MOVING PARTY	Family Law General Self-Help Information	SDSC Form #D-280
	Shriver – Custody You May Be Eligible	SDSC Form #ADM-304/304S
	Child Custody Information Sheet – Recommending Counseling	Judicial Council Form #FL-313-INFO
	Notice of Rights and Responsibilities Health-Care Costs and Reimbursement Procedures	Judicial Council Form #FL-192
	Information Sheet for Request for Order	Judicial Council Form #FL-300-INFO
	Request for Order	Judicial Council Form #FL-300
	Declaration Regarding Notice and Service of Request for Temporary Emergency Orders	Judicial Council Form #FL-303
	Temporary Emergency Orders	Judicial Council Form #FL-305
	Income and Expense Declaration	Judicial Council Form #FL-150
	Declaration / Attached Declaration	Judicial Council Form #MC-030/MC-031
	Family Court Services Screening Form	SDSC Form #FCS-046
	Information Sheet for Proof of Personal Service	Judicial Council Form #FL-330-INFO
	Proof of Personal Service	Judicial Council Form #FL-330
	Information Sheet for Proof of Service by Mail	Judicial Council Form #FL-335-INFO
	Proof of Service by Mail	Judicial Council Form #FL-335
	Family Court Services (FCS) Data Sheet	SDSC Form #FCS-002
	Family Court Services Child Custody Recommending Counseling Information Sheet	SDSC Form #FCS-022
	Notice of Change of Address	Judicial Council Form #MC-040
RESPONDING PARTY	Information Sheet: Responsive Declaration to Request for Order	Judicial Council Form #FL-320-INFO
	Responsive Declaration to Request for Order	Judicial Council Form #FL-320
	Declaration / Attached Declaration	Judicial Council Form #MC-030/MC-031
	Income and Expense Declaration	Judicial Council Form #FL-150
	Information Sheet for Proof of Personal Service	Judicial Council Form #FL-330-INFO
	Proof of Personal Service	Judicial Council Form #FL-330
	Information Sheet for Proof of Service by Mail	Judicial Council Form #FL-335-INFO
	Proof of Service by Mail	Judicial Council Form #FL-335
	Family Court Services (FCS) Data Sheet	SDSC Form #FCS-002
	Family Court Services Child Custody Recommending Counseling Information Sheet	SDSC Form #FCS-022

MOVING PARTY

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO

FAMILY LAW SELF-HELP GENERAL INFORMATION

The information contained in this form is intended to provide self-help guidance on family law cases. San Diego City and County Public Libraries, as well as the San Diego Law Library, have computers with free Internet access available.

STATE SELF-HELP RESOURCES. The California Courts website, maintained by the Judicial Council of California, contains information about resources for self-help. Go to the California Courts Home page (http://www.courts.ca.gov/home.htm) and click on the category that best matches your needs from the "Self-Help" drop down menu. The primary categories for family law are: (1) Divorce or Separation (http://www.courts.ca.gov/selfhelp-divorce.htm); (2) Families & Children (http://www.courts.ca.gov/selfhelp-family.htm); and (3) Abuse & Harassment (http://www.courts.ca.gov/selfhelp-abuse.htm). Each category includes basic information with links to subcategories that include FAQs, step-by-step instructions for filing and serving the necessary documents, and links to the required forms with video instructions on how to complete each form. Click on the blue links of each category and subcategories that match your needs and follow the instructions. Parentage cases, also known as paternity cases, can be found as a subcategory under "Families & Children" (http://www.courts.ca.gov/selfhelp-parentage.htm).

LOCAL SELF-HELP RESOURCES. Visit the San Diego Superior Court's website at www.sdcourt.ca.gov. On the Home page, click on the "Family" category (drop down menu) for information about various case types and Self-Help Services within family law, including family law rules and forms.

FAMILY LAW FACILITATORS (FLF). Relying solely on information obtained from the Internet is not the only option. FLF provides hands-on help to any Self-Represented Litigant (SRL). FLF offices are located at every division of the court. They offer both one-on-one services and group workshops. The services are free but offered on a first-come, first-served basis. Click on the link to "Self-Help Services" in the "Family" drop down menu on the court's website for detailed information about FLF.

REQUEST FOR ORDER (RFO). An RFO is the process used to get most court orders both before and after a judgment has been entered in a case. The most common temporary orders requested are child custody and visitation, and child and spousal support. As in most family law matters, there are mandatory forms and procedures. Detailed information and instructions are on the California Courts website. Go to the Self-Help drop down menu and click on "Families & Children" (http://www.courts.ca.gov/selfhelp-family.htm). Follow the links to the subcategories that best match your needs.

DOMESTIC VIOLENCE (DV). Detailed information, forms, and step-by-step instructions can be found on the California Courts website. Click on the "Domestic Violence" subcategory under "Abuse & Harassment" (http://www.courts.ca.gov/selfhelp-domesticviolence.htm). Any person may also get free help at any Domestic Violence Restraining Order Clinic. Detailed information about the clinics can be found on the San Diego Superior Court's website at www.sdcourt.ca.gov by clicking on "Domestic Violence" in the "Family" drop down menu.

Domestic Violence Hotline (800) 799-SAFE (7233) / Domestic Violence Restraining Order Clinics listed below:

Downtown San Diego	**Downtown San Diego**	**East County**	**North County**	**South County**
Central Courthouse 1100 Union St. San Diego, CA 92101 Operated by San Diego Volunteer Lawyer Program (SDVLP) www.sdvlp.org	Family Justice Center 1122 Broadway, Suite 200 San Diego, CA 92101 (619) 533-6000 www.sandiegofjc.org	El Cajon Courthouse 250 E. Main Street El Cajon, CA 92020 Operated by San Diego Volunteer Lawyer Program (SDVLP) www.sdvlp.org & Center for Community Solutions www.ccssd.org	Vista Courthouse 325 S. Melrose Drive Vista, CA 92081 Operated by San Diego Volunteer Lawyer Program (SDVLP) www.sdvlp.org	South Bay Courthouse 500 Third Avenue Chula Vista, CA 91911 Operated by Legal Aid Society of San Diego www.lassd.org

ALTERNATIVE DISPUTE RESOLUTION (ADR). Mediation, arbitration, collaborative family law, and the use of a privately compensated temporary judge are methods of ADR available to litigants in most family law cases. ADR is offered through private businesses at the parties' own cost. The court does not provide a list of these outside resources, nor does it endorse any private business.

OTHER INFORMATIONAL FORMS. The court's website has other local court forms which provide detailed information on topics not included in this form. Click on "Forms" in the "Family" drop down menu and find the forms listed in alphabetical order.

- Family Centered Case Resolution Process General Information (SDSC Form #D-080)
- Mandatory Settlement Conference General Information (SDSC Form #D-047)

NOTE: This form is intended to provide only general information. It is not legal advice, and should not be used as a substitute for legal advice from an attorney licensed by the State Bar of California. If you have any questions about your legal rights, you should talk to an attorney. Also, the San Diego Superior Court does not control or maintain the websites on this form and cannot be responsible for the accuracy of the information or content they contain. In addition, the content of a website may change, and the court would not necessarily be aware of the change. When you access one of these websites, you are subject to the terms of use and privacy policies of that website.

YOU MAY BE ELIGIBLE FOR A *FREE* LAWYER TO ADVISE AND/OR REPRESENT YOU IN YOUR CHILD CUSTODY CASE IF THE FOLLOWING APPLY TO YOU:

1. You are low income.
2. Either you or the other parent is asking for legal or physical custody of your child or children.

Call the number below to see if you are eligible:

(619)564-6944

Low-income parties may be eligible for free limited legal representation in certain child custody cases in the San Diego Superior Court.

Funding for this program is made possible by the Sargent Shriver Civil Counsel Act (Gov. Code § 68650 et seq.).

SDSC ADM-304 (Rev. 1/21)

SHRIVER – CUSTODY YOU-MAY-BE-ELIGIBLE

USTED PODRIA RECIBIR LOS SERVICIOS DE UN ABOGADO DE MANERA *GRATUITA* PARA ACONSEJARLE Y/O REPRESENTARLO(A) EN SU CAUSA DE CUSTODIA DE LOS HIJOS SI LO SIGUIENTE APLICA A USTED:

1. Usted es una persona de escasos recursos.
2. Usted o el otro padre de familia está solicitando la custodia legal o la custodia física de su hijo(a) o hijos.

Llame al número telefónico a continuación para averiguar si usted califica:

(619)564-6944

Las personas de bajos ingresos pueden calificar para recibir representación legal limitada gratuitamente en ciertas causas de custodia de los hijos en el Tribunal Superior de San Diego.

Los fondos para este programa se proporcionan a través de la Ley del Consejo Civil Sargento Shriver (Artículo del Código de Gobierno § 68650 et seq.).

SDSC ADM-304S (Rev. 1/21)

SHRIVER – CUSTODY YOU-MAY-BE-ELIGIBLE

FL-313-INFO Child Custody Information Sheet—Recommending Counseling

Parents who come to court about child custody and parenting time (visitation) face decisions about parenting plans for their children. This information sheet provides general information about child custody and parenting time matters, how to get help resolving a custody dispute or making a parenting plan, where to find an attorney, and where to find other resources.

What is a parenting plan?

A parenting plan describes how the parents will divide their responsibilities for taking care of their child.

The plan may include a general or specific schedule of days, times, weekends, holidays, vacations, transportation, pick-up/drop-off, limits on travel, counseling, and treatment services, and other details.

What are legal and physical custody?

A parenting plan usually includes:

- ***Legal custody:*** how parents make major decisions about the child's health, education, and welfare;
- ***Physical custody:*** where the child lives; and
- ***Parenting time, time-share, or visitation:*** when the child spends time with each parent.

Legal custody and *physical custody* may each be specified as *joint* (both parents have certain responsibilities) or *sole* (one parent has the responsibility alone).

Can we make our own parenting plan?

Yes. You have a right to make a parenting plan agreement on your own. This agreement may be called a *stipulation, time-share plan,* or *parenting plan.*

If both parents can agree on a parenting plan, the judge will probably approve it. The agreement becomes a court order after it is signed by both parents and the judge, and filed with the court.

What if there is domestic violence or a protective order?

If there is domestic violence or a protective order, talk with an attorney, counselor, or child custody recommending counselor before making a parenting plan.

For domestic violence help, call the National Domestic Violence Hotline at 1-800-799-7233 (TDD:1-800-787-3224) or call 211 if available in your area.

What if we don't have a parenting plan?

If you can't reach an agreement, the court will refer you to family court services (FCS) for child custody mediation also called "child custody recommending counseling." At the appointment, you will meet with an FCS professional also called a "child custody recommending counselor." He or she will help you and the other parent reach an agreement about a parenting plan.

What is child custody recommending counseling with family court services?

Family court services (FCS) provides child custody recommending counseling (sometimes referred to as child custody mediation) to help parents resolve disagreements about the care of their child. The child custody recommending counselor will meet with you and the other parent to try to help you both make a parenting plan. There may be an orientation provided that offers additional information about the process.

If you are unable to reach an agreement after meeting with family court services, the child custody recommending counselor will make a written recommendation to the court about a parenting plan. You and the other parent and the attorneys (if any) will get a copy of the recommendation before the court hearing.

If you are concerned about meeting with the other parent, or there is a domestic violence issue or a protective order involving the other parent, you may

ask to meet alone with the child custody recommending counselor without the other parent. You may also request to have a support person with you. The support person may not speak for you.

Do we have to agree to a parenting plan when we meet?

No. You do not have to come to an agreement. When the parents can't agree, the judge will decide. For legal advice, contact an attorney. For other information, ask the self-help center or family court services about how the process works in your court.

Are there other ways to resolve our dispute?

Yes. You may try other alternative dispute resolution (ADR) options, including:

1. Meet and Confer: Parents and their attorneys (if any) may meet at any time and as often as necessary to work out a parenting plan without a court hearing. If there is a protective order limiting the contact between the parents, then the "meet and confer" can be through attorneys or a mediator in separate sessions.

2. Settlement Conference: In some courts, parents may meet with a judge, neutral evaluators, or family law attorneys not involved in the case to discuss settlement. Check with the local court to find out if this is an option. If there is a protective order, the settlement discussion can be through attorneys or a mediator in separate sessions.

3. Private Mediation: Parents may hire a private mediator to help them resolve their dispute.

4. Collaborative Law Process: Each parent hires a lawyer and agrees to resolve the dispute without going to court. The parents may also hire other experts.

Court Hearing

When the parents cannot agree to a parenting plan on their own, in child custody recommending counseling, or in any other ADR process, the judge will decide.

If there is domestic violence or a protective order, a parent may be able to bring a support person with him or her to the court hearing, but the support person may not speak for that person.

Where can I get help?

This information sheet gives only basic information on the child custody process and is not legal advice. If you want legal advice, ask an attorney for assistance. For other information, you may want to:

1. Contact family court services.

2. Contact the family law facilitator or self-help center for information, local rules and court forms, and referrals to local legal services providers.

3. Find an attorney through your local bar association, the State Bar of California at *http://calbar.ca.gov*, or the Lawyer Referral Service at 1-866-442-2529.

4. Hire a private mediator for help with your parenting agreement. A mediator may be an attorney or counselor. Contact your local bar association, court ADR program, or family court services for a referral to local resources.

5. Find information on the Online Self-Help Center website at *www.courts.ca.gov/selfhelp*.

6. For free and low-cost legal help (if you qualify), go to *www.lawhelpcalifornia.org*.

7. Find information at your local law library or ask at your public library.

8. Ask for a court hearing and let the judge decide what is best for your child.

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

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. 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 Detained Parents

1. Child support. Under current California law, child support ordered or changed after December 31, 2020, 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.

2. Exceptions. Child support does not automatically stop if the parent who has to pay

- is confined for
  - domestic violence against the other parent or child, or
  - failing to pay a child support order; or
- has money available to pay child support.

3. Timing. Child support will automatically restart at the old amount 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. Past confinement. If your child support order was entered or modified between October 8, 2015, and December 31, 2019, and you were confined against your will for more than 90 days in a row during the same time frame, you may also qualify for relief. See item 5 for how to obtain more information.

5. More info. For more information about child support and incarcerated parents, see Family Code section 4007.5 or talk to the family law facilitator or self-help center in your county.

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: *https://selfhelp.courts.ca.gov/child-support*.

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 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 or self-help center in your county.

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 serve the other parent copies of your filed court forms at least **16 court days** before the hearing. Add **5 calendar days** if you serve by mail within California (see Code of Civil Procedure section 1005 for other situations).
- **Court days** are weekdays when the court is open for business (Monday through Friday except court holidays). **Calendar days** include all days of the month, including weekends and holidays. To find court holidays, go to *www.courts.ca.gov/holidays.htm*.

The server must also serve blank copies both of these forms:

- 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* (form FL-330 or form FL-335) 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 Attachment*

Need help?
Contact the family law facilitator or self-help center in your county, or call your county's bar association and ask for an experienced family lawyer.

FL-300-INFO Information Sheet for Request for Order

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

- To schedule a court hearing and ask the court to make new orders or to change orders in your case. The request can be about child custody, visitation (parenting time), child support, spousal or partner support, property, finances, attorney's fees and costs, or other matters.
- To change or end the domestic violence restraining orders granted by the court in *Restraining Order After Hearing* (form DV-130). See *How Do I Ask to Change or End a Domestic Violence Restraining Order* (form DV-400-INFO) for more information.

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

- Before you have filed a Petition to start your case (form FL-300 may be filed with the Petition).
- If you and the other party have an agreement. For information about how to write up your agreement, get it approved by the court, and filed in your case, see http://www.courts.ca.gov/selfhelp-agreeFL, talk to an attorney, or get help at your court's Self-Help Center or Family Law Facilitator's Office.
- When specific Judicial Council forms must be used to ask the court for orders. For example, to ask:
  –For a domestic violence restraining order, use forms DV-100, DV-109, and DV-110.
  –For an order for contempt, use form FL-410.
  –To cancel a child support order, use form FL-360 or form FL-640.
  –To cancel a voluntary declaration of parentage or paternity, use form FL-280.

3 Forms checklist

a. Form FL-300, *Request for Order,* is the basic form you need to file with the court. Depending on your request, you may need these additional forms:

b. To request child custody or visitation (parenting time) orders, you may need to complete some of these forms:
- ☐ FL-105, *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act*
- ☐ FL-311, *Child Custody and Visitation (Parenting Time) Application Attachment*
- ☐ FL-312, *Request for Child Abduction Prevention Orders*
- ☐ FL-341(C), *Children's Holiday Schedule Attachment*
- ☐ FL-341(D), *Additional Provisions—Physical Custody Attachment*
- ☐ FL-341(E), *Joint Legal Custody Attachment*

c. If you want child support, you need:
- ☐ A current FL-150, *Income and Expense Declaration*. You may use form FL-155, *Financial Statement (Simplified)* instead of form FL-150 if you meet the requirements listed on page 2 of form FL-155.

d. If you want spousal or partner support or orders about your finances, you need:
- ☐ A current FL-150, *Income and Expense Declaration*
- ☐ FL-157, *Spousal or Partner Support Declaration Attachment* (if the request is to change a support judgment)

e. If you want attorney's fees and costs, you need:
- ☐ A current FL-150, *Income and Expense Declaration*
- ☐ FL-319, *Request for Attorney's Fees and Costs Attachment* (or provide the information in a declaration)
- ☐ FL-158, *Supporting Declaration for Attorney's Fees and Costs Attachment* (or provide the information in a declaration)

f. To request temporary emergency (ex parte) orders, you need:
- ☐ FL-305, *Temporary Emergency Orders* to serve as the proposed temporary emergency orders.
- ☐ Your declaration describing how and when you gave notice about the request for temporary emergency orders. You may use form FL-303, *Declaration Regarding Notice and Service of Request for Temporary Emergency (Ex Parte) Orders*.
- ☐ Other forms required by local courts. See item 9 on page 3 of this form for more information.

g. If you plan to have witnesses testify at the hearing, you need:
- ☐ FL-321, *Witness List*

h. If you want to request a separate trial (bifurcation) on an issue, you need:
- ☐ FL-315, *Request or Response to Request for Separate Trial*

4 Complete form FL-300 (Page 1)

Caption: In the top box, print or type your name, address, telephone number, and email address if you have one. In the second box, put the court address. In the third box, write the name of the Petitioner, Respondent, and Other Parent/Party (if there is one). (You must use the party names as they appear in the petition that was originally filed with the court).

In the fourth box, check "CHANGE" if you want to change an existing order. Check "TEMPORARY EMERGENCY ORDERS" if you are asking the court to make emergency orders that will be effective until the hearing date. Then, check all the boxes that apply to the orders you are requesting. In the box on the right, write the case number.

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

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

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

Items 4–5: Leave these blank. The court will complete them if it orders a hearing.

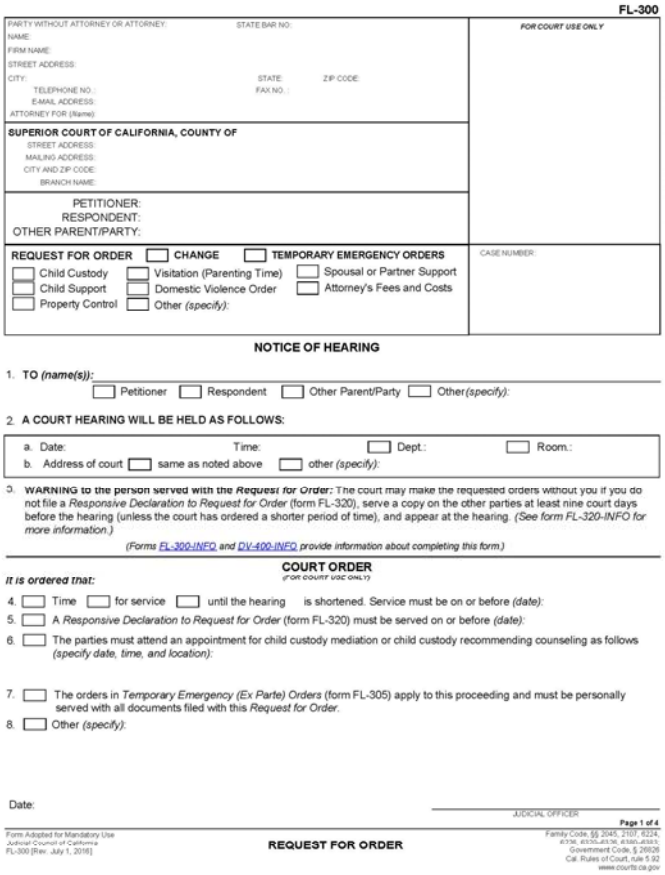
Item 6: In some counties, the court clerk will check item 6 and provide the details for your required child custody mediation or recommending counseling appointment. Other courts require the party or the party's lawyer to make the appointment and then complete item 6 before filing form FL-300.
Ask your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

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

5 Complete form FL-300 (pages 2–4)

6 Complete additional forms and make copies

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



FL-300

PARTY WITHOUT ATTORNEY OR ATTORNEY: STATE BAR NO.:
NAME:
FIRM NAME:
STREET ADDRESS:
CITY: STATE: ZIP CODE:
TELEPHONE NO.: FAX NO.:
E-MAIL ADDRESS:
ATTORNEY FOR (Name):

FOR COURT USE ONLY

SUPERIOR COURT OF CALIFORNIA, COUNTY OF
STREET ADDRESS:
MAILING ADDRESS:
CITY AND ZIP CODE:
BRANCH NAME:

PETITIONER:
RESPONDENT:
OTHER PARENT/PARTY:

REQUEST FOR ORDER ☐ CHANGE ☐ TEMPORARY EMERGENCY ORDERS
☐ Child Custody ☐ Visitation (Parenting Time) ☐ Spousal or Partner Support
☐ Child Support ☐ Domestic Violence Order ☐ Attorney's Fees and Costs
☐ Property Control ☐ Other (specify):

CASE NUMBER:

NOTICE OF HEARING

1. TO (name(s)): ☐ Petitioner ☐ Respondent ☐ Other Parent/Party ☐ Other (specify):
2. A COURT HEARING WILL BE HELD AS FOLLOWS:
a. Date: Time: ☐ Dept.: ☐ Room.:
b. Address of court ☐ same as noted above ☐ other (specify):
3. WARNING to the person served with the *Request for Order*: The court may make the requested orders without you if you do not file a *Responsive Declaration to Request for Order* (form FL-320), serve a copy on the other parties at least nine court days before the hearing (unless the court has ordered a shorter period of time), and appear at the hearing. *(See form FL-320-INFO for more information.)*

(Forms FL-300-INFO and DV-400-INFO provide information about completing this form.)

COURT ORDER (FOR COURT USE ONLY)

It is ordered that:

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

Date:

JUDICIAL OFFICER

Page 1 of 4

Form Adopted for Mandatory Use Judicial Council of California FL-300 [Rev. July 1, 2018]

REQUEST FOR ORDER

Family Code, §§ 2045, 2107, 6224, 6226, 6320-6326, 6380-6383; Government Code, § 26826 Cal. Rules of Court, rule 5.92 www.courts.ca.gov

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

7 File your documents

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

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

8 Pay filing fees

A fee is due at the time of filing.

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

9 Temporary Emergency (Ex Parte) Orders

(not domestic violence restraining orders)

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

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

To request these orders:

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

10 General information about "service"

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

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

11 Serve the Request for Order and blank forms

The other party must be "served" with a:

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

12 Who can be a "server"

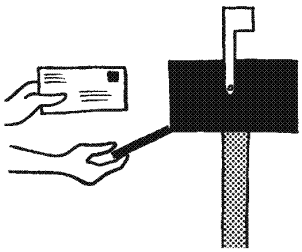
You cannot serve the papers. Have someone else (who is at least 18 years old) do it. The "server" can be a friend, a relative who is not involved in your case, a sheriff, or a professional process server.

13 "Personal Service"

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

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

14 "Service by mail"



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

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

Important! If you have questions about personal service or service by mail, talk to a lawyer or check with your court's Family Law Facilitator or Self-Help Center at ***http://www.courts.ca.gov/selfhelp-courtresources.htm***.

15 When to use personal service or service by mail

Personal Service

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

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

- ☑ Ordered personal service;
- ☑ Granted temporary emergency orders;
- ☑ Does not yet have the power to make orders that apply to the other party because he or she has either NOT previously:
  - Been served with a *Summons* and *Petition;**

    OR
  - Appeared in the case by filing a:
    a. *Response* to a *Petition*;
    b. *Appearance, Stipulations, and Waivers;*
    c. Written notice of appearance;
    d. Request to strike all or part of the *Petition;* or
    e. Request to transfer the case.

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

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

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

Service by Mail

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

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

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

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

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

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

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

16 Get ready for your hearing

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

17 After the hearing, the order made on form FL-340, *Findings and Order After Hearing*, must be filed and served.

18 Do you have questions or need help?

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

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO. *(Optional)*: EMAIL ADDRESS: ATTORNEY FOR *(Name)*:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO ☐ CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101 ☐ EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020 ☐ NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081 ☐ SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910	
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	
REQUEST FOR ORDER ☐ **CHANGE** ☐ **TEMPORARY EMERGENCY ORDERS** ☐ Child Custody ☐ Visitation (Parenting Time) ☐ Spousal or Partner Support ☐ Child Support ☐ Domestic Violence Order ☐ Attorney's Fees and Costs ☐ Property Control ☐ Other *(specify)*:	CASE NUMBER:

NOTICE OF HEARING

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

2. **A COURT HEARING WILL BE HELD AS FOLLOWS:**

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

3. **WARNING to the person served with the *Request for Order:*** The court may make the requested orders without you if you do not file a *Responsive Declaration to Request for Order* (form FL-320), serve a copy on the other parties at least nine court days before the hearing (unless the court has ordered a shorter period of time), and appear at the hearing. *(See form FL-320-INFO for more information.)*

(Forms FL-300-INFO and DV-400-INFO provide information about completing this form.)

COURT ORDER
(FOR COURT USE ONLY)

It is ordered that:

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

Date:

_____
JUDICIAL OFFICER

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

REQUEST FOR ORDER

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

1. ☐ RESTRAINING ORDER INFORMATION
One or more domestic violence restraining/protective orders are now in effect between *(specify):*
☐ Petitioner ☐ Respondent ☐ Other Parent/Party *(Attach a copy of the orders if you have one.)*
The orders are from the following court or courts *(specify county and state):*
a. ☐ Criminal: County/state *(specify):* Case No. *(if known)*:
b. ☐ Family: County/state *(specify):* Case No. *(if known)*:
c. ☐ Juvenile: County/state *(specify):* Case No. *(if known)*:
d. ☐ Other: County/state *(specify):* Case No. *(if known)*:

2. ☐ CHILD CUSTODY
☐ VISITATION (PARENTING TIME)
☐ I request temporary emergency orders
a. I request that the court make orders about the following children *(specify):*

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

☐ Attachment 2a.

b. ☐ The orders I request for ☐ child custody ☐ visitation (parenting time) are:
(1) ☐ Specified in the attached forms:
☐ Form FL-305 ☐ Form FL-311 ☐ Form FL-312 ☐ Form FL-341(C)
☐ Form FL-341(D) ☐ Form FL-341(E) ☐ Other *(specify):*
(2) ☐ As follows *(specify):*
☐ Attachment 2b.

c. The orders that I request are in the best interest of the children because *(specify):*
☐ Attachment 2c.

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

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

3. ☐ CHILD SUPPORT
(Note: An earnings assignment may be issued. See *Income Withholding for Support* (form FL-195))

a. I request that the court order child support as follows:

Child's name and age	☐ I request support for each child based on the child support guideline.	Monthly amount ($) requested (if not by guideline)

☐ Attachment 3a.

b. ☐ I want to change a current court order for child support filed on *(date):*
The court ordered child support as follows *(specify):*

c. I have completed and filed with this *Request for Order* a current *Income and Expense Declaration* (form FL-150) or I filed a current *Financial Statement (Simplified)* (form FL-155) because I meet the requirements to file form FL-155.

d. The court should make or change the support orders because *(specify)*: ☐ Attachment 3d.

4. ☐ SPOUSAL OR DOMESTIC PARTNER SUPPORT
(Note: An *Earnings Assignment Order For Spousal or Partner Support* (form FL-435) may be issued.)

a. ☐ Amount requested *(monthly):* $

b. ☐ I want the court to ☐ change ☐ end the current support order filed on *(date):*
The court ordered $ per month for support.

c. ☐ This request is to modify (change) spousal or partner support after entry of a judgment.
I have completed and attached *Spousal or Partner Support Declaration Attachment* (form FL-157) or a declaration that addresses the same factors covered in form FL-157.

d. I have completed and filed a current *Income and Expense Declaration* (form FL-150) in support of my request.

e. The court should should make, change, or end the support orders because *(specify):* ☐ Attachment 4e.

5. ☐ PROPERTY CONTROL ☐ I request temporary emergency orders

a. The ☐ petitioner ☐ respondent ☐ other parent/party be given exclusive temporary use, possession, and control of the following property that we ☐ own or are buying ☐ lease or rent *(specify):*

b. The ☐ petitioner ☐ respondent ☐ other parent/party be ordered to make the following payments on debts and liens coming due while the order is in effect:

Pay to: _____ For: _____ Amount: $ _____ Due date: _____
Pay to: _____ For: _____ Amount: $ _____ Due date: _____
Pay to: _____ For: _____ Amount: $ _____ Due date: _____
Pay to: _____ For: _____ Amount: $ _____ Due date: _____

c. ☐ This is a change from the current order for property control filed on *(date):*

d. Specify in Attachment 5d the reasons why the court should make or change the property control orders.

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

6. ☐ ATTORNEY'S FEES AND COSTS
I request attorney's fees and costs, which total *(specify amount):* $. I filed the following to support my request:
   a. A current *Income and Expense Declaration* (form FL-150).
   b. A *Request for Attorney's Fees and Costs Attachment* (form FL-319) or a declaration that addresses the factors covered in that form.
   c. A *Supporting Declaration for Attorney's Fees and Costs Attachment* (form FL-158) or a declaration that addresses the factors covered in that form.

7. ☐ DOMESTIC VIOLENCE ORDER

- Do not use this form to ask for domestic violence restraining orders! Read form DV-505-INFO, *How Do I Ask for a Temporary Restraining Order,* for forms and information you need to ask for domestic violence restraining orders.
- Read form DV-400-INFO, *How to Change or End a Domestic Violence Restraining Order* for more information.

   a. The *Restraining Order After Hearing* (form DV-130) was filed on *(date):*
   b. I request that the court ☐ change ☐ end the personal conduct, stay-away, move-out orders, or other protective orders made in *Restraining Order After Hearing* (form DV-130). (*If you want to change the orders, complete 7c.)*
   c. ☐ I request that the court make the following changes to the restraining orders *(specify):* ☐ Attachment 7c.
   d. I want the court to change or end the orders because (*specify)*: ☐ Attachment 7d.

8. ☐ OTHER ORDERS REQUESTED *(specify):* ☐ Attachment 8.

9. ☐ TIME FOR SERVICE / TIME UNTIL HEARING I urgently need:
   a. ☐ To serve the *Request for Order* no less than (*number):* court days before the hearing.
   b. ☐ The hearing date and service of the the *Request for Order* to be sooner.
   c. I need the order because *(specify):* ☐ Attachment 9c.

10. ☐ FACTS TO SUPPORT the orders I request are listed below. The facts that I write in support and attach to this request cannot be longer than 10 pages, unless the court gives me permission. ☐ Attachment 10.

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

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF APPLICANT)

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

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO.: EMAIL ADDRESS: ATTORNEY FOR *(Name)*:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO ☐ CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101 ☐ EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020 ☐ NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081 ☐ SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910	
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	
DECLARATION REGARDING NOTICE AND SERVICE OF REQUEST FOR TEMPORARY EMERGENCY (EX PARTE) ORDERS	CASE NUMBER:

NOTICE: Do not use this form to ask for domestic violence restraining orders. Before completing this form, read your court's local procedures for requesting temporary emergency orders and obtaining the information needed to complete item 2 of this form. Courts may grant temporary emergency orders with or without an emergency hearing. Find local rules at courts.ca.gov/3027.htm.

1. I am *(specify)* ☐ attorney for ☐ petitioner ☐ respondent ☐ other parent/party
   ☐ not a party in the case *(name and title/relationship to party):*
2. I ☐ did ☐ did not give notice *(select all that apply)*
   ☐ that there will be an emergency court hearing ☐ that papers will be submitted to the court on the request
   ☐ for temporary emergency (ex parte) orders
   ☐ to reschedule a hearing ☐ to reschedule a hearing involving temporary emergency (ex parte) orders
   on the date, time, and location indicated below:

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

3. **NOTICE** *(If you gave notice, complete item 3a. If you did not give notice, complete item 3b or 3c.)*
   a. ☐ I gave notice as described in items (1) through (5) below:
      (1) I gave notice to *(select all that apply)*
      ☐ petitioner. ☐ petitioner's attorney.
      ☐ respondent. ☐ respondent's attorney.
      ☐ other parent/party. ☐ other parent's/party's attorney.
      ☐ child's attorney. ☐ other *(specify):*
      (2) I gave notice on *(date):* at: ☐ a.m. ☐ p.m.
      ☐ personally at *(location):* , California.
      ☐ by telephone using telephone no.:
      ☐ by fax using fax no.:
      ☐ by voicemail using voicemail no.:
      ☐ by electronic means *(if permited)(specify electronic service address of person):*
      ☐ by overnight mail or other overnight carrier *(specify address of delivery):*

      (3) I gave notice *(select one)*
      ☐ by 10 a.m. the court day before this emergency hearing.
      ☐ after 10 a.m. the court day before this emergency hearing because of the following exceptional circumstances *(specify):*

Form Approved for Optional Use
Judicial Council of California
FL-303 [Rev. July 1, 2020]

Family Law, §§ 2045, 3062–3064, 4620, 7710
Cal. Rules of Court, rules 5.151–5.169
www.courts.ca.gov

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

(4) I notified the person in 3a(1) that the following temporary emergency orders are being requested *(specify):*

(5) The person in 3a(1) responded as follows: ☐ Attachment 3a(5)

(6) I ☐ do ☐ do not believe that the person in 3a(1) will oppose the request for temporary emergency orders.

b. ☐ **Request for waiver of notice.** Due to exceptional circumstances, I did not give notice about the request for temporary emergency orders. I ask that the court waive notice to the other party to help prevent *(specify)*

(1) ☐ immediate danger or irreparable harm to myself (or my client) or to the children in the case.
(2) ☐ an immediate risk that the children in the case will be removed from the state of California.
(3) ☐ immediate loss or damage to property subject to disposition in the case.
(4) ☐ other exceptional circumstances *(specify):*

Facts showing exceptional circumstances in support of the request to waive notice include *(specify):* ☐ Attachment 3b

c. ☐ **Unable to provide notice.** I did not give notice about the request for temporary emergency orders. I used my best efforts to tell the opposing party when and where this hearing would take place but was unable to do so. The efforts I made to inform the other person were *(specify below):* ☐ Attachment 3c

4. ☐ **SERVICE OF DOCUMENTS**

a. The following documents were served on

☐ petitioner ☐ petitioner's attorney ☐ other parent/party ☐ other parent's/party's attorney
☐ respondent ☐ respondent's attorney ☐ child's attorney ☐ other *(specify):*

before the request was filed with the court:

(1) ☐ A copy of *Request for Order* (form FL-300) for temporary emergency orders, and *Temporary Emergency (Ex Parte) Orders* (form FL-305).
(2) ☐ A copy of a request to reschedule hearing and *Order on Request to Reschedule Hearing* (form FL-309). Form FL-306 may be used for the request.
(3) ☐ A copy of a request to reschedule hearing involving temporary emergency (ex parte) orders and *Order on Request to Reschedule Hearing* (form FL-309). Form FL-307 may be used for the request.
(4) ☐ Other documents *(specify):*

b. **Documents were served on** *(date):* at: ☐ a.m. ☐ p.m.

☐ personally at *(location):* , California.
☐ by fax on using fax no.:
☐ by electronic means *(if permitted) (specify electronic service address of person served):*
☐ by overnight mail or other overnight carrier *(specify address of delivery):*

c. Documents were not served on the opposing party due to the exceptional circumstances specified in

☐ 3b, above. ☐ 3c, above. ☐ Attachment 4c.

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)

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO. *(Optional)*: EMAIL ADDRESS: ATTORNEY FOR *(Name)*:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO ☐ CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101 ☐ EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020 ☐ NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081 ☐ SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910	
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	
TEMPORARY EMERGENCY (EX PARTE) ORDERS ☐ Child Custody ☐ Visitation (Parenting Time) ☐ Property Control ☐ Other *(specify)*:	CASE NUMBER:

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

   A court hearing will be held on the *Request for Order* (form FL-300) served with this order, as follows:

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

2. **Findings:** Temporary emergency (ex parte) orders are needed to: (a) help prevent an immediate loss or irreparable harm to a party or to children in the case, (b) help prevent immediate loss or damage to property subject to disposition in the case, or (c) set or change procedures for a hearing or trial.

COURT ORDERS: The following temporary emergency orders expire on the date and time of the hearing scheduled in (1), unless extended by court order:

3. ☐ **CHILD CUSTODY**

a. Child's name	Date of Birth	Temporary physical custody, care, and control to: Petitioner	Respondent	Other Party/Parent
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐

   ☐ Continued on Attachment 3(a)

   b. ☐ **Visitation (Parenting Time)** The temporary orders for physical custody, care, and control of the minor children in (3) are subject to the other party's or parties' rights of visitation (parenting time) as follows *(specify)*:

☐ See Attachment 3(b)

THIS IS A COURT ORDER.

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

3. ☐ **CHILD CUSTODY (continued)**

c. **Travel restrictions**

(1) The party or parties with temporary physical custody, care, and control of minor children **must not remove the minor children from the state of California unless the court allows it after a noticed hearing.**

(2) ☐ Petitioner ☐ Respondent ☐ Other Parent/Party must not remove their minor children *(specify):*

(a) ☐ from the state of California.

(b) ☐ from the following counties *(specify):*

(c) ☐ other *(specify):*

d. ☐ **Child abduction prevention orders** are attached (see form FL-341(B)).

e. (1) **Jurisdiction:** This court has jurisdiction to make child custody orders in this case under the Uniform Child Custody Jurisdiction and Enforcement Act (part 3 of the California Family Code, commencing with section 3400).

(2) **Notice and opportunity to be heard:** The responding party was given notice and an opportunity to be heard as provided by the laws of the State of California.

(3) **Country of habitual residence:** The country of habitual residence of the child or children is *(specify):*

☐ The United States of America ☐ Other *(specify):*

(4) **If you violate this order, you may be subject to civil or criminal penalties, or both.**

4. ☐ **PROPERTY CONTROL**

a. ☐ Petitioner ☐ Respondent ☐ Other Parent/Party is given exclusive temporary use, possession, and control of the following property that the parties ☐ own or are buying ☐ lease or rent

b. ☐ Petitioner ☐ Respondent ☐ Other Parent/Party is ordered to make the following payments on the liens and encumbrances coming due while the order is in effect:

Pay to:	For:	Amount: $	Due date:
Pay to:	For:	Amount: $	Due date:
Pay to:	For:	Amount: $	Due date:
Pay to:	For:	Amount: $	Due date:

5. ☐ All other existing orders, not in conflict with these temporary emergency orders, remain in full force and effect.

6. ☐ **OTHER ORDERS** *(specify):* ☐ Additional orders are listed in Attachment 6.

Date:

JUDGE OF THE SUPERIOR COURT

THIS IS A COURT ORDER.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO. *(Optional)*: EMAIL ADDRESS: ATTORNEY FOR *(Name)*:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO ☐ CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101 ☐ EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020 ☐ NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081 ☐ SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910	
PETITIONER: RESPONDENT: OTHER PARTY/PARENT/CLAIMANT:	
INCOME AND EXPENSE DECLARATION	CASE NUMBER:

1. **Employment** *(Give information on your current job or, if you're unemployed, your most recent job.)*

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

a. Employer:
b. Employer's address:
c. Employer's phone number:
d. Occupation:
e. Date job started:
f. If unemployed, date job ended:
g. I work about hours per week.
h. I get paid $ gross (before taxes) ☐ per month ☐ per week ☐ per hour.

(If you have more than one job, attach an 8 1/2-by-11-inch sheet of paper and list the same information as above for your other jobs. Write "Question 1—Other Jobs" at the top.)

2. **Age and education**
   a. My age is *(specify):*
   b. I have completed high school or the equivalent: ☐ Yes ☐ No If no, highest grade completed *(specify):*
   c. Number of years of college completed *(specify):* ☐ Degree(s) obtained *(specify):*
   d. Number of years of graduate school completed *(specify):* ☐ Degree(s) obtained *(specify):*
   e. I have: ☐ professional/occupational license(s) *(specify):*
   ☐ vocational training *(specify):*

3. **Tax information**
   a. ☐ I last filed taxes for tax year *(specify year):*
   b. My tax filing status is ☐ single ☐ head of household ☐ married, filing separately
   ☐ married, filing jointly with *(specify name):*
   c. I file state tax returns in ☐ California ☐ other *(specify state):*
   d. I claim the following number of exemptions (including myself) on my taxes *(specify):*

4. **Other party's income.** I estimate the gross monthly income (before taxes) of the other party in this case at *(specify):* $
   This estimate is based on *(explain):*

(If you need more space to answer any questions on this form, attach an 8 1/2-by-11-inch sheet of paper and write the question number before your answer.) Number of pages attached: _____

I declare under penalty of perjury under the laws of the State of California that the information contained on all pages of this form and any attachments is true and correct.

Date:

_____ (TYPE OR PRINT NAME)

▶ _____ (SIGNATURE OF DECLARANT)

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

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

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

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

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

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

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

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

Number of years in this business *(specify):*

Name of business *(specify):*

Type of business *(specify):*

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

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

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

10. **Deductions**

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

11. **Assets**

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

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

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

12. **The following people live with me:**

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

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

a. Home:
(1) ☐ Rent or ☐ mortgage..... $ _____
If mortgage:
(a) average principal: $ _____
(b) average interest: $ _____
(2) Real property taxes..... $ _____
(3) Homeowner's or renter's insurance (if not included above)..... $ _____
(4) Maintenance and repair..... $ _____

b. Health-care costs not paid by insurance..... $ _____
c. Child care..... $ _____
d. Groceries and household supplies..... $ _____
e. Eating out..... $ _____
f. Utilities (gas, electric, water, trash)..... $ _____
g. Telephone, cell phone, and e-mail..... $ _____
h. Laundry and cleaning..... $ _____
i. Clothes..... $ _____
j. Education..... $ _____
k. Entertainment, gifts, and vacation..... $ _____
l. Auto expenses and transportation (insurance, gas, repairs, bus, etc.)..... $ _____
m. Insurance (life, accident, etc.; do not include auto, home, or health insurance)..... $ _____
n. Savings and investments..... $ _____
o. Charitable contributions..... $ _____
p. Monthly payments listed in item 14 *(itemize below in 14 and insert total here)*..... $ _____
q. Other *(specify):* $ _____
r. **TOTAL EXPENSES** (a–q) *(do not add in the amounts in a(1)(a) and (b))* $ _____
s. **Amount of expenses paid by others** $ _____

14. **Installment payments and debts not listed above**

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

15. **Attorney fees** *(This information is required if either party is requesting attorney fees):*
a. To date, I have paid my attorney this amount for fees and costs *(specify):* $
b. The source of this money was *(specify):*
c. I still owe the following fees and costs to my attorney *(specify total owed):* $
d. My attorney's hourly rate is *(specify):*

I confirm this fee arrangement.

Date:

_____ (TYPE OR PRINT NAME)

▶ _____ (SIGNATURE OF DECLARANT)

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

CHILD SUPPORT INFORMATION
(NOTE: Fill out this page only if your case involves child support.)

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

17. **Children's health-care expenses**
    a. ☐ I do ☐ I do not have health insurance available to me for the children through my job.
    b. Name of insurance company:
    c. Address of insurance company:

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

18. **Additional expense for the children in this case**

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

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

	Amount per month	For how many months?
a. Extraordinary health expenses not included in 18b.....	$ _____	_____
b. Major losses not covered by insurance *(examples: fire, theft, other insured loss)*.....	$ _____	_____
c. (1) Expenses for my minor children who are from other relationships and are living with me.....	$ _____	_____
(2) Names and ages of those children *(specify):*		
(3) Child support I receive for those children.....	$ _____	

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

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

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address):*	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO. *(Optional):* EMAIL ADDRESS: ATTORNEY FOR *(Name):*	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO ☐ CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101 ☐ CENTRAL DIVISION, SMALL CLAIMS, 330 W. BROADWAY, SAN DIEGO, CA 92101 ☐ CENTRAL DIVISION, CIVIL, 330 W. BROADWAY, ROOM 225, SAN DIEGO, CA 92101 ☐ EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020 ☐ NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081 ☐ SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	
DECLARATION	CASE NUMBER:

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)

☐ Attorney for ☐ Plaintiff ☐ Petitioner ☐ Defendant
☐ Respondent ☐ Other *(Specify):*

PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	CASE NUMBER:

DECLARATION

(This form must be attached to another form or court paper before it can be filed in court.)

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)

☐ Attorney for ☐ Plaintiff ☐ Petitioner ☐ Defendant
☐ Respondent ☐ Other *(Specify):*

CONFIDENTIAL

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): TELEPHONE NO.: FAX NO. (Optional): EMAIL ADDRESS: ATTORNEY FOR (Name):	*FOR COURT USE ONLY*
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO ☐ CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101 ☐ EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA, 92020 ☐ NORTH COUNTY DIVISION, 325 S. MELROSE DR., SUITE 340, VISTA, CA, 92081 ☐ SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910	
PETITIONER(S)	
RESPONDENT(S)	
FAMILY COURT SERVICES SCREENING FORM (CONFIDENTIAL)	CASE NUMBER

FATHER

Name: _____

Address: _____

Daytime Telephone Number (8:00 a.m. to 5:00 p.m.): _____

Attorney: _____ Telephone Number: _____

MOTHER

Name: _____

Address: _____

Daytime Telephone Number (8:00 a.m. to 5:00 p.m.): _____

Attorney: _____ Telephone Number: _____

NOTE: THIS SCREENING FORM IS FOR FAMILY COURT SERVICES (FCS) USE ONLY. THIS INFORMATION WILL BE KEPT CONFIDENTIAL.

CHILDREN MAY NOT ACCOMPANY PARTIES TO THE FAMILY COURT SERVICES APPOINTMENT UNLESS ORDERED BY THE COURT OR SPECIFICALLY REQUESTED BY A FAMILY COURT SERVICES COUNSELOR.

FAILURE TO APPEAR OR FAILURE TO CANCEL THE FAMILY COURT SERVICES APPOINTMENT AT LEAST 24 HOURS PRIOR TO THE APPOINTMENT TIME MAY RESULT IN SANCTIONS IMPOSED BY THE COURT OF UP TO $1500 TO ONE OR BOTH PARTIES PURSUANT TO CODE CIV. PROC. § 177.5 AND SAN DIEGO SUPERIOR COURT LOCAL RULES.

	YES	NO
1. Do you or the other party allege domestic violence?	☐	☐
2. Is there a domestic violence restraining order?	☐	☐
3. Do you or the other party require a Spanish-speaking counselor?	☐	☐
4 Do you or the other party live outside of the County of San Diego and need a telephone FCS session?	☐	☐
5. Is a third party requesting custody or visitation?	☐	☐

☐ Grandparent Joinder

☐ Other: _____

Name and relationship to child(ren)

Date: _____ _____

Signature of Filing Party/Attorney

INFORMATION SHEET FOR PROOF OF PERSONAL SERVICE

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

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

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

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

Complete the top section of the proof of service forms as follows:
First box, left side: In this box print the name, address, and phone number of the person for whom you are serving the documents.
Second box, left side: Print the name of the county in which the legal action is filed and the court's address in this box. Use the same address for the court that is on the documents you are serving.
Third box, left side: Print the names of the petitioner/plaintiff, respondent/defendant, and other parent in this box. Use the same names listed on the documents you are serving.
First box, top of form, right side: Leave this box blank for the court's use.
Second box, right side: Print the case number in this box. This number is also stated on the documents you are serving.
Third box, right side: Print the hearing date, time, and department. Use the same information that is on the documents you are serving.

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

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

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

ATTORNEY OR PARTY WITHOUT ATTORNEY OR GOVERNMENTAL AGENCY (under Family Code, §§ 17400,17406) *(Name, State Bar number, and address):*	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO.: EMAIL ADDRESS: ATTORNEY FOR *(Name):*	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO ☐ CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101 ☐ EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020 ☐ NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081 ☐ SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/PARTY:	CASE NUMBER: *(If applicable, provide):* HEARING DATE: HEARING TIME: DEPT.:
PROOF OF PERSONAL SERVICE	

1. I am at least 18 years old, not a party to this action, and not a protected person listed in any of the orders.
2. Person served *(name):*
3. I served copies of the following documents *(specify):*

4. By personally delivering copies to the person served, as follows:
   a. Date:
   b. Time:
   c. Address:

5. I am
   a. ☐ not a registered California process server.
   b. ☐ a registered California process server.
   c. ☐ an employee or independent contractor of a registered California process server.
   d. ☐ exempt from registration under Business & Profession Code section 22350(b).
   e. ☐ a California sheriff or marshal.
6. My name, address, and telephone number, and, if applicable, county of registration and number *(specify):*

7. ☐ I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
8. ☐ I am a California sheriff or marshal and I certify that the foregoing is true and correct.

Date:

(TYPE OR PRINT NAME OF PERSON WHO SERVED THE PAPERS)

(SIGNATURE OF PERSON WHO SERVED THE PAPERS)

INFORMATION SHEET FOR PROOF OF SERVICE BY MAIL

Use these instructions to complete the *Proof of Service by Mail* (form FL-335).

A person at least 18 years of age or older must serve the documents. There are two ways to serve documents: (1) personal delivery and (2) by mail. See the *Proof of Personal Service* (form FL-330) if the documents are being personally served. The person who serves the documents must complete a proof of service form for the documents being served. **You cannot serve documents if you are a party to the action.**

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

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

Complete the top section of the proof of service forms as follows:
First box, left side: In this box print the name, address, and phone number of the person for whom you are serving the documents.
Second box, left side: Print the name of the county in which the legal action is filed and the court's address in this box. Use the same address for the court that is on the documents you are serving.
Third box, left side: Print the names of the petitioner/plaintiff, respondent/defendant, and other parent in this box. Use the same names listed on the documents you are serving.
First box, top of form, right side: Leave this box blank for the court's use.
Second box, right side: Print the case number in this box. This number is also stated on the documents you are serving.
Third box, right side: Print the hearing date, time, and department. Use the same information that is on the documents you are serving.

You cannot serve a temporary restraining order by mail. You must serve those documents by personal service.

1. You are stating that you are at least 18 years old and that you are not a party to this action. You are also stating that you either live in or are employed in the county where the mailing took place.
2. Print your home or business address.
3. List the name of each document that you mailed (the exact names are listed on the bottoms of the forms).
   a. Check this box if you put the documents in the regular U.S. mail.
   b. Check this box if you put the documents in the mail at your place of employment.
4. a. Print the name you put on the envelope containing the documents.
   b. Print the address you put on the envelope containing the documents.
   c. Print the date that you put the envelope containing the documents in the mail.
   d. Print the city and state you were in when you mailed the envelope containing the documents.
5. Check this box if you are serving an address verification form (required for service by mail of a postjudgment request to change a child custody, visitation, or child support order).
6. You are stating under penalty of perjury that the information you have provided is true and correct.

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

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

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address):*	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO. *(Optional):* EMAIL ADDRESS *:* ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO ☐ CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101 ☐ EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020 ☐ NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081 ☐ SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/PARTY:	CASE NUMBER: *(If applicable, provide):* HEARING DATE: HEARING TIME: DEPT.:
PROOF OF SERVICE BY MAIL	

NOTICE: To serve temporary restraining orders you must use personal service (see form FL-330).

1. I am at least 18 years of age, not a party to this action, and I am a resident of or employed in the county where the mailing took place.

2. My residence or business address is:

3. I served a copy of the following documents *(specify):*

   by enclosing them in an envelope AND
   a. ☐ **depositing** the sealed envelope with the United States Postal Service with the postage fully prepaid.
   b. ☐ **placing** the envelope for collection and mailing on the date and at the place shown in item 4 following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service in a sealed envelope with postage fully prepaid.

4. The envelope was addressed and mailed as follows:
   a. Name of person served:
   b. Address:

   c. Date mailed:
   d. Place of mailing *(city and state):*

5. ☐ I served a request to modify a child custody, visitation, or child support judgment or permanent order which included an address verification declaration. *(Declaration Regarding Address Verification—Postjudgment Request to Modify a Child Custody, Visitation, or Child Support Order* (form FL-334) may be used for this purpose.)

6. 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)

Form Approved for Optional Use
Judicial Council of California
FL-335 [Rev. January 1, 2012]

Code of Civil Procedure, §§ 1013, 1013a
www.courts.ca.gov

CONFIDENTIAL

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO

FAMILY COURT SERVICES (FCS) DATA SHEET (CONFIDENTIAL)

Case Name _____

Case No. _____

FCS Date _____

Next Court Date _____

COMPLETE ALL THREE PAGES

Have you previously been to Family Court Services? ☐ Yes ☐ No

IF YOU ARE BEING PROTECTED BY A RESTRAINING ORDER OR IF YOU ALLEGE DOMESTIC VIOLENCE, YOU MAY BE SEEN SEPARATELY. Are you requesting a separate session? ☐ Yes ☐ No
If you want to be seen separately, advise the Family Court Services Clerk when you check in.
SUPPORT PERSON: If you are being protected by a restraining order, a support person may accompany you during your FCS session. The support person must first sign a Family Court Services Domestic Violence Support Person Agreement (SDSC Form #FCS-038). Advise the Family Court Services Clerk of your support person when you check in.

Are you requesting that your address and telephone number remain confidential? ☐ Yes ☐ No

CHECK ONE ☐ Father ☐ Mother ☐ Grandparent ☐ Other (specify relationship): _____

FULL LEGAL NAME _____ AKA OR MAIDEN NAME _____

ADDRESS _____
Number and Street Apt. # City State Zip Code

HOME TEL. NO. _____ WORK TEL. NO. _____

EMAIL ADDRESS TO RECEIVE CONFIDENTIAL FCS REPORT:

_____ WORK SCHEDULE _____

BIRTH DATE ____/____/____ PLACE OF BIRTH _____

LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER XXX – XX – ___ ___ ___ ___

DRIVER LICENSE NUMBER _____ STATE _____ CURRENTLY VALID ☐ Yes ☐ No

ATTORNEY _____ TEL. NO. _____

ADDRESS _____
Number and Street Apt. # City State Zip Code

CHILD(REN)'S ATTORNEY (if any) _____ TEL. NO. _____

ADDRESS _____
Number and Street Apt. # City State Zip Code

PARENTS

Date of Marriage _____ or Date Began Living Together _____

Date of Separation _____ If dissolution filed, when? _____

NAME OF MINOR CHILD(REN)

	First	Middle	Last	Date of Birth	Place of Birth	Parent with whom residing
1.						
2.						
3.						
4.						

CONFIDENTIAL

CASE NAME	CASE NUMBER

MEDICAL AND DENTAL INFORMATION

Child(ren)'s Doctor's Name _____ Tel. No. _____

ADDRESS _____
Number and Street Apt. # City State Zip Code

List medical/dental information to be discussed at FCS _____

_____

EDUCATION

	Child	Name of School	Teacher/Counselor	Grade
1.				
2.				
3.				
4.				

COUNSELING

Is ☐ Child(ren) ☐ Father ☐ Mother in Counseling? ☐ Yes ☐ No

Counselor for _____

Counselor's Name _____

Address _____

Tel. No. _____

When did counseling begin? _____

Counselor for _____

Counselor's Name _____

Address _____

Tel. No. _____

When did counseling begin? _____

CHILD(REN)'S ACTIVITIES AND OTHER SPECIAL NEEDS

(e.g. special classes, team activities, and transportation to and from these activities) _____

_____

1. Are there allegations of verbal intimidation or threats? ☐ Yes ☐ No
2. Has there been physical violence between the parents? ☐ Yes ☐ No
   If yes, how long ago? ☐ 0 – 6 mos. ☐ 6 mos. – 1 yr. ☐ 1 yr. or more
3. Has law enforcement been involved? ☐ Yes ☐ No Provide details: _____

   _____
4. Have there been allegations of verbal intimidation/threats, physical violence, and/or restraining orders between yourself and ☐ your parent ☐ current spouse or cohabitant ☐ party in dating or engagement relationship ☐ other?

   ☐ Yes ☐ No If yes, check all boxes that apply. Provide details: _____

   _____
5. Have there been allegations of abuse against your child(ren) or child(ren) for whom you have provided care?

   ☐ Yes ☐ No If yes, when: _____

   Who made the allegations? _____ Who was the alleged abuser? _____

   Has Child Welfare Services (CWS) been involved? ☐ Yes ☐ No

   CWS worker's name and telephone number _____

CASE NAME	CASE NUMBER

FAMILY COURT SERVICES (FCS) DATA SHEET
Complete the following questions.

1. Which parent filed the current court action? _____
2. What is the action regarding? _____

   _____
3. Is there a court order regarding custody and visitation now? ☐ Yes ☐ No

   a. If yes, briefly summarize: _____

   _____

   _____

   _____

   b. When was it issued? _____
4. If there is no court order or a different schedule is being practiced, summarize your current parenting schedule: _____

   _____

   _____

   _____
5. What parenting schedule would you like to have? _____

   _____

   _____

   _____

   _____

   _____

   _____

Date: _____

_____
Signature of Party Filling Out This Form

NO ATTACHMENTS

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO

☐ CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101, (619) 844-2888
☐ EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020, (619) 456-4181
☐ NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081, (760) 201-8300
☐ SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910, (619) 746-6097

FAMILY COURT SERVICES
CHILD CUSTODY RECOMMENDING COUNSELING INFORMATION SHEET

IMPORTANT: This information sheet is not and should not be considered or construed as legal advice. Child custody recommending counselors do not give legal advice. If you need legal advice, you should consult an attorney.

What is Child Custody Recommending Counseling?

Child custody recommending counseling (formerly called "mediation") is a process in which parties are given the opportunity to work together, with the assistance of an experienced Family Court Services (FCS) counselor, towards a goal of reaching an agreement regarding a parenting plan for the child(ren). The child custody recommending counseling conference is an opportunity for parties to discuss custody and visitation and make their own decisions about what is in the best interest of the child(ren). The parenting plan that is developed details when children are to be with each party and specifies other parental responsibilities. Information shared by parties during the child custody recommending counseling session is not confidential to the court. The counselor will notify the court of areas of agreement. If no agreement is reached, the counselor will make a written recommendation to the court as to what is believed to be in the best interest of the child(ren). The recommendation will be provided to the parties prior to the court hearing. If you disagree with the counselor's recommendation, you or your attorney will have the opportunity during your court hearing to tell the judicial officer your position regarding a child sharing plan. Only a judicial officer can make a court order for child custody or visitation.

Telephone calls to a counselor after the FCS session will not be accepted unless the counselor has requested specific information. All information that you want the counselor to know should be discussed during the FCS session.

What will happen at your Family Court Services appointment?

You will view an orientation video before seeing a counselor. The video can also be viewed on the court's website at www.sdcourt.ca.gov. Under the Divisions heading, select Family, then select Custody and Visitation.

In advance of your appointment, complete and submit the Family Court Services Data Sheet (SDSC Form #FCS-002). The form is located on the court's website: www.sdcourt.ca.gov. Under the Divisions heading, select Family, select Custody and Visitation, then select Forms. Mail the completed form to the address on the top of this form where your FCS appointment is located **OR** email it to Family Court Services at the court division where your FCS appointment is located:

- Central Division: FCSCentral@sdcourt.ca.gov
- East County Division: FCSEast@sdcourt.ca.gov
- North County Division: FCSNorth@sdcourt.ca.gov
- South County Division: FCSSouth@sdcourt.ca.gov

This form must be submitted in advance for the counselor to review prior to conducting the session.

During the FCS session, you will be asked about your home, relationships, and other aspects of your life related to parenting. Your proposal for a child sharing schedule and any parenting concerns will also be discussed. The FCS conference will last 1½ to 2 hours.

Are the parties always seen together in the child custody recommending counseling session?

Parties are seen together unless there is a restraining order or allegations of domestic violence.

If you are being protected by a restraining order against the other party, or if you allege domestic violence has occurred, you may be interviewed separately from the other parent. Also, if a restraining order for your protection is in effect at the time of the appointment, you may have a support person with you during your FCS session. To arrange for either of these requests, please submit the appropriate forms as explained below prior to your appointment and advise the FCS clerk of these requests when you check in for your appointment.

If you do not have a restraining order against the other party, you may request a separate session by completing a Declaration Alleging Domestic Violence for Separate Family Court Services Session (SDSC Form #FCS-017) prior to your session. Mail or email the form with your Family Court Services Data Sheet (SDSC Form #FCS-002) as indicated above. The form is located on the court's website: www.sdcourt.ca.gov. Under the Divisions heading, select Family, select Custody and Visitation, then select Forms.

You may request the presence of a support person by completing the Family Court Services Domestic Violence Support Person Agreement (SDSC Form #FCS-038) prior to your session. Mail or email the form with your Family Court Services Data Sheet (SDSC Form #FCS-002). The form is located on the court's website: www.sdcourt.ca.gov. Under the Divisions heading, select Family, select Custody and Visitation, then select Forms.

Arrangements can also be made for a telephone conference for a party out of the county. Please call the FCS office where your session will take place to arrange for participation by telephone.

Should I bring the child(ren) to the Family Court Services appointment?

Do NOT bring the child(ren) with you for the FCS appointment unless ordered to do so by the court. If an interview with the child(ren) is needed, the FCS counselor will make arrangements for another time.

What are the limitations of child custody recommending counseling?

Child custody recommending counseling does NOT deal with issues related to money, child or spousal support, or property. Family Court Services cannot monitor or enforce court orders.

IMPORTANT

If you do not need the Family Court Services child custody recommending counseling session, you must cancel it at least one court day prior to the scheduled date, per San Diego Superior Court Local Rules, Division V, Chapter 11, Child and Custody Visitation. If you do not cancel the session and/or fail to appear for the session, you may be ordered by the court to pay a monetary sanction of up to $1,500 pursuant to Code Civ. Proc. § 177.5.

Additional information about child custody recommending counseling can be found at www.sdcourt.ca.gov and www.courts.ca.gov.

Domestic Violence and Child Custody

If there has been domestic violence (domestic abuse or partner abuse) in your family, a special law may apply to your case.

What is "domestic violence"?

It means to hit, kick, scare, throw things, pull hair, push, follow, harass, sexually assault, or threaten to do any of these things. It also includes other actions that make someone afraid of being hurt, isolated or unable to get to basic things, like food. Domestic violence can be spoken, written, or physical. For more information on what domestic violence is, read form DV-500-INFO, *Can a Domestic Violence Restraining Order Help Me?*

What is "child custody"?

There are two kinds:

- A person with **physical custody** lives with the child on a regular basis.
- A person with **legal custody** makes important decisions about the child's health care, education, and welfare.

When does domestic violence affect my case?

In the last 5 years, has a parent in this case:

1. Had a **conviction** in criminal court for domestic violence against one of the following people:

- The other parent in the custody case;
- Any of your children or your children's siblings;
- Their current spouse, or someone they are currently dating, engaged to, or living with; or
- Their parent (your child's grandparent)?

2. Had a **judge decide** that they committed domestic violence against any of the people listed above? (Example: a judge granted a restraining order against the parent after people testified and gave evidence.)

If you answered yes to 1 or 2, a special law applies to your case.

This special law is sometimes called "3044" (see page 2 for the entire law). If someone is not your child's parent and is asking the court for custody, this law applies to them, too. Even if "3044" does not apply to your case, you should give the judge any information about domestic violence or abuse that you think can help the judge decide who gets custody.

How "3044" affects your case

The judge can give custody to a person who has a domestic violence **conviction or decision** against them only if the judge believes that it is in the child's best interest to do so. The judge must look at 8 factors:

1. What is in the child's best interest?
2. Has the person committed any other domestic violence?
3. Has the person followed all the terms and conditions of any restraining order?
4. Has the person finished a 1 year batterer intervention program?
5. Has the person finished an alcohol or drug program, if ordered by the judge?
6. Has the person finished a parenting class, if ordered by the judge?
7. If on probation or parole, has the person followed all terms of probation or parole?
8. Does the person still have a firearm (gun) or ammunition, in violation of a restraining order?

The judge must go through this 8-factor test in every case that it applies to, even if a court professional or evaluator makes a recommendation in your case. To learn more about the custody process in family court, visit https://selfhelp.courts.ca.gov/what-to-know-about-child-custody-parenting-time.

JUDICIAL COUNCIL OF CALIFORNIA
OPERATIONS AND PROGRAMS DIVISION
CENTER FOR FAMILIES, CHILDREN & THE COURTS

Revised January 1, 2022

Family Code section 3044

(a) Upon a finding by the court that a party seeking custody of a child has perpetrated domestic violence within the previous five years against the other party seeking custody of the child, or against the child or the child's siblings, or against a person in subparagraph (A) of paragraph (2) of subdivision (a) of Section 3011 with whom the party has a relationship, there is a rebuttable presumption that an award of sole or joint physical or legal custody of a child to a person who has perpetrated domestic violence is detrimental to the best interest of the child, pursuant to Sections 3011 and 3020. This presumption may only be rebutted by a preponderance of the evidence.

(b) To overcome the presumption set forth in subdivision (a), the court shall find that paragraph (1) is satisfied and shall find that the factors in paragraph (2), on balance, support the legislative findings in Section 3020.
(1) The perpetrator of domestic violence has demonstrated that giving sole or joint physical or legal custody of a child to the perpetrator is in the best interest of the child pursuant to Sections 3011 and 3020. In determining the best interest of the child, the preference for frequent and continuing contact with both parents, as set forth in subdivision (b) of Section 3020, or with the noncustodial parent, as set forth in paragraph (1) of subdivision (a) of Section 3040, may not be used to rebut the presumption, in whole or in part.
(2) Additional factors:

(A) The perpetrator has successfully completed a batterer's treatment program that meets the criteria outlined in subdivision (c) of Section 1203.097 of the Penal Code.
(B) The perpetrator has successfully completed a program of alcohol or drug abuse counseling, if the court determines that counseling is appropriate.
(C) The perpetrator has successfully completed a parenting class, if the court determines the class to be appropriate.
(D) The perpetrator is on probation or parole, and has or has not complied with the terms and conditions of probation or parole.
(E) The perpetrator is restrained by a protective order or restraining order, and has or has not complied with its terms and conditions.
(F) The perpetrator of domestic violence has committed further acts of domestic violence.
(G) The court has determined, pursuant to Section 6322.5, that the perpetrator is a restrained person in possession or control of a firearm or ammunition in violation of Section 6389.

(c) For purposes of this section, a person has "perpetrated domestic violence" when the person is found by the court to have intentionally or recklessly caused or attempted to cause bodily injury, or sexual assault, or to have placed a person in reasonable apprehension of imminent serious bodily injury to that person or to another, or to have engaged in behavior involving, but not limited to, threatening, striking, harassing, destroying personal property, or disturbing the peace of another, for which a court may issue an ex parte order pursuant to Section 6320 to protect the other party seeking custody of the child or to protect the child and the child's siblings.

(d) (1) For purposes of this section, the requirement of a finding by the court shall be satisfied by, among other things, and not limited to, evidence that a party seeking custody has been convicted within the previous five years, after a trial or a plea of guilty or no contest, of a crime against the other party that comes within the definition of domestic violence contained in Section 6211 and of abuse contained in Section 6203, including, but not limited to, a crime described in subdivision (e) of Section 243 of, or Section 261, 273.5, 422, or 646.9 of, or former Section 262 of, the Penal Code.
(2) The requirement of a finding by the court shall also be satisfied if a court, whether that court hears or has heard the child custody proceedings or not, has made a finding pursuant to subdivision (a) based on conduct occurring within the previous five years.

(e) When a court makes a finding that a party has perpetrated domestic violence, the court may not base its findings solely on conclusions reached by a child custody evaluator or on the recommendation of the Family Court Services staff, but shall consider any relevant, admissible evidence submitted by the parties.

(f) (1) It is the intent of the Legislature that this subdivision be interpreted consistently with the decision in Jaime G. v. H.L. (2018) 25 Cal.App.5th 794, which requires that the court, in determining that the presumption in subdivision (a) has been overcome, make specific findings on each of the factors in subdivision (b).
(2) If the court determines that the presumption in subdivision (a) has been overcome, the court shall state its reasons in writing or on the record as to why paragraph (1) of subdivision (b) is satisfied and why the factors in paragraph (2) of subdivision (b), on balance, support the legislative findings in Section 3020.

(g) In an evidentiary hearing or trial in which custody orders are sought and where there has been an allegation of domestic violence, the court shall make a determination as to whether this section applies prior to issuing a custody order, unless the court finds that a continuance is necessary to determine whether this section applies, in which case the court may issue a temporary custody order for a reasonable period of time, provided the order complies with Sections 3011 and 3020.

(h) In a custody or restraining order proceeding in which a party has alleged that the other party has perpetrated domestic violence in accordance with the terms of this section, the court shall inform the parties of the existence of this section and shall give them a copy of this section prior to custody mediation in the case.

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address):* TELEPHONE NO.: FAX NO. *(Optional):* EMAIL ADDRESS*:* ATTORNEY FOR *(Name):*	*FOR COURT USE ONLY*
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ☐ CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101 ☐ EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020 ☐ NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081 ☐ SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	CASE NUMBER: JUDICIAL OFFICER:
NOTICE OF CHANGE OF ADDRESS OR OTHER CONTACT INFORMATION	DEPT.:

1. **Please take notice** that, as of *(date):*
   ☐ the following self-represented party or
   ☐ the attorney for:
   a. ☐ plaintiff *(name):*
   b. ☐ defendant *(name):*
   c. ☐ petitioner *(name):*
   d. ☐ respondent *(name):*
   e. ☐ other *(describe):*

   has **changed his or her address** for service of notices and documents or other contact information in the above-captioned action.
   ☐ A list of additional parties represented is provided in Attachment 1.
2. The **new address** or other contact information for *(name):*

   is as follows:
   a. Street:
   b. City:
   c. Mailing address *(if different from above):*
   d. State and zip code:
   e. Telephone number*:*
   f. Fax number (if available):
   g. E-mail address (if available):
3. **All notices and documents** regarding the action should be sent to the above address.

Date:

(TYPE OR PRINT NAME) (SIGNATURE OF PARTY OR ATTORNEY)

PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	CASE NUMBER:

PROOF OF SERVICE BY FIRST-CLASS MAIL

NOTICE OF CHANGE OF ADDRESS OR OTHER CONTACT INFORMATION

(NOTE: This page may be used for proof of service by first-class mail of the* Notice of Change of Address or Other Contact Information*. Please use a different proof of service, such as* Proof of Service—Civil (form POS-040)*, if you serve this notice by a method other than first class-mail, such as by fax or electronic service. You cannot serve the* Notice of Change of Address or Other Contact Information *if you are a party in the action. The person who served the notice must complete this proof of service.)

1. At the time of service, I was at least 18 years old and **not a party to this action.**
2. I am a resident of or employed in the county where the mailing took place. My residence or business address is *(specify):*
3. I served a copy of the *Notice of Change of Address or Other Contact Information* by enclosing it in a sealed envelope addressed to the persons at the addresses listed in item 5 and *(check one):*
   a. ☐ deposited the sealed envelope with the United States Postal Service with postage fully prepaid.
   b. ☐ placed the sealed envelope for collection and for mailing, following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service in a sealed envelope with postage fully prepaid.
4. The *Notice of Change of Address or Other Contact Information* was placed in the mail:
   a. on *(date):*
   b. at *(city and state):*
5. The envelope was addressed and mailed as follows:

a. Name of person served:
Street address:
City:
State and zip code:

b. Name of person served:
Street address:
City:
State and zip code:

c. Name of person served:
Street address:
City:
State and zip code:

d. Name of person served:
Street address:
City:
State and zip code:

☐ Names and addresses of additional persons served are attached. *(You may use form POS-030(P).)*

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 OF DECLARANT) ▶ (SIGNATURE OF DECLARANT)

RESPONDING PARTY

FL-320-INFO Information Sheet: Responsive Declaration to Request for Order

1 If you received a *Request for Order* (form FL-300),

- Carefully read the papers you received to make sure you understand what orders are being requested.
- Note the date, time, and location of the court hearing.
- Check to see if the court ordered a specific date for filing and serving your *Responsive Declaration to Request for Order* (form FL-320).
- If you need more time before the hearing to prepare a responsive declaration or talk with a lawyer, you may ask the court to continue the hearing date. For more information, consult with a lawyer or contact the the Family Law Facilitator or Self-Help Center in your court (see item 16).

2 USE *Responsive Declaration to Request for Order* (form FL-320)

Use form FL-320 to let the court and the other party know that you agree or disagree with each of the requests made in the *Request for Order* (form FL-300).

- If you disagree, use form FL-320 to describe the orders you would like the court to make.
- If you do not file and serve form FL-320, the court can still make orders without your input.

3 DO NOT USE *Responsive Declaration to Request for Order* (form FL-320) to:

- Ask for court orders that were not requested in the *Request for Order* (form FL-300). Instead, file and serve your own *Request for Order* (form FL-300) to ask for orders about other issues.
- Respond to *Request for Domestic Violence Restraining Order* (form DV-100). Instead, you must use *Response to Request for Domestic Restraining Order* (form DV-120).

4 Forms checklist

a. Form FL-320, *Responsive Declaration to Request for Order* is the basic form you need. Depending on the requests made in the *Request for Order* (form FL-300), you may need other forms.

b. For child custody or visitation (parenting time) orders, you may need to complete some of these forms:
- ☐ FL-105, *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act*
- ☐ FL-311, *Child Custody and Visitation (Parenting Time) Application Attachment*
- ☐ FL-312, *Request for Child Abduction Prevention Orders*
- ☐ FL-341(C), *Children's Holiday Schedule Attachment*
- ☐ FL-341(D), *Additional Provisions—Physical Custody Attachment*
- ☐ FL-341(E), *Joint Legal Custody Attachment*

c. For child support, you need:
- ☐ A current form FL-150, *Income and Expense Declaration.* You may use form FL-155, *Financial Statement (Simplified)* instead of form FL-150 if you meet the requirements listed on page 2 of form FL-155.

Notice:
- The court will order child support based on the income of the parents.
- Child support normally continues until the child is 18 years and has graduated from high school.
- You must give the court information about your finances. If you do not, the child support order will be based on information about your income that the court receives from other sources.

d. For spousal or domestic partner support or orders about your finances, you need these forms:
- ☐ FL-150, *Income and Expense Declaration*
- ☐ FL-157, *Spousal or Partner Support Declaration Attachment* (if the request is to change a support judgment)

e. For attorney's fees and costs, you need these forms:
- ☐ FL-150, *Income and Expense Declaration*
- ☐ FL-158, *Supporting Declaration for Attorney's Fees and Costs* (or provide the information in a declaration)
- ☐ FL-319, *Request for Attorney's Fees and Costs Attachment* (or provide the information in a declaration)

f. If you plan on having witnesses testify at the hearing, you need this form:
- ☐ FL-321, *Witness List*

To respond to a *Request for Order*, you must: Complete caption of the form

5 Complete the top portion including your name, address, and telephone number, the court address, the name of all the parties in the case, and the case number. Also, print or type the same hearing date, time, and department that appears on the *Request for Order* (form FL-300).

6 **Specify a response to orders requested**

Items 1–9: Each item on the form matches the item numbers on the *Request for Order* (form FL-300). Complete item 1. Next, mark the same box that is marked on form FL-300. Then, specify if you consent (agree) or do not consent to (disagree with) the orders requested. If you disagree, describe the order you would like the court to make. *Note: you may file one form FL-150 to respond to items 3, 4, and 6.*

Item 10: Use the space to explain your responses to items 1–9. Include the reasons why you do not agree with the orders requested by the other party and why the court should make the orders you described. If you need more space, write your responses on a separate sheet of paper and attach it to the form (*Attached Declaration* (form MC-031) may be used for this purpose).

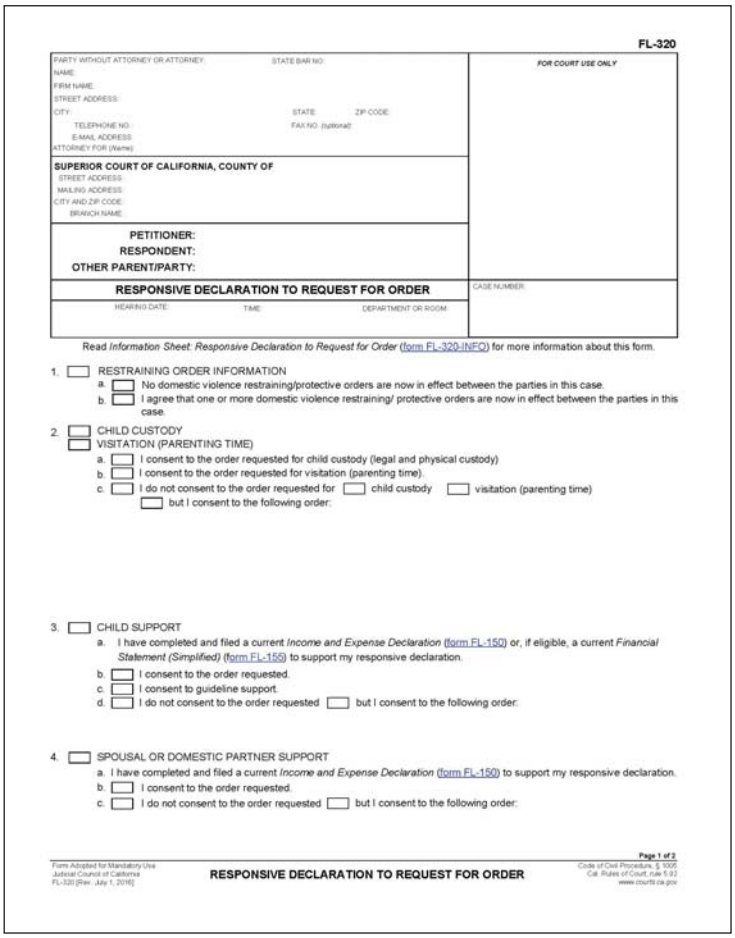
Sign and date: Print your name, sign, and write the date you signed form FL-320.

7 **Next steps: file or serve your paperwork**

You must file your paperwork with the court clerk at least 9 court days before the hearing. If the court orders a shorter time to file your papers, file them by the date specified in the order.

Make 2 copies of your original paperwork. Then, do one of the following before the filing deadline:

- Take your paperwork and copies to the court clerk to process (or e-file them, if available in your county). The clerk will keep the original and give you back copies with a court stamp on them. Have a stamped copy served; or
- Have an unstamped copy of your paperwork served *before* you take (or e-file) the originals and copies to the court clerk to file. Be sure the original documents are not served.



FL-320

PARTY WITHOUT ATTORNEY OR ATTORNEY: STATE BAR NO:
NAME:
FIRM NAME:
STREET ADDRESS:
CITY: STATE: ZIP CODE:
TELEPHONE NO: FAX NO. (Optional):
E-MAIL ADDRESS:
ATTORNEY FOR (Name):

FOR COURT USE ONLY

SUPERIOR COURT OF CALIFORNIA, COUNTY OF
STREET ADDRESS:
MAILING ADDRESS:
CITY AND ZIP CODE:
BRANCH NAME:

PETITIONER:
RESPONDENT:
OTHER PARENT/PARTY:

RESPONSIVE DECLARATION TO REQUEST FOR ORDER

CASE NUMBER:

HEARING DATE: TIME: DEPARTMENT OR ROOM:

Read *Information Sheet: Responsive Declaration to Request for Order* (form FL-320-INFO) for more information about this form.

1. ☐ RESTRAINING ORDER INFORMATION
   a. ☐ No domestic violence restraining/protective orders are now in effect between the parties in this case.
   b. ☐ I agree that one or more domestic violence restraining/ protective orders are now in effect between the parties in this case.
2. ☐ CHILD CUSTODY
   ☐ VISITATION (PARENTING TIME)
   a. ☐ I consent to the order requested for child custody (legal and physical custody)
   b. ☐ I consent to the order requested for visitation (parenting time).
   c. ☐ I do not consent to the order requested for ☐ child custody ☐ visitation (parenting time)
   ☐ but I consent to the following order:
3. ☐ CHILD SUPPORT
   a. I have completed and filed a current *Income and Expense Declaration* (form FL-150) or, if eligible, a current *Financial Statement (Simplified)* (form FL-155) to support my responsive declaration.
   b. ☐ I consent to the order requested.
   c. ☐ I consent to guideline support.
   d. ☐ I do not consent to the order requested ☐ but I consent to the following order:
4. ☐ SPOUSAL OR DOMESTIC PARTNER SUPPORT
   a. I have completed and filed a current *Income and Expense Declaration* (form FL-150) to support my responsive declaration.
   b. ☐ I consent to the order requested.
   c. ☐ I do not consent to the order requested ☐ but I consent to the following order:

Page 1 of 2

Form Adopted for Mandatory Use Judicial Council of California FL-320 [Rev. July 1, 2016]

RESPONSIVE DECLARATION TO REQUEST FOR ORDER

Code of Civil Procedure, § 1005 Cal. Rules of Court, rule 5.92 www.courts.ca.gov

8 **Pay filing fees**

Generally, you do not have to pay a fee to file the *Responsive Declaration*. However, if you have never filed any papers in the case, you may have to pay a "first appearance fee," which, in general, everyone has to pay when filing court papers in a case for the first time.

If you cannot afford to pay the filing fee, you can ask the court to waive the fees. To do so, complete and file form FW-001, *Request to Waive Court Fees* and form FW-003, *Order on Court Fee Waiver*.

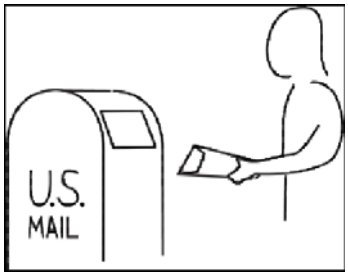
9 **Serve your papers on the other party**

"Service" is the act of giving your legal papers to all persons named as parties in the case so that they know what orders you want the court to make. Note: If a party has a lawyer in the case, the papers should be served on that party's lawyer.

10 How to "serve"

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

Personal service. Your papers may be served by "personal service." "Personal service" means that your "server" walks up to each person to be served, makes sure he or she is the right person, and then gives a copy of all the papers to him or her.



Service by mail. "Service by mail" means that your "server" places copies of all the documents in a sealed envelope and mails them to the address of each party being served (or to the party's lawyer, if he or she has one.) The server must be 18 years of age or over and must live or work in the county where the mailing took place.

11 Deadline for service

Personal service or service by mail on the other party must be completed at least *9 court days* before the court hearing. If the court has ordered a shorter time to serve your responsive papers, be sure to have them served by the date specified in the court order.

12 Server must complete a *Proof of Service*

After personal service, the server should complete a form FL-330, *Proof of Personal Service*. Form FL-330-INFO, *Information Sheet for Proof of Personal Service* has instructions to help the person complete the form.

After service by mail, the server should complete form FL-335, *Proof of Service by Mail*. Form FL-335-INFO, *Information Sheet for Proof of Service by Mail* has instructions to help the person complete the form.

13 File the *Proof of Service* before your hearing date

The *Proof of Service* shows the judge that the person received a copy of your *Responsive Declaration to Request for Order*. Make three copies of the completed *Proof of Service*. Take the original and copies to the court clerk as soon as possible **before your hearing.**

The clerk will keep the original and give you back the copies stamped "Filed." Bring a copy stamped "Filed" to your hearing. (If unstamped copies of your paperwork were served, you can file the completed *Proof of Service* when you file the original *Responsive Declaration*.)

14 Participate in child custody mediation or child custody recommending counseling

If the *Request for Order* includes a court order for you to attend mediation or child custody recommending counseling, the date, time, and location is found on page 1 of the *Request for Order*. For more information, read *Child Custody Information Sheet* (form FL-313-INFO or form FL-314-INFO).

15 Get ready for your hearing

- Take at least two copies of your documents and filed forms to the hearing. Include a filed *Proof of Service* form.
- Find more information about preparing for the hearing at *www.courts.ca.gov/1094.htm.*

16 Still have questions or need help?

- Contact the Family Law Facilitator or Self-Help Center for information, local rules, and referrals to local legal services providers. Go to *http://www.courts.ca.gov/1083.htm/.*
- Talk to a lawyer if you want legal advice, someone to go to court with you, or other legal help. Find an attorney through your local bar association, the State Bar of California at *calbar.ca.gov*, or the Lawyer Referral Service at 1-866-442-2529.
- For free and low-cost legal help (if you qualify), go to *lawhelpcalifornia.org*.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO. *(Optional)*: EMAIL ADDRESS: ATTORNEY FOR *(Name)*:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO ☐ CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101 ☐ EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020 ☐ NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081 ☐ SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910	
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	
RESPONSIVE DECLARATION TO REQUEST FOR ORDER	CASE NUMBER:
HEARING DATE: TIME: DEPARTMENT OR ROOM:	

Read *Information Sheet: Responsive Declaration to Request for Order* (**form FL-320-INFO**) for more information about this form.

1. ☐ RESTRAINING ORDER INFORMATION
   a. ☐ No domestic violence restraining/protective orders are now in effect between the parties in this case.
   b. ☐ I agree that one or more domestic violence restraining/ protective orders are now in effect between the parties in this case.

2. ☐ CHILD CUSTODY
   ☐ VISITATION (PARENTING TIME)
   a. ☐ I consent to the order requested for child custody (legal and physical custody).
   b. ☐ I consent to the order requested for visitation (parenting time).
   c. ☐ I do not consent to the order requested for ☐ child custody ☐ visitation (parenting time)
   ☐ but I consent to the following order:

3. ☐ CHILD SUPPORT
   a. I have completed and filed a current *Income and Expense Declaration* (form FL-150) or, if eligible, a current *Financial Statement (Simplified)* (form FL-155) to support my responsive declaration.
   b. ☐ I consent to the order requested.
   c. ☐ I consent to guideline support.
   d. ☐ I do not consent to the order requested ☐ but I consent to the following order:

4. ☐ SPOUSAL OR DOMESTIC PARTNER SUPPORT
   a. I have completed and filed a current *Income and Expense Declaration* (form FL-150) to support my responsive declaration.
   b. ☐ I consent to the order requested.
   c. ☐ I do not consent to the order requested ☐ but I consent to the following order:

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

5. ☐ PROPERTY CONTROL
   a. ☐ I consent to the order requested.
   b. ☐ I do not consent to the order requested ☐ but I consent to the following order:

6. ☐ ATTORNEY'S FEES AND COSTS
   a. I have completed and filed a current *Income and Expense Declaration* (form FL-150) to support my responsive declaration.
   b. I have completed and filed with this form a *Supporting Declaration for Attorney's Fees and Costs Attachment* (form FL-158) or a declaration that addresses the factors covered in that form.
   c. ☐ I consent to the order requested.
   d. ☐ I do not consent to the order requested ☐ but I consent to the following order:

7. ☐ DOMESTIC VIOLENCE ORDER
   a. ☐ I consent to the order requested.
   b. ☐ I do not consent to the order requested ☐ but I consent to the following order:

8. ☐ OTHER ORDERS REQUESTED
   a. ☐ I consent to the order requested.
   b. ☐ I do not consent to the order requested ☐ but I consent to the following order:

9. ☐ TIME FOR SERVICE / TIME UNTIL HEARING
   a. ☐ I consent to the order requested.
   b. ☐ I do not consent to the order requested ☐ but I consent to the following order:

10. ☐ FACTS TO SUPPORT my responsive declaration are listed below. The facts that I write and attach to this form cannot be longer than 10 pages, unless the court gives me permission. ☐ Attachment 10.

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

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF DECLARANT)

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address):*	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO. *(Optional):* EMAIL ADDRESS: ATTORNEY FOR *(Name):*	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO ☐ CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101 ☐ CENTRAL DIVISION, SMALL CLAIMS, 330 W. BROADWAY, SAN DIEGO, CA 92101 ☐ CENTRAL DIVISION, CIVIL, 330 W. BROADWAY, ROOM 225, SAN DIEGO, CA 92101 ☐ EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020 ☐ NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081 ☐ SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	
DECLARATION	CASE NUMBER:

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)

☐ Attorney for ☐ Plaintiff ☐ Petitioner ☐ Defendant
☐ Respondent ☐ Other *(Specify):*

PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	CASE NUMBER:

DECLARATION

(This form must be attached to another form or court paper before it can be filed in court.)

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)

☐ Attorney for ☐ Plaintiff ☐ Petitioner ☐ Defendant
☐ Respondent ☐ Other *(Specify):*

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO. *(Optional)*: EMAIL ADDRESS: ATTORNEY FOR *(Name)*:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO ☐ CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101 ☐ EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020 ☐ NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081 ☐ SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910	
PETITIONER: RESPONDENT: OTHER PARTY/PARENT/CLAIMANT:	
INCOME AND EXPENSE DECLARATION	CASE NUMBER:

1. **Employment** *(Give information on your current job or, if you're unemployed, your most recent job.)*

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

a. Employer:
b. Employer's address:
c. Employer's phone number:
d. Occupation:
e. Date job started:
f. If unemployed, date job ended:
g. I work about hours per week.
h. I get paid $ gross (before taxes) ☐ per month ☐ per week ☐ per hour.

(If you have more than one job, attach an 8 1/2-by-11-inch sheet of paper and list the same information as above for your other jobs. Write "Question 1—Other Jobs" at the top.)

2. **Age and education**
   a. My age is *(specify):*
   b. I have completed high school or the equivalent: ☐ Yes ☐ No If no, highest grade completed *(specify):*
   c. Number of years of college completed *(specify):* ☐ Degree(s) obtained *(specify):*
   d. Number of years of graduate school completed *(specify):* ☐ Degree(s) obtained *(specify):*
   e. I have: ☐ professional/occupational license(s) *(specify):*
   ☐ vocational training *(specify):*

3. **Tax information**
   a. ☐ I last filed taxes for tax year *(specify year):*
   b. My tax filing status is ☐ single ☐ head of household ☐ married, filing separately
   ☐ married, filing jointly with *(specify name):*
   c. I file state tax returns in ☐ California ☐ other *(specify state):*
   d. I claim the following number of exemptions (including myself) on my taxes *(specify):*

4. **Other party's income.** I estimate the gross monthly income (before taxes) of the other party in this case at *(specify):* $
   This estimate is based on *(explain):*

(If you need more space to answer any questions on this form, attach an 8 1/2-by-11-inch sheet of paper and write the question number before your answer.) Number of pages attached: _____

I declare under penalty of perjury under the laws of the State of California that the information contained on all pages of this form and any attachments is true and correct.

Date:

_____ (TYPE OR PRINT NAME)

▶ _____ (SIGNATURE OF DECLARANT)

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

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

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

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

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

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

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

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

Number of years in this business *(specify):*

Name of business *(specify):*

Type of business *(specify):*

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

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

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

10. **Deductions**

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

11. **Assets**

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

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

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

12. **The following people live with me:**

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

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

a. Home:
(1) ☐ Rent or ☐ mortgage..... $ _____
If mortgage:
(a) average principal: $ _____
(b) average interest: $ _____
(2) Real property taxes..... $ _____
(3) Homeowner's or renter's insurance (if not included above)..... $ _____
(4) Maintenance and repair..... $ _____

b. Health-care costs not paid by insurance..... $ _____
c. Child care..... $ _____
d. Groceries and household supplies..... $ _____
e. Eating out..... $ _____
f. Utilities (gas, electric, water, trash)..... $ _____
g. Telephone, cell phone, and e-mail..... $ _____
h. Laundry and cleaning..... $ _____
i. Clothes..... $ _____
j. Education..... $ _____
k. Entertainment, gifts, and vacation..... $ _____
l. Auto expenses and transportation (insurance, gas, repairs, bus, etc.)..... $ _____
m. Insurance (life, accident, etc.; do not include auto, home, or health insurance)..... $ _____
n. Savings and investments..... $ _____
o. Charitable contributions..... $ _____
p. Monthly payments listed in item 14 *(itemize below in 14 and insert total here)*..... $ _____
q. Other *(specify):* $ _____
r. **TOTAL EXPENSES** (a–q) *(do not add in the amounts in a(1)(a) and (b))* $ _____
s. **Amount of expenses paid by others** $ _____

14. **Installment payments and debts not listed above**

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

15. **Attorney fees** *(This information is required if either party is requesting attorney fees):*
a. To date, I have paid my attorney this amount for fees and costs *(specify):* $
b. The source of this money was *(specify):*
c. I still owe the following fees and costs to my attorney *(specify total owed):* $
d. My attorney's hourly rate is *(specify):*

I confirm this fee arrangement.

Date:

_____ (TYPE OR PRINT NAME)

▶ _____ (SIGNATURE OF DECLARANT)

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

CHILD SUPPORT INFORMATION
(NOTE: Fill out this page only if your case involves child support.)

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

17. **Children's health-care expenses**
    a. ☐ I do ☐ I do not have health insurance available to me for the children through my job.
    b. Name of insurance company:
    c. Address of insurance company:

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

18. **Additional expense for the children in this case**

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

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

	Amount per month	For how many months?
a. Extraordinary health expenses not included in 18b	$ _____	_____
b. Major losses not covered by insurance *(examples: fire, theft, other insured loss)*	$ _____	_____
c. (1) Expenses for my minor children who are from other relationships and are living with me	$ _____	_____
(2) Names and ages of those children *(specify):*		
(3) Child support I receive for those children	$ _____	

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

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

INFORMATION SHEET FOR PROOF OF PERSONAL SERVICE

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

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

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

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

Complete the top section of the proof of service forms as follows:
First box, left side: In this box print the name, address, and phone number of the person for whom you are serving the documents.
Second box, left side: Print the name of the county in which the legal action is filed and the court's address in this box. Use the same address for the court that is on the documents you are serving.
Third box, left side: Print the names of the petitioner/plaintiff, respondent/defendant, and other parent in this box. Use the same names listed on the documents you are serving.
First box, top of form, right side: Leave this box blank for the court's use.
Second box, right side: Print the case number in this box. This number is also stated on the documents you are serving.
Third box, right side: Print the hearing date, time, and department. Use the same information that is on the documents you are serving.

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

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

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

ATTORNEY OR PARTY WITHOUT ATTORNEY OR GOVERNMENTAL AGENCY (under Family Code, §§ 17400,17406) *(Name, State Bar number, and address):*	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO.: EMAIL ADDRESS: ATTORNEY FOR *(Name):*	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO ☐ CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101 ☐ EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020 ☐ NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081 ☐ SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/PARTY:	CASE NUMBER: *(If applicable, provide):* HEARING DATE: HEARING TIME: DEPT.:
PROOF OF PERSONAL SERVICE	

1. I am at least 18 years old, not a party to this action, and not a protected person listed in any of the orders.
2. Person served *(name):*
3. I served copies of the following documents *(specify):*

4. By personally delivering copies to the person served, as follows:
   a. Date:
   b. Time:
   c. Address:

5. I am
   a. ☐ not a registered California process server.
   b. ☐ a registered California process server.
   c. ☐ an employee or independent contractor of a registered California process server.
   d. ☐ exempt from registration under Business & Profession Code section 22350(b).
   e. ☐ a California sheriff or marshal.
6. My name, address, and telephone number, and, if applicable, county of registration and number *(specify):*

7. ☐ I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
8. ☐ I am a California sheriff or marshal and I certify that the foregoing is true and correct.

Date:

(TYPE OR PRINT NAME OF PERSON WHO SERVED THE PAPERS)

(SIGNATURE OF PERSON WHO SERVED THE PAPERS)

INFORMATION SHEET FOR PROOF OF SERVICE BY MAIL

Use these instructions to complete the *Proof of Service by Mail* (form FL-335).

A person at least 18 years of age or older must serve the documents. There are two ways to serve documents: (1) personal delivery and (2) by mail. See the *Proof of Personal Service* (form FL-330) if the documents are being personally served. The person who serves the documents must complete a proof of service form for the documents being served. **You cannot serve documents if you are a party to the action.**

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

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

Complete the top section of the proof of service forms as follows:
First box, left side: In this box print the name, address, and phone number of the person for whom you are serving the documents.
Second box, left side: Print the name of the county in which the legal action is filed and the court's address in this box. Use the same address for the court that is on the documents you are serving.
Third box, left side: Print the names of the petitioner/plaintiff, respondent/defendant, and other parent in this box. Use the same names listed on the documents you are serving.
First box, top of form, right side: Leave this box blank for the court's use.
Second box, right side: Print the case number in this box. This number is also stated on the documents you are serving.
Third box, right side: Print the hearing date, time, and department. Use the same information that is on the documents you are serving.

You cannot serve a temporary restraining order by mail. You must serve those documents by personal service.

1. You are stating that you are at least 18 years old and that you are not a party to this action. You are also stating that you either live in or are employed in the county where the mailing took place.
2. Print your home or business address.
3. List the name of each document that you mailed (the exact names are listed on the bottoms of the forms).
   a. Check this box if you put the documents in the regular U.S. mail.
   b. Check this box if you put the documents in the mail at your place of employment.
4. a. Print the name you put on the envelope containing the documents.
   b. Print the address you put on the envelope containing the documents.
   c. Print the date that you put the envelope containing the documents in the mail.
   d. Print the city and state you were in when you mailed the envelope containing the documents.
5. Check this box if you are serving an address verification form (required for service by mail of a postjudgment request to change a child custody, visitation, or child support order).
6. You are stating under penalty of perjury that the information you have provided is true and correct.

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

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

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address):*	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO. *(Optional):* EMAIL ADDRESS *:* ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO ☐ CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101 ☐ EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020 ☐ NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081 ☐ SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/PARTY:	CASE NUMBER: *(If applicable, provide):* HEARING DATE: HEARING TIME: DEPT.:
PROOF OF SERVICE BY MAIL	

NOTICE: To serve temporary restraining orders you must use personal service (see form FL-330).

1. I am at least 18 years of age, not a party to this action, and I am a resident of or employed in the county where the mailing took place.

2. My residence or business address is:

3. I served a copy of the following documents *(specify):*

   by enclosing them in an envelope AND
   a. ☐ **depositing** the sealed envelope with the United States Postal Service with the postage fully prepaid.
   b. ☐ **placing** the envelope for collection and mailing on the date and at the place shown in item 4 following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service in a sealed envelope with postage fully prepaid.

4. The envelope was addressed and mailed as follows:
   a. Name of person served:
   b. Address:

   c. Date mailed:
   d. Place of mailing *(city and state):*

5. ☐ I served a request to modify a child custody, visitation, or child support judgment or permanent order which included an address verification declaration. *(Declaration Regarding Address Verification—Postjudgment Request to Modify a Child Custody, Visitation, or Child Support Order* (form FL-334) may be used for this purpose.)

6. 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)

CONFIDENTIAL

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO

FAMILY COURT SERVICES (FCS) DATA SHEET (CONFIDENTIAL)

Case Name _____

Case No. _____

FCS Date _____

Next Court Date _____

COMPLETE ALL THREE PAGES

Have you previously been to Family Court Services? ☐ Yes ☐ No

IF YOU ARE BEING PROTECTED BY A RESTRAINING ORDER OR IF YOU ALLEGE DOMESTIC VIOLENCE, YOU MAY BE SEEN SEPARATELY. Are you requesting a separate session? ☐ Yes ☐ No
If you want to be seen separately, advise the Family Court Services Clerk when you check in.
SUPPORT PERSON: If you are being protected by a restraining order, a support person may accompany you during your FCS session. The support person must first sign a Family Court Services Domestic Violence Support Person Agreement (SDSC Form #FCS-038). Advise the Family Court Services Clerk of your support person when you check in.

Are you requesting that your address and telephone number remain confidential? ☐ Yes ☐ No

CHECK ONE ☐ Father ☐ Mother ☐ Grandparent ☐ Other (specify relationship): _____

FULL LEGAL NAME _____ AKA OR MAIDEN NAME _____

ADDRESS _____
Number and Street Apt. # City State Zip Code

HOME TEL. NO. _____ WORK TEL. NO. _____

EMAIL ADDRESS TO RECEIVE CONFIDENTIAL FCS REPORT:

_____ WORK SCHEDULE _____

BIRTH DATE ____/____/____ PLACE OF BIRTH _____

LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER XXX – XX – ___ ___ ___ ___

DRIVER LICENSE NUMBER _____ STATE _____ CURRENTLY VALID ☐ Yes ☐ No

ATTORNEY _____ TEL. NO. _____

ADDRESS _____
Number and Street Apt. # City State Zip Code

CHILD(REN)'S ATTORNEY (if any) _____ TEL. NO. _____

ADDRESS _____
Number and Street Apt. # City State Zip Code

PARENTS

Date of Marriage _____ or Date Began Living Together _____

Date of Separation _____ If dissolution filed, when? _____

NAME OF MINOR CHILD(REN)

	First	Middle	Last	Date of Birth	Place of Birth	Parent with whom residing
1.						
2.						
3.						
4.						

CONFIDENTIAL

CASE NAME	CASE NUMBER

MEDICAL AND DENTAL INFORMATION

Child(ren)'s Doctor's Name _____ Tel. No. _____

ADDRESS _____
Number and Street Apt. # City State Zip Code

List medical/dental information to be discussed at FCS _____

_____

EDUCATION

	Child	Name of School	Teacher/Counselor	Grade
1.				
2.				
3.				
4.				

COUNSELING

Is ☐ Child(ren) ☐ Father ☐ Mother in Counseling? ☐ Yes ☐ No

Counselor for _____
Counselor's Name _____
Address _____
Tel. No. _____
When did counseling begin? _____

Counselor for _____
Counselor's Name _____
Address _____
Tel. No. _____
When did counseling begin? _____

CHILD(REN)'S ACTIVITIES AND OTHER SPECIAL NEEDS

(e.g. special classes, team activities, and transportation to and from these activities) _____

_____

1. Are there allegations of verbal intimidation or threats? ☐ Yes ☐ No
2. Has there been physical violence between the parents? ☐ Yes ☐ No
   If yes, how long ago? ☐ 0 – 6 mos. ☐ 6 mos. – 1 yr. ☐ 1 yr. or more
3. Has law enforcement been involved? ☐ Yes ☐ No Provide details: _____

   _____
4. Have there been allegations of verbal intimidation/threats, physical violence, and/or restraining orders between yourself and ☐ your parent ☐ current spouse or cohabitant ☐ party in dating or engagement relationship ☐ other?

   ☐ Yes ☐ No If yes, check all boxes that apply. Provide details: _____

   _____
5. Have there been allegations of abuse against your child(ren) or child(ren) for whom you have provided care?

   ☐ Yes ☐ No If yes, when: _____

   Who made the allegations? _____ Who was the alleged abuser? _____

   Has Child Welfare Services (CWS) been involved? ☐ Yes ☐ No

   CWS worker's name and telephone number _____

CASE NAME	CASE NUMBER

FAMILY COURT SERVICES (FCS) DATA SHEET
Complete the following questions.

1. Which parent filed the current court action? _____
2. What is the action regarding? _____
   _____
3. Is there a court order regarding custody and visitation now? ☐ Yes ☐ No
   a. If yes, briefly summarize: _____
   _____
   _____
   _____
   b. When was it issued? _____
4. If there is no court order or a different schedule is being practiced, summarize your current parenting schedule: _____
   _____
   _____
   _____
5. What parenting schedule would you like to have? _____
   _____
   _____
   _____
   _____
   _____
   _____

Date: _____

_____
Signature of Party Filling Out This Form

NO ATTACHMENTS

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO

☐ CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101, (619) 844-2888
☐ EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020, (619) 456-4181
☐ NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081, (760) 201-8300
☐ SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910, (619) 746-6097

FAMILY COURT SERVICES
CHILD CUSTODY RECOMMENDING COUNSELING INFORMATION SHEET

IMPORTANT: This information sheet is not and should not be considered or construed as legal advice. Child custody recommending counselors do not give legal advice. If you need legal advice, you should consult an attorney.

What is Child Custody Recommending Counseling?

Child custody recommending counseling (formerly called "mediation") is a process in which parties are given the opportunity to work together, with the assistance of an experienced Family Court Services (FCS) counselor, towards a goal of reaching an agreement regarding a parenting plan for the child(ren). The child custody recommending counseling conference is an opportunity for parties to discuss custody and visitation and make their own decisions about what is in the best interest of the child(ren). The parenting plan that is developed details when children are to be with each party and specifies other parental responsibilities. Information shared by parties during the child custody recommending counseling session is not confidential to the court. The counselor will notify the court of areas of agreement. If no agreement is reached, the counselor will make a written recommendation to the court as to what is believed to be in the best interest of the child(ren). The recommendation will be provided to the parties prior to the court hearing. If you disagree with the counselor's recommendation, you or your attorney will have the opportunity during your court hearing to tell the judicial officer your position regarding a child sharing plan. Only a judicial officer can make a court order for child custody or visitation.

Telephone calls to a counselor after the FCS session will not be accepted unless the counselor has requested specific information. All information that you want the counselor to know should be discussed during the FCS session.

What will happen at your Family Court Services appointment?

You will view an orientation video before seeing a counselor. The video can also be viewed on the court's website at www.sdcourt.ca.gov. Under the Divisions heading, select Family, then select Custody and Visitation.

In advance of your appointment, complete and submit the Family Court Services Data Sheet (SDSC Form #FCS-002). The form is located on the court's website: www.sdcourt.ca.gov. Under the Divisions heading, select Family, select Custody and Visitation, then select Forms. Mail the completed form to the address on the top of this form where your FCS appointment is located **OR** email it to Family Court Services at the court division where your FCS appointment is located:

- Central Division: FCSCentral@sdcourt.ca.gov
- East County Division: FCSEast@sdcourt.ca.gov
- North County Division: FCSNorth@sdcourt.ca.gov
- South County Division: FCSSouth@sdcourt.ca.gov

This form must be submitted in advance for the counselor to review prior to conducting the session.

During the FCS session, you will be asked about your home, relationships, and other aspects of your life related to parenting. Your proposal for a child sharing schedule and any parenting concerns will also be discussed. The FCS conference will last 1½ to 2 hours.

Are the parties always seen together in the child custody recommending counseling session?

Parties are seen together unless there is a restraining order or allegations of domestic violence.

If you are being protected by a restraining order against the other party, or if you allege domestic violence has occurred, you may be interviewed separately from the other parent. Also, if a restraining order for your protection is in effect at the time of the appointment, you may have a support person with you during your FCS session. To arrange for either of these requests, please submit the appropriate forms as explained below prior to your appointment and advise the FCS clerk of these requests when you check in for your appointment.

If you do not have a restraining order against the other party, you may request a separate session by completing a Declaration Alleging Domestic Violence for Separate Family Court Services Session (SDSC Form #FCS-017) prior to your session. Mail or email the form with your Family Court Services Data Sheet (SDSC Form #FCS-002) as indicated above. The form is located on the court's website: www.sdcourt.ca.gov. Under the Divisions heading, select Family, select Custody and Visitation, then select Forms.

You may request the presence of a support person by completing the Family Court Services Domestic Violence Support Person Agreement (SDSC Form #FCS-038) prior to your session. Mail or email the form with your Family Court Services Data Sheet (SDSC Form #FCS-002). The form is located on the court's website: www.sdcourt.ca.gov. Under the Divisions heading, select Family, select Custody and Visitation, then select Forms.

Arrangements can also be made for a telephone conference for a party out of the county. Please call the FCS office where your session will take place to arrange for participation by telephone.

Should I bring the child(ren) to the Family Court Services appointment?

Do NOT bring the child(ren) with you for the FCS appointment unless ordered to do so by the court. If an interview with the child(ren) is needed, the FCS counselor will make arrangements for another time.

What are the limitations of child custody recommending counseling?

Child custody recommending counseling does NOT deal with issues related to money, child or spousal support, or property. Family Court Services cannot monitor or enforce court orders.

IMPORTANT

If you do not need the Family Court Services child custody recommending counseling session, you must cancel it at least one court day prior to the scheduled date, per San Diego Superior Court Local Rules, Division V, Chapter 11, Child and Custody Visitation. If you do not cancel the session and/or fail to appear for the session, you may be ordered by the court to pay a monetary sanction of up to $1,500 pursuant to Code Civ. Proc. § 177.5.

Additional information about child custody recommending counseling can be found at www.sdcourt.ca.gov and www.courts.ca.gov.

Domestic Violence and Child Custody

If there has been domestic violence (domestic abuse or partner abuse) in your family, a special law may apply to your case.

What is "domestic violence"?

It means to hit, kick, scare, throw things, pull hair, push, follow, harass, sexually assault, or threaten to do any of these things. It also includes other actions that make someone afraid of being hurt, isolated or unable to get to basic things, like food. Domestic violence can be spoken, written, or physical. For more information on what domestic violence is, read form DV-500-INFO, *Can a Domestic Violence Restraining Order Help Me?*

What is "child custody"?

There are two kinds:

- A person with **physical custody** lives with the child on a regular basis.
- A person with **legal custody** makes important decisions about the child's health care, education, and welfare.

When does domestic violence affect my case?

In the last 5 years, has a parent in this case:

1. Had a **conviction** in criminal court for domestic violence against one of the following people:

- The other parent in the custody case;
- Any of your children or your children's siblings;
- Their current spouse, or someone they are currently dating, engaged to, or living with; or
- Their parent (your child's grandparent)?

2. Had a **judge decide** that they committed domestic violence against any of the people listed above? (Example: a judge granted a restraining order against the parent after people testified and gave evidence.)

If you answered yes to 1 or 2, a special law applies to your case.

This special law is sometimes called "3044" (see page 2 for the entire law). If someone is not your child's parent and is asking the court for custody, this law applies to them, too. Even if "3044" does not apply to your case, you should give the judge any information about domestic violence or abuse that you think can help the judge decide who gets custody.

How "3044" affects your case

The judge can give custody to a person who has a domestic violence **conviction or decision** against them only if the judge believes that it is in the child's best interest to do so. The judge must look at 8 factors:

1. What is in the child's best interest?
2. Has the person committed any other domestic violence?
3. Has the person followed all the terms and conditions of any restraining order?
4. Has the person finished a 1 year batterer intervention program?
5. Has the person finished an alcohol or drug program, if ordered by the judge?
6. Has the person finished a parenting class, if ordered by the judge?
7. If on probation or parole, has the person followed all terms of probation or parole?
8. Does the person still have a firearm (gun) or ammunition, in violation of a restraining order?

The judge must go through this 8-factor test in every case that it applies to, even if a court professional or evaluator makes a recommendation in your case. To learn more about the custody process in family court, visit https://selfhelp.courts.ca.gov/what-to-know-about-child-custody-parenting-time.

JUDICIAL COUNCIL OF CALIFORNIA
OPERATIONS AND PROGRAMS DIVISION
CENTER FOR FAMILIES, CHILDREN & THE COURTS

Revised January 1, 2022

Family Code section 3044

(a) Upon a finding by the court that a party seeking custody of a child has perpetrated domestic violence within the previous five years against the other party seeking custody of the child, or against the child or the child's siblings, or against a person in subparagraph (A) of paragraph (2) of subdivision (a) of Section 3011 with whom the party has a relationship, there is a rebuttable presumption that an award of sole or joint physical or legal custody of a child to a person who has perpetrated domestic violence is detrimental to the best interest of the child, pursuant to Sections 3011 and 3020. This presumption may only be rebutted by a preponderance of the evidence.

(b) To overcome the presumption set forth in subdivision (a), the court shall find that paragraph (1) is satisfied and shall find that the factors in paragraph (2), on balance, support the legislative findings in Section 3020.
(1) The perpetrator of domestic violence has demonstrated that giving sole or joint physical or legal custody of a child to the perpetrator is in the best interest of the child pursuant to Sections 3011 and 3020. In determining the best interest of the child, the preference for frequent and continuing contact with both parents, as set forth in subdivision (b) of Section 3020, or with the noncustodial parent, as set forth in paragraph (1) of subdivision (a) of Section 3040, may not be used to rebut the presumption, in whole or in part.
(2) Additional factors:

(A) The perpetrator has successfully completed a batterer's treatment program that meets the criteria outlined in subdivision (c) of Section 1203.097 of the Penal Code.
(B) The perpetrator has successfully completed a program of alcohol or drug abuse counseling, if the court determines that counseling is appropriate.
(C) The perpetrator has successfully completed a parenting class, if the court determines the class to be appropriate.
(D) The perpetrator is on probation or parole, and has or has not complied with the terms and conditions of probation or parole.
(E) The perpetrator is restrained by a protective order or restraining order, and has or has not complied with its terms and conditions.
(F) The perpetrator of domestic violence has committed further acts of domestic violence.
(G) The court has determined, pursuant to Section 6322.5, that the perpetrator is a restrained person in possession or control of a firearm or ammunition in violation of Section 6389.

(c) For purposes of this section, a person has "perpetrated domestic violence" when the person is found by the court to have intentionally or recklessly caused or attempted to cause bodily injury, or sexual assault, or to have placed a person in reasonable apprehension of imminent serious bodily injury to that person or to another, or to have engaged in behavior involving, but not limited to, threatening, striking, harassing, destroying personal property, or disturbing the peace of another, for which a court may issue an ex parte order pursuant to Section 6320 to protect the other party seeking custody of the child or to protect the child and the child's siblings.

(d) (1) For purposes of this section, the requirement of a finding by the court shall be satisfied by, among other things, and not limited to, evidence that a party seeking custody has been convicted within the previous five years, after a trial or a plea of guilty or no contest, of a crime against the other party that comes within the definition of domestic violence contained in Section 6211 and of abuse contained in Section 6203, including, but not limited to, a crime described in subdivision (e) of Section 243 of, or Section 261, 273.5, 422, or 646.9 of, or former Section 262 of, the Penal Code.
(2) The requirement of a finding by the court shall also be satisfied if a court, whether that court hears or has heard the child custody proceedings or not, has made a finding pursuant to subdivision (a) based on conduct occurring within the previous five years.

(e) When a court makes a finding that a party has perpetrated domestic violence, the court may not base its findings solely on conclusions reached by a child custody evaluator or on the recommendation of the Family Court Services staff, but shall consider any relevant, admissible evidence submitted by the parties.

(f) (1) It is the intent of the Legislature that this subdivision be interpreted consistently with the decision in Jaime G. v. H.L. (2018) 25 Cal.App.5th 794, which requires that the court, in determining that the presumption in subdivision (a) has been overcome, make specific findings on each of the factors in subdivision (b).
(2) If the court determines that the presumption in subdivision (a) has been overcome, the court shall state its reasons in writing or on the record as to why paragraph (1) of subdivision (b) is satisfied and why the factors in paragraph (2) of subdivision (b), on balance, support the legislative findings in Section 3020.

(g) In an evidentiary hearing or trial in which custody orders are sought and where there has been an allegation of domestic violence, the court shall make a determination as to whether this section applies prior to issuing a custody order, unless the court finds that a continuance is necessary to determine whether this section applies, in which case the court may issue a temporary custody order for a reasonable period of time, provided the order complies with Sections 3011 and 3020.

(h) In a custody or restraining order proceeding in which a party has alleged that the other party has perpetrated domestic violence in accordance with the terms of this section, the court shall inform the parties of the existence of this section and shall give them a copy of this section prior to custody mediation in the case.

Clear This Packet