

| TELEPHONE NO.: EMMIL ADDRESS (Common): Antitionery for (Memol): SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS MAY AD 20° CODE: BRANCH NAME: PETITIONER PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/PARTY: REQUEST FOR ROBER MODIFICATION Temporary Emergency Court Order Child Support Spousal Support Other (specify): Attorney Fees and Costs 1. TO (name): 2. A hearing on this Request for Order will be held as follows: If child custody or visitation is an issue in this proceeding, Family Code section 3170 requires mediation before or at the same time as the hearing (see item 7.) a. Date: Time: Dept.: Room.: b. Address of court same as noted above other (specify): 3. Attachments to be served with this Request for Order: a. A blank Responsive Declaration (form FL-320) b. Completed Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration FL-150) and a blank Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration (form FL-150) and a blank Financial Statement (Simplified) (form FL-150) and a blank Financial Statement (Simplified) (form FL-150) and a blank Financial Statement (Si | | ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): | FOR COURT USE ONLY | | | | | |
|--|---|--|---------------------------------|--|--|--|--|--|
| E-MAIL ADDRESS (Colorad): ATTORIVET FOR planel; SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS. GITY AND ZP CODE: BRANCH MANE: PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/PARTY: REQUEST FOR ORDER | | _ | | | | | | |
| E-MAIL ADDRESS (Gotter FOR (Plannet): SUPERIOR COURT OF CALIFORNIA, COUNTY OF SINER I ADDRESS: MAILING ADDRESS: MINING ADDRESS: MINING ADDRESS: CITY AND 2P CODE: SRANCH MAME: PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/PARTY: REQUEST FOR ORDER | | | | | | | | |
| E-MAIL ADDRESS (Optional): ATTORIEV FOR (Plamonic) SUPERIOR COURT OF CALIFORNIA, COUNTY OF SIRET ADDRESS: MAILING ADDRESS: MAILING ADDRESS: CITY AND 2P CODE: BRANCH MAME: PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/PARTY: REQUEST FOR ORDER | | | | | | | | |
| E-MAIL ADDRESS (plotend): ATTORIVEY FOR (planet): SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS. GITY AND ZP COOPE. BRANCH MAME: PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/PARTY: REQUEST FOR ORDER | | TELEPHONE NO.: FAX NO. (Optional): | | | | | | |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS MAINER ADDRESS MAINER ADDRESS CITY AND 2P CODE BRANCHMANE PETITIONER PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENTPARTY: REQUEST FOR ORDER Child Custody Child Support Spousal Support Child Custody Spousal Support Other (specify): 1. TO (name): 2. A hearing on this Request for Order will be held as follows: If child custody or visitation is an issue in this proceeding, Family Code section 3170 requires mediation before or at the same time as the hearing (see item 7.) a. Date: Time: Dept.: Room.: b. Address of court same as noted above other (specify): 3. Attachments to be served with this Request for Order: a. A blank Responsive Declaration (form FL-320) b. Completed Income and Expense Declaration (form FL-155) and a blank Financial Statement (Simplified) FL-150) and a blank Income and Expense Declaration Date: (IYPE OR PRINT NAME) COURT ORDER 4. YOU ARE ORDERED TO APPEAR INCOURT AT THE DATE AND TIME LISTED IN ITEM 2 TO GIVE ANY LEGAL REASON WHY THE ORDERS REQUESTED SHOULD NOT BE GRANTED. 5. Time for service hearing is shortened. Service must be on or before (date): 7. The parties are ordered to attend mandatory custody services as follows: 8. You are ordered to comply with the Temporary Emergency Court Orders (form FL-305) attached. | | | | | | | | |
| STREET ADDRESS: MAINEN ADDRESS: CITY AND 2P COBE: BRANCH NAME: PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/PARTY: REQUEST FOR ORDER | | ATTORNEY FOR (Name): | | | | | | |
| STREET ADDRESS: MAINING ADDRESS: CITY AND 2P CODE: BRANCH NAME: PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/PARTY: REQUEST FOR ORDER | • | SUPERIOR COURT OF CALIFORNIA. COUNTY OF | | | | | | |
| CITY AND ZIP CODE: BRANCH NAME: PETITIONER/PLANTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/PARTY: REQUEST FOR ORDER | | , , | | | | | | |
| PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/PARTY: REQUEST FOR ORDER | | | | | | | | |
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| OTHER PARENT/PARTY: REQUEST FOR ORDER | | PETITIONER/PLAINTIFF: | | | | | | |
| REQUEST FOR ORDER | | RESPONDENT/DEFENDANT: | | | | | | |
| Child Custody Visitation Spousal Support Other (specify): 1. TO (name): 2. A hearing on this Request for Order will be held as follows: If child custody or visitation is an issue in this proceeding, Family Code section 3170 requires mediation before or at the same time as the hearing (see Item 7.) a. Date: Time: Dept.: Room.: b. Address of court same as noted above other (specify): 3. Attachments to be served with this Request for Order: a. A blank Responsive Declaration (form FL-320) b. Completed Income and Expense Declaration (form FL-155) and a blank Financial Statement (Simplified) (form FL-155) and a blank Financial Statement (Simplified) FL-150) and a blank Income and Expense Declaration (form FL-155) and a uthorities e. Other (specify): Date: COURT ORDER Other (specify): Other (specify): COURT ORDER Other (specify): Other (specify): Time for service hearing is shortened. Service must be on or before (date): 7. The parties are ordered to attend mandatory custody services as follows: 8. You are ordered to comply with the Temporary Emergency Court Orders (form FL-305) attached. | | OTHER PARENT/PARTY: | | | | | | |
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| O Char (angoiful: | | 8. Let You are ordered to comply with the <i>Temporary Emergency Court Orders</i> (form FL-305) attained | ached. | | | | | |
| a. Land Outer (specify). | | 9. Other (specify): | | | | | | |
| | | | | | | | | |
| Date: | | | | | | | | |
| JUDICIAL OFFICER To the person who received this Peguest for Order: If you wish to respond to this Peguest for Order you must file a | 1 | | | | | | | |

To the person who received this Request for Order: If you wish to respond to this Request for Order, you must file a Responsive Declaration to Request for Order (form FL-320) and serve a copy on the other parties at least nine court days before the hearing date unless the court has ordered a shorter period of time. You do not have to pay a filing fee to file the Responsive Declaration to Request for Order (form FL-320) or any other declaration including an Income and Expense Declaration (form FL-150) or Financial Statement (Simplified) (form FL-155).

| | FL-300 |
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| PETITIONER/PLAINTIFF: | CASE NUMBER: |
| RESPONDENT/DEFENDANT: | |
| OTHER PARENT/PARTY: | |
| REQUEST FOR ORDER AND SUPPORTING DECLA | ARATION |
| Petitioner Respondent Other Parent/Party requests the follow | ing orders: |
| 1. CHILD CUSTODY a. Child's name and age b. Legal custody to (name of person who makes decisions about health, education, | c. Physical custody to (name of person with whom child will live) |
| d. As requested in form Child Custody and Visitation Application Atta Request for Child Abduction Prevention Ord Children's Holiday Schedule Attachment (for Additional Provisions—Physical Custody Atta Joint Legal Custody Attachment (form FL-34) Other (Attachment 1d) | ders (form FL-312) rm FL-341(C)) tachment (form FL-341(D)) |
| e. Modify existing order (1) filed on (date): (2) ordering (specify): | |
| 2. CHILD VISITATION (PARENTING TIME) To be ordered pendi | ng the hearing |
| a. As requested in: (1) Attachment 2a (2) Child Custody and Visite | ation Application Attachment (form FL-311) |
| (3) Other (specify): b. Modify existing order (1) filed on (date): (2) ordering (specify): | |
| c. One or more domestic violence restraining/protective orders are now in eff | fect. (Attach a copy of the orders if you |
| have one.) The orders are from the following court or courts (specify count | |
| · · · · · · · · · · · · · · · · · · · | ile: County/state: No. (if known): |
| | County/state: |
| () | No. (if known): |
| 3. CHILD SUPPORT (An earnings assignment order may be issued.) | |
| | enthly amount requested (if not by guideline) |
| d. Modify existing order (1) filed on (date): (2) ordering (specify): | |

Notice: The court is required to order child support based on the income of both parents. It normally continues until the child is 18. You must supply the court with information about your finances by filing an *Income and Expense Declaration* (form FL-150) or a *Financial Statement (Simplified)* (form FL-155). Otherwise, the child support order will be based on information about your income that the court receives from other sources, including the other parent.

| | FL-300 |
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| PETITIONER/PLAINTIFF: | CASE NUMBER: |
| RESPONDENT/DEFENDANT: OTHER PARENT/PARTY: | |
| 4. SPOUSAL OR PARTNER SUPPORT (An earnings assignment order may be iss | ued.) |
| a. Amount requested (monthly): \$ | Modify existing order |
| b. L Terminate existing order | (1) filed on (date): |
| (1) filed on (date): | (2) ordering (specify): |
| (2) ordering (specify): d. The Spousal or Partner Support Declaration Attachment (form FL-157) | is attached (for modification of annual or |
| partner support after judgment only) | is attached (for modification of spousal or |
| e. An Income and Expense Declaration (form FL-150) must be attached | |
| 5. ATTORNEY FEES AND COSTS are requested on Request for Attorney Fees and declaration that addresses the factors covered in that form. An Income and Experimental addresses the factors covered in that form must also be attached. | ense Declaration (form FL-150) must be |
| 6. PROPERTY RESTRAINT To be ordered pending the hearing | |
| a. The petitioner respondent claimant is restrained fror concealing, or in any way disposing of any property, real or personal, whethe separate, except in the usual course of business or for the necessities of life. | m transferring, encumbering, hypothecating, er community, quasi-community, or |
| The applicant will be notified at least five business days before any prand an accounting of such will be made to the court. | roposed extraordinary expenditures, |
| b. Both parties are restrained and enjoined from cashing, borrowing again changing the beneficiaries of any insurance or other coverage, included held for the benefit of the parties or their minor children. | |
| c. Neither party may incur any debts or liabilities for which the other may b ordinary course of business or for the necessities of life. | e held responsible, other than in the |
| 7. PROPERTY CONTROL To be ordered pending the hearing | |
| a. The petitioner respondent is given the exclusive temporary uproperty that we own or are buying (specify): | use, possession, and control of the following |
| b. The petitioner respondent is ordered to make the following pa | ayments on liens and encumbrances coming |
| Debt Amount of payment | Pay to |
| | |
| | |
| 8. OTHER RELIEF (specify): | |
| | |
| | |
| | |

NOTE: To obtain domestic violence restraining orders, you must use the forms *Request for Order* (Domestic Violence Prevention) (form DV-100), Temporary Restraining Order (Domestic Violence) (form DV-110), and Notice of Court Hearing (Domestic Violence) (form DV-109).

| | FL-30 |
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| PETITIONER/PLAINTIFF: | CASE NUMBER: |
| RESPONDENT/DEFENDANT: | |
| OTHER PARENT/PARTY: | |
| D. I request that time for service of the Request for Order and accompanying part be served no less than (specify number): days before the order shortening time because of the facts specified in item 10 or the attached O. FACTS IN SUPPORT of orders requested and change of circumstances for a Contained in the attached declaration. (You may use Attached Declara The attached declaration must not exceed 10 pages in length unless probtained from the court.) | time set for the hearing. I need to have this declaration. In modification are (specify): Ition (form MC-031) for this purpose. |
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| declare under penalty of perjury under the laws of the State of California that the foreg | oing is true and correct. |
| pate: | - |
| <u> </u> | |
| (TYPE OR PRINT NAME) | (SIGNATURE OF APPLICANT) |



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.)

| | FL-311 |
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| PETITIONER/PLAINTIFF: | CASE NUMBER: |
| RESPONDENT/DEFENDANT: | |
| CHILD CUSTODY AND VISITATION AF | PPLICATION ATTACHMENT |
| TO Petition, Response, Application for Order or Re | • |
| To be ordered now and effective until the heari | ng |
| | |
| 1. Large Custody. Custody of the minor children of the parties is request | |
| Child's Name Date of Birth Legal Custody to (person who may health, education) | kes decisions about (person with whom the child lives) |
| violence) b. See the attachedpage document dated (spc. The parties will go to mediation at (specify location): d. No visitation e. Visitation for the petitioner respondent (1) Weekends starting (date): (The first weekend of the month is the first 1st 2nd 3rd 4t | will be as follows: weekend with a Saturday.) th 5th weekend of the month a.m p.m. ime) a.m p.m. th weekends, with the petitioner respondent which starts (date): |
| · | will have the children with him or her during the period |
| from at at at to at at at (day of week) at at (time) (3) Weekdays starting (date): | |
| The petitioner respondent | t will have the children with him or her during the period a.m p.m. me) |
| toatat(time, | |
| (4) Other (specify days and times as well as a | any additional restrictions): |

| | PETIT | IONER: | CASE NUMBER: | |
|--------|-------|--|--|-----|
| RE | ESPO | NDENT: | | |
| 3. | | schedule set out on page 1 and that the visits be supervised by (name): | ion with the minor children according to or's phone number is (specify): | the |
| | | I request that the costs of supervision be paid as follows: petitioner: per lif item 3 is checked, you must attach a declaration that shows why unsupervised children. The judge is required to consider supervised visitation if one pareity protected by a restraining order. | - | |
| 4. | | Transportation for visitation and place of exchange. a. | - | |
| 5. | | Travel with children. The petitioner respondent other (note must have written permission from the other parent or a court order to take the children a the state of California. b the following counties (specify): c other places (specify): | , | |
| 6. | | Child abduction prevention. There is a risk that one of the parents will take the operant's permission. I request the orders set out on attached form FL-312. | children out of California without the othe | er |
| 7. | | Children's holiday schedule. I request the holiday and visitation schedule set ou other (specify): | t on the attached form FL-341(| C) |
| 8. | | Additional custody provisions. I request the additional orders regarding custody form FL-341(D) other (specify): | set out on the attached | |
| 9. | | Joint legal custody provisions. I request joint legal custody and want the addition form FL-341(E) other (specify): | onal orders set out on the attached | |
| 10. | | Other. I request the following additional orders (specify): | | |

YOU HAVE CHOICES FOR CUSTODY AND VISITATION

Sometimes, you need to have very specific rules about how to make parenting work. In those cases, you can ask for <u>extra</u> <u>orders</u> from the Court to help make it work.

You may purchase the forms at the court or download the forms at www.courts.ca.gov/forms.

Specific Holiday Visits (form FL-341(C)

Control Over the Children (form FL-341(D)

Notification of new address

Child care arrangement

Canceling visitation

Phone contact with child

No negative comments

No alcohol or drugs before/during visits

No smokina

Don't interfere with schedule

Keeping child away from third parties

Etc. . .

Joint Custody Decisions (form FL-341(E)

Who has the power to do what?

School

Religion

Medical Care

Notification from school or doctor

Extracurricular Activities

Etc. . .

| | MC-031 |
|-----------------------|--------------|
| PLAINTIFF/PETITIONER: | CASE NUMBER: |
| DEFENDANT/RESPONDENT: | |



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): | | | | | |

| | | | | | 1 L-103/00-120 |
|-----------------------------|---|-----------------|-------------------------------|----------------------------------|---------------------|
| ATTORNEY OR PARTY WITHOUT | ATTORNEY (Name, State Bar number, and ad | ddress): | | FOR COURT US | E ONLY |
| - | | | | | |
| | | | | | |
| TELEPHONE NO.: | FAX NO. (Or | otional): | | | |
| E-MAIL ADDRESS (Optional): | 170010. (6) | ononary. | | | |
| ATTORNEY FOR (Name): | | | | | |
| SUPERIOR COURT OF | CALIFORNIA, COUNTY OF | | | | |
| STREET ADDRESS: | | | | | |
| MAILING ADDRESS: | | | | | |
| CITY AND ZIP CODE: | | | | | |
| BRANCH NAME: | | | | | |
| PETITIONER: | (This section applies only to fam | ily law cases.) | | | |
| RESPONDENT: | | | | | |
| OTHER PARTY: | | | | | |
| 01112111111111 | (This section apples only to guar | dianship cases | s.) | CASE NUMBER: | |
| GUARDIANSHIP OF (Name): | (| , | Minor | | |
| | | | Willion | | |
| | TION UNDER UNIFORM (| | | | |
| JURISDIC | TION AND ENFORCEMEN | T ACT (U | CCJEA) | | |
| 1. I am a party to this pro | ceeding to determine custody | of a child. | | | |
| 2. My present addr | ess and the present address o | f each child | d residing with me is co | onfidential under Family Co | ode section 3429 as |
| I have indicated | • | | , . | , | |
| 3. There are (specify num | ber): minor chi | Idren who a | are subject to this proc | eeding, as follows: | |
| (Insert the information | n requested below. The resid | lence info | rmation must be give | n for the last FIVE years. |) |
| a. Child's name | | Place of birth | h | Date of birth | Sex |
| | | | | | |
| Period of residence | Address | • | Person child lived with (nan | ne and complete current address) | Relationship |
| | | | | | |
| to present | Confidential | | Confidential | | |
| | Child's residence (City, State) | | Person child lived with (nan | ne and complete current address) | |
| | | | | | |
| to | | | | | |
| | Child's residence (City, State) | | Person child lived with (nan | ne and complete current address) | |
| to | | | | | |
| to | Child's residence (City, State) | | Derson shild lived with (non | and complete everyont address. | |
| | Critical residence (City, State) | | Person child lived with (nan | ne and complete current address) | |
| to | | | | | |
| b. Child's name | <u> </u> | Place of birth | 1n | Date of birth | Sex |
| | | | | | |
| | the same as given above for child a. | | | | |
| Period of residence | le the information below.) Address | 1 | Person child lived with /non | ne and complete current address) | Relationship |
| . Show of residence | | | i cison diliu liveu with (nar | пе апи сотірієте сипепі address) | . totationomp |
| to present | Confidential | | Confidential | | |
| · | Child's residence (City, State) | | | ne and complete current address) | |
| | (, | | | | |
| to | | | | | |
| | Child's residence (City, State) | | Person child lived with (nar | me and complete current address) | |
| | | | | | |
| to | | | | | |
| | Child's residence (City, State) Person child lived with (na | | Person child lived with (nar | me and complete current address) | |
| | | | | | |
| to | | | | | |
| c. Additional resid | ence information for a child list | ed in item a | a or b is continued on a | attachment 3c. | |
| d. Additional child | en are listed on form <i>FL-105(A</i> | A)/GC-120(| A). (Provide all reques | ted information for addition | al children.) |

Page 1 of 2

DECLARATION UNDER UNIFORM CHILD CUSTODY
JURISDICTION AND ENFORCEMENT ACT (UCCJEA)

NOTICE TO DECLARANT: You have a continuing duty to inform this court if you obtain any information about a custody

proceeding in a California court or any other court concerning a child subject to this proceeding.

| | FL-105(A)/GC | -120(A) |
|------------|--------------|---------|
| CASE NAME: | CASE NUMBER: | |
| - | | |
| | | |

ATTACHMENT TO DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCC.

| | | Place of birth | 1 | Date of birth | Sex |
|---|---|------------------|---------------------------------|--------------------------------|--------------|
| Child's name | | l idoo oi biitti | • | 2000 01 01101 | Jex |
| | is the same as given on form d a. (If NOT the same, provide the | | | | |
| Period of residence | Present address | | Person child lived with (name a | and complete current address) | Relationship |
| | | | | | |
| to present | Confidential | | Confidential | | |
| to present | Child's residence (City, State) | | Person child lived with (name a | and complete current address) | |
| | omina o residence (eng), enaile) | | · | , | |
| to | | | | | |
| | Child's residence (City, State) | | Person child lived with (name a | and complete current address) | |
| to | | | | | |
| | Child's residence (City, State) | | Person child lived with (name a | and complete current address) | |
| | Similar recorded to the foliates | | | I zampioto danoni dadioodj | |
| to | | | | | |
| Child's name | | Place of birth | 1 | Date of birth | Sex |
| | is the same as given on form | | | | |
| FL-105/GC-120 for chile information below.) | d a. (If NOT the same, provide the | | | | |
| Period of residence | | | Person child lived with (name a | and complete current address) | Relationship |
| | <u> </u> | | | | |
| to present | Confidential | | Confidential | | |
| | Child's residence (City, State) | | Person child lived with (name | and complete current address) | |
| to | | | | | |
| | Child's residence (City, State) | | Person child lived with (name | and complete current address) | |
| | | | | | |
| to | | | | | |
| | Child's residence (City, State) | | Person child lived with (name | and complete current address) | |
| to | | | | | |
| | | Place of birth | <u> </u> | Date of birth | Sex |
| Child's name | is the same as given on form | | | | |
| | d a. (If NOT the same, provide the | | | | |
| Period of residence | Address | | Person child lived with (name | and complete current address) | Relationship |
| | Confidential | | Confidential | | |
| to present | Confidential Child's residence (City, State) | | | and complete current address) | |
| | Simula radiation (dity, diate) | | 1 1.551. Sima myod Willi (namo | somplete carroin addition | |
| to | | | | | |
| | Child's residence (City, State) | | Person child lived with (name | and complete current address) | |
| , | | | | | |
| to | Child's residence (City, State) | | Porcon child lived with /name | and complete current address) | |
| 1 | Orma's residence (Oity, State) | | i erson criliu liveu with (name | and complete culterit addless) | |
| to | | | | | |
| | | | · | | |



SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO

REFERRAL FOR CII/DVROS/ICMS REPORT

| Case Number | Date Referred | Department Re | eferring | Date Report Due | Report to Department | | | |
|-------------------------|---|---------------|---------------------------|----------------------------------|-------------------------------------|--|--|--|
| Petitioner Name: | 1 | | Responde | ent Name: | <u> </u> | | | |
| Petitioner: (Please ma | | | | ent: (please mark one) Female | | | | |
| Petitioner AKAs, if an | y: | | Respondent AKAs, if any: | | | | | |
| Petitioner Date of Birt | h: | | Respondent Date of Birth: | | | | | |
| Petitioner SSN: | | | Respondent SSN: | | | | | |
| COURT ORDER: | | | | | | | | |
| | | _ | | _ | (CLETS) history Code 6306 and/or | | | |
| - | Rule of Court | | () [- | | | | | |
| ■ This matte | er is referred to | Family Law | Process | ing for a search | of the Superior | | | |
| Court of C | alifornia, Cour | nty of San Be | rnardino | Integrated Case | Management | | | |
| - | System for a history report regarding existing custody and visitation orders pursuant to CRC 5.450. | | | | | | | |
| Notes: | Notes: | | | | | | | |
| ್ತೆ Special Order: | | | | | | | | |
| | | | | | | | | |

Form A

TIPS ON SERVING DOCUMENTS

What is service?

Service is giving notice to the other party that a case has been started or that a step is being taken in the case. A person at least 18 years of age or older who is not a party to the case must serve the documents. There are two ways to serve documents: (1) personal delivery and (2) by mail. The person who serves the documents must complete a proof of service form for the documents being served.

YOU CANNOT SERVE YOUR OWN DOCUMENTS.

Why is service important?

Cases cannot be decided fairly unless everyone who has the right to know:

- is aware that a court case is going on;
- is aware that a step in a case is going to happen; and
- has enough time to put their own side of the story before the court.

When do I serve my documents?

After the Request for Order has been filed, you must have the other party served at least sixteen (16) court days (do not include the weekends when you are counting your 16 days) before the scheduled hearing.

How is service completed?

How your documents are served depends on whether or not you are asking the court to change a permanent order or a temporary order, or whether you are the court to order the other party to appear at the hearing.

A temporary order is any order made before a judgment in your case has been entered. If you are asking the court to change a temporary order you must have the other party served in person. If you are asking the court to change a permanent order you can serve the other party by mail.

You can ask the court to order the other party to appear at the hearing, this is done on the first page of the Request for Order, page 1, #4. IF YOU ARE THE ASKING THE COURT TO ORDER THE OTHER PARTY TO APPEAR AT THE HEARING THEY MUST BE SERVED IN PERSON – NO EXCEPTIONS!

Personal service means that someone NOT A PARTY, to the case must personally deliver the documents to the other party. They can serve them at their home, work or anywhere on the street. The original completed *Proof of Personal Service, Form No. FL-330* is filed with the court.

Service by mail means that someone, NOT A PARTY to the case mails the documents to the other party's home or mailing address. To serve a party by mail you must complete the *Declaration Regarding Address Verification —Post Judgment Request, Form No. FL-334.* The completed form will be attached to your original completed *Proof of Service by Mail, Form No. FL-335* and filed with the court.

Are there restrictions on who can serve documents?

A person who serves a document in a family case must be at least 18 years old and not a party to the action.

| | FL-33(|
|---|--|
| 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.: | |
| ATTORNEY FOR (Name): | |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF | |
| STREET ADDRESS: | |
| MAILING ADDRESS: | |
| CITY AND ZIP CODE: | |
| BRANCH NAME: PETITIONER/PLAINTIFF: | CASE NUMBER: |
| FETHOREN FLAINTIIT. | S. ISE NOMBER. |
| RESPONDENT/DEFENDANT: | |
| NEOF ONDERVINDER ENDINGS. | (If applicable, provide): |
| OTHER PARENT/PARTY: | HEARING DATE: |
| DDOOF OF DEDOONAL OFFINIOR | HEARING TIME: |
| PROOF OF PERSONAL SERVICE | DEPT.: |
| 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: | |
| | |
| | |
| F. Lom | |
| 5. I am a not a registered California process server. d exempt from r | registration under Business & Profession |
| b. a registered California process server. Code section 2 | |
| | neriff or marshal. |
| registered California process server. | |
| 6. My name, address, and telephone number, and, if applicable, county of registration a | and number (specify): |
| | |
| | |
| | |
| | |
| 7. I declare under penalty of perjury under the laws of the State of California that the | |
| 8. Lam a California sheriff or marshal and I certify that the foregoing is true and co | prrect. |
| Data | |
| Date: | |
| k | |
| | |
| (TYPE OR PRINT NAME OF PERSON WHO SERVED THE PAPERS) (SIGN | IATURE OF PERSON WHO SERVED THE PAPERS) |

| ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): | FOR COURT USE ONLY |
|---|---|
| _ | |
| | |
| | |
| | |
| TELEPHONE NO.: FAX NO. (Optional): | |
| E-MAIL ADDRESS (Optional): | |
| ATTORNEY FOR (Name): | |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF | |
| STREET ADDRESS: | |
| MAILING ADDRESS: | |
| CITY AND ZIP CODE: BRANCH NAME: | |
| DIVINOIT INTINE. | CASE NUMBER: |
| PETITIONER/PLAINTIFF: | CASE NUMBER. |
| RESPONDENT/DEFENDANT: | W 5 11 11 11 11 11 11 11 11 11 11 11 11 1 |
| | (If applicable, provide): HEARING DATE: |
| OTHER PARENT/PARTY: | HEARING TIME: |
| PROOF OF SERVICE BY MAIL | |
| | DEPT.: |
| NOTICE: To serve temporary restraining orders you must use perso | nal service (see form FL-330). |
| | |
| I am at least 18 years of age, not a party to this action, and I am a res place. | ident of or employed in the county where the mailing took |
| 2. My residence or business address is: | |
| | |
| I served a copy of the following documents (specify): | |
| J | |
| | |
| by enclosing them in an envelope AND | |
| a. depositing the sealed envelope with the United States Posta | al Service with the postage fully prepaid. |
| b. placing the envelope for collection and mailing on the date a | |
| business practices. I am readily familiar with this business's p | |
| business with the United States Postal Service in a sealed en | collection and mailing, it is deposited in the ordinary course of nvelope with postage fully prepaid. |
| 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): | |
| • — | |
| I served a request to modify a child custody, visitation, or child address verification declaration. (Declaration Regarding Address | ss Verification—Postjudgment Request to Modify a Child |
| Custody, Visitation, or Child Support Order (form FL-334) may | |
| I declare under penalty of perjury under the laws of the State of Califo | rnia that the foregoing is true and correct. |
| Date: | |
| (TYPE OR PRINT NAME) | (SIGNATURE OF PERSON COMPLETING THIS FORM) |
| | Page 1 of 1 |



| ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): | FOR COURT USE ONLY |
|--|---|
| _ | |
| | |
| | |
| | |
| TELEPHONE NO.: FAX NO. (Optional): | |
| E-MAIL ADDRESS (Optional): | |
| ATTORNEY FOR (Name): | |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF | |
| STREET ADDRESS: | |
| MAILING ADDRESS: | |
| CITY AND ZIP CODE: | |
| BRANCH NAME: | |
| PETITIONER/PLAINTIFF: | |
| FEITHONER/FLAINTIIT. | |
| RESPONDENT/DEFENDANT: | |
| | |
| OTHER PARENT/PARTY: | |
| DECLARATION REGARDING ADDRESS VERIFICATION— | CASE NUMBER: |
| POSTJUDGMENT REQUEST TO MODIFY A CHILD CUSTODY, | |
| VISITATION, OR CHILD SUPPORT ORDER | |
| , , , , , , , , , , , , , , , , , , , | |
| 1. I am the attorney for petitioner respondent other paren | t other party in this matter. |
| 2. The request is to modify a judgment or permanent order only for child suppor | t and a local child support agency is |
| providing services in the case. Service of the request solely to modify child support | |
| the local child support agency at least 30 days prior to the hearing as provided in Fa | mily Code sections 17404(e)(3) and |
| 17406(f). | |
| 3. The request is to modify a judgment or permanent orders for child custody, vis | sitation, or child support. |
| Note: If you cannot verify the other party's current residence or office address, mail | |
| must be personally served. Proof of Personal Service (form FL-330) may be used for | r this purpose. |
| a. Before the request was served on the other party by mail, I verified in the previous | us 30 days that the other party's current |
| current residence or office address is (specify): | |
| | |
| b. I can confirm that the above address is the other party's current residence or c | office address because (specify): |
| (1) I contacted the other party directly within the past 30 days and he or sh | |
| | _ |
| (2) I have been at that address in connection with a custody and visitation | |
| (3) It is the new address that the other party provided on Notice of Change pleading and filed with the court on (specify date): | e of Address (form MC-040) or other |
| (4) It is the office address that he or she last gave on a document filed with | h the court in this case which was also |
| served on me as a party in the case. | |
| (5) I sent the other party a letter by mail to the address in (2) with return re | eceipt requested and the other party signed |
| and accepted the letter at that address within the past 30 days. | |
| (6) I confirmed by another method (specify): | |
| Continued in Attachment 3b(6). | |
| | |
| I declare under penalty of perjury under the laws of the State of California that the foregoing | and all attachments are true and correct. |
| Date: | |
| | |
| (TYPE OR PRINT NAME) (SIGNATUF | RE OF PERSON COMPLETING THIS FORM) |

www.courts.ca.gov

| PETITIONER/PLAINTIFF: | CASE NUMBER: |
|-----------------------|--------------|
| RESPONDENT/DEFENDANT: | |
| OTHER PARTY: | |
| OTHER PARTY. | |

NOTICE AND SERVICE INFORMATION

If you want to change a judgment or permanent order for child custody, visitation, or child support, a person at least 18 years of age or older must serve the request on the other party by (1) personal delivery or (2) first-class mail or airmail, postage prepaid. Requests to modify a judgment or permanent order for matters other than child custody, visitation, or child support must be served on the other party by personal service.

- If your request is to change a judgment or permanent orders only for child support and a local child support agency is currently providing services, the other party may be served by mail at the office of the local child support agency. Where service is made by mail on the local child support agency, the following apply:
 - 1. The local child support agency must be served not less than 30 days before the hearing date.
 - 2. Attach a copy of this completed form to the proof of service by mail; and
 - 3. File this original form at the court clerk's office.
- If your request is to change a judgment or permanent order for child custody, visitation, or child support and you have verified the other party's current residence or office address, you must:
 - 1. Complete this form to provide the other party's current residence or business address and indicate how you obtained the other party's current residence or office address.
 - 2. Attach a copy of this completed form to the proof of service by mail; and
 - 3. File this original form at the court clerk's office.
- If you cannot verify the other party's current residence or office address, mail service may not be used. The other party must be personally served. *Proof of Personal Service* (form FL-330) may be used for this purpose.

New Requirement:

After getting court date from clerk and then serving on the other person, you must contact the other person to see if you can settle your issues

✓MEET AND CONFER

Starting January 01, 2013, California Rules of Court Rule 5.98 requires that all parties shall meet and confer in person, or by telephone, or as ordered by the Court, **before** the date of the hearing when a party filed a Request For Order (form FL-300).

During the meet and confer process, the parties must discuss and make a good faith attempt to settle all issues. If a complete settlement is not possible, a conditional agreement can be made. The meet and confer requirement does not apply to cases that involve domestic violence.

<u>Custody Mediation:</u> If your court date involves custody and/ or visitation, then you have obeyed this requirement with your Family Court Services counseling.

✓ DOCUMENT EXCHANGE

Before the hearing or while you are meeting, parties must exchange all evidence that will be presented at the hearing. At the hearing, the Court may decline to consider documents that were not given to the other party before the hearing as required under this rule. However, the requirement for exchange of documents does not apply to evidence that contradicts the other person's evidence or questions the other person's credibility.

HOW DO I COMPLY WITH THESE RULES?

After filing your Request For Order for child support, spousal support, or anything else that does not involve child custody or visitation, you must contact the other party or their attorney listed on their case, to discuss the issues stated on your court forms. Your options are to set up a meeting in person or by telephone **BEFORE the court hearing**. This is your "settlement" meeting.

[If your case includes child custody or visitation and you will be attending mediation with Family Court Services; you will talk to the other party at that time.]

During the settlement meeting, explain to the other party what the issues are, and how you think the issues can be resolved. Also, ask the other party for their opinion. Try to reach a compromise. If you are not able to reach an agreement on all of the issues, you can try to reach an agreement on some of the issues.

Additionally, during your meeting or at any time before your court date, you must exchange all of your evidence with each other. Some examples of such evidence could be declarations written under penalty of perjury by third parties, pictures, emails, lab test results, school records, credit card statements, mortgage documents, bank records, and medical records. (Your Proof)

When the Judge calls your case you can inform the Judge that you met with the other party before the hearing and whether you have an agreement, a partial agreement or no agreement.

Next Steps



Follow these simple steps in order to successfully proceed with your case.

Right after this page you will find the blank forms which are required to be served on the other party. The blank forms cannot be filled out on the computer. Do not write on them. Do not copy them – they are to be served on the party as blank forms.

☆ Review

After you have completed your forms and printed everything out (including blanks), bring them to the Resource Center to have them reviewed. It is important to follow this step because our staff has been trained to review these forms and help you make any necessary changes.

☆ Copy

After you have had your forms reviewed you will need to make (2) copies of your corrected originals.

☆ File

Take the original paperwork and your copies to the courthouse where you case is handled. The clerk will assign you a court date to see the Judge. You will need to pay the court fees. See the Fee Schedule on the Court's Website to find the correct fee. If you cannot afford to pay the fee, you may request a fee waiver by submitting the Request for Fee Waiver forms. (formkit available) Fees can be paid by cash/check/credit card.

☆ Serve

You will need to have the other party served with a copy of your documents after you file with the court clerk. Your server person must complete the Proof of Service form. If you need more information about service, you can visit your local Resource Center.

File Proof of Service form at the clerk's office.

Service must be finished at least 16 court days prior to your hearing date.



Do not write on the papers below!!!!

This is the BLANK paperwork you are required to have served on the other party.

What gets served:

- 1. Copy of papers you filled out
- 2. Blank sheets (following this sheet)

| ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): | FOR COURT USE ONLY |
|--|--------------------|
| | |
| | |
| | |
| | |
| TELEPHONE NO.: FAX NO. (Optional): | |
| E-MAIL ADDRESS (Optional): | |
| ATTORNEY FOR (Name): | |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF | |
| STREET ADDRESS: | |
| MAILING ADDRESS: | |
| CITY AND ZIP CODE: | |
| BRANCH NAME: | <u> </u> |
| PETITIONER/PLAINTIFF: | |
| | |
| RESPONDENT/DEFENDANT: | |
| | |
| OTHER PARTY: | |
| | |
| RESPONSIVE DECLARATION TO REQUEST FOR ORDER | CASE NUMBER: |
| | |
| HEARING DATE: TIME: DEPARTMENT OR ROO | DM: |
| | |
| 1. CHILD CUSTODY | |
| a. Laconsent to the order requested. | |
| b. I do not consent to the order requested, but I consent to the following | g order: |
| | |
| | |
| 2. CHILD VISITATION (PARENTING TIME) | |
| a. I consent to the order requested. | |
| b. I do not consent to the order requested, but I consent to the following | a order: |
| b ruo not concent to the order requested, but i concent to the following | g Graci. |
| | |
| | |
| 3. CHILD SUPPORT | |
| a. I consent to the order requested. | |
| b. I consent to guideline support. | |
| c. I do not consent to the order requested, but I consent to the following | g order: |
| (1) Guideline | |
| (2) Other (specify): | |
| | |
| | |
| | |
| | |
| 4. SPOUSAL OR PARTNER SUPPORT | |
| a. I consent to the order requested. | |
| b. I do not consent to the order requested. | |
| c. I consent to the following order: | |
| Consent to the following order. | |

| | CASE NUMBER: |
|--|---|
| PETITIONER/PLAINTIFF: | - |
| RESPONDENT/DEFENDANT: | |
| OTHER PARTY: | |
| 5. ATTORNEY'S FEES AND COSTS a. I consent to the order requested. b. I do not consent to the order requested. c. I consent to the following order: | |
| 6. PROPERTY RESTRAINT a. I consent to the order requested. b. I do not consent to the order requested. c. I consent to the following order: | |
| 7. PROPERTY CONTROL a. I consent to the order requested. b. I do not consent to the order requested. c. I consent to the following order: | |
| 8. OTHER RELIEF a. I consent to the order requested. b. I do not consent to the order requested. c. I consent to the following order: | |
| 9. SUPPORTING INFORMATION Contained in the attached declaration. (You may use <i>Attached Declaration</i> (for | orm MC-031) for this purpose). |
| | |
| NOTE: To respond to domestic violence restraining orders requested in the <i>Request for O</i> (form DV-100), you must use the <i>Answer to Temporary Restraining Order (Domestic Viole</i> | |
| I declare under penalty of perjury under the laws of the State of California that the foregoing Date: | and all attachments are true and correct. |
| (TVDE OD DDINT NAME) | (SIGNATURE OF DECLADANT) |

| | | | | | | L-105/GO-120 |
|------------------------------|--|-------------------|---------------------|--------------|-------------------------------|--------------|
| ATTORNEY OR PARTY WITHOUT A | TTORNEY (Name, State Bar number, and add | lress): | | | FOR COURT USE ONL | 1 |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TELEPHONE NO.: | FAX NO.(Option | nal): | | | | |
| E-MAIL ADDRESS (Optional): | | | | | | |
| ATTORNEY FOR (Name): | | | | | | |
| SUPERIOR COURT OF | CALIFORNIA, COUNTY OF | | | | | |
| STREET ADDRESS: | | | | | | |
| MAILING ADDRESS: | | | | | | |
| CITY AND ZIP CODE: | | | | | | |
| BRANCH NAME: | (This section applies only to family | v law cases) | | - | | |
| PETITIONER: | (This section applies only to family | (law cases.) | | | | |
| RESPONDENT: | | | | | | |
| OTHER PARTY: | | | | | | |
| | (This section applies only to guard | dianship cases.) | | CASE NUN | IBER: | |
| GUARDIANSHIP OF (Name): | | | Minor | | | |
| DECLARA | TION UNDER UNIFORM C | HILD CUSTO | DY | | | |
| | TION AND ENFORCEMENT | | EA) | | | |
| | eeding to determine custody of | | | | | |
| | s and the present address of e | ach child resid | ing with me is o | confidenti | al under Family Code sect | on 3429 as |
| I have indicated in | | maina a malalua | | | | |
| 3. There are (specify numb | er): requested below. The reside | | - | | proceeding, as follows: | |
| a. Child's name | requested below. The reside | Place of birth | on must be giv | ren ioi ti | Date of birth | Sex |
| a. Child's hame | | Place of billin | | | Date of birtin | Sex |
| Period of residence | Address | | Person child lived | with (name | and complete current address) | Relationship |
| | | | | • | | · |
| to present | Confidential | | Confiden | ntial | | |
| | Child's residence (City, State) | | Person child lived | with (name | and complete current address) | |
| | | | | | | |
| to | | | | | | |
| | Child's residence (City, State) | | Person child lived | with (name | and complete current address) | |
| 1- | | | | | | |
| to | Child's residence (City, State) | | Porson shild lived | with (name | and complete current address) | |
| | Critic's residence (City, State) | | reison child lived | with (Hairie | and complete current address) | |
| to | | | | | | |
| b. Child's name | | Place of birth | L | | Date of birth | Sex |
| | | | | | | |
| Residence information is | the same as given above for child a. | | | | | |
| Period of residence | Address | | Person child lived | with (name | and complete current address) | Relationship |
| r enou or residence | Address | | l erson crina livea | with (name | and complete current address) | Helationship |
| to present Confidential Conf | | | Confiden | ntial | | |
| | Child's residence (City, State) | | + | | and complete current address) | |
| | | | | • | | |
| to | | | | | | |
| | Child's residence (City, State) Person child liv | | | with (name | and complete current address) | |
| | | | | | | |
| to | | | ļ | | | |
| | Child's residence (City, State) | | Person child lived | with (name | and complete current address) | |
| 1- | | | | | | |
| to | | | | | | |
| c. Additional residence | ce information for a child listed | in item a or b is | s continued on | attachme | ent 3c. | |

d. Additional children are listed on form *FL-105(A)/GC-120(A)*. (Provide all requested information for additional children.)

Page 1 of 2

| SHORT TITLE: | | | | | | | CASE | NUMBER: | | | |
|---|----------------|-------------|--------------------------------------|---|----------|------------|-----------|---|----------------------|-------------------|-----------|
| 4. Do you have information or custody or visitation Yes No | n proceeding | , in Califo | | re, cond | cerning | a child s | ubject to | this prod | ceeding | ı? | ourt case |
| Proceeding | Case num | nber (n | Court Court order or judgment (date) | | Name | of each | child | Your connection to the case | Case statu | | |
| a. | | | | | | | | | | | |
| b. Guardianship | | | | | | | | | | | |
| c. Other | | | | | | | | | | | |
| Proceeding | | | Case Number | | | | Co | ourt <i>(nam</i> | ne, state | e, location) | |
| d. Juvenile Deling Juvenile Deper | - | | | | | | | | | | |
| e. Adoption | | | | | | | | | | | |
| 5. One or more do and provide the | | | | orders | are now | in effect | t. (Attac | h a copy | of the c | orders if you hav | e one |
| Court | | С | ounty | Stat | te | Case | number | (if known | Orders expire (date) | | |
| a. Criminal | | | | | | | | | | | |
| b. | | | | | | | | | | | |
| c. Juvenile Deling Juvenile Deper | - | | | | | | | | | | |
| d. Other | | | | | | | | | | | |
| 6. Do you know of any p visitation rights with a | | | ty to this proced | | | | | | | | |
| a. Name and address of person b. Name and address of person c. Name and address of person | | | | | n | | | | | | |
| Has physical custody Claims custody rights Claims visitation rights | | | Clair | Has physical custody Claims custody rights Claims visitation rights | | | | Has physical custody Claims custody rights Claims visitation rights | | | |
| | | | Name of eac | | | | | | | | |
| l declare under penalty of Date: | of perjury und | ler the law | vs of the State o | of Califo | rnia tha | t the fore | egoing is | s true and | d correc | t. | |
| | YPE OR PRINT N | NAME) | | _ |) | | (| SIGNATURE | E OF DEC | CLARANT) | |
| 7. Number of pages NOTICE TO DECLA | | nave a co | ntinuing duty | to infor | m this | court if v | you obta | ain any ir | nforma | tion about a cu | ıstody |

JURISDICTION AND ENFORCEMENT ACT (UCCJEA)

CONFIDENTIAL SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO

REFERRAL FOR CII/DVROS/ICMS REPORT

| Case Number | Date Referred | Department Refe | rring Date Report Due | Report to Department | | | |
|--|---|--|---|----------------------|--|--|--|
| Petitioner Name: | | | nt Name: | | | | |
| Petitioner: (Please mark one) Male Female | | Responde Male | nt: (Please mark one) Female | | | | |
| Petitioner AKAs, if any: | | Responde | ent AKAs, if any: | | | | |
| Petitioner Date of Birth: | | Responde | nt Date of Birth: | | | | |
| Petitioner SSN: | | | Respondent SSN: | | | | |
| This matter is referred to Far History Inquiry (CII) pursuan This matter is referred to Far County of San Bernardino In custody and visitation order. Notes: | t to Family Code 6 mily Law Processi tegrated Case Ma | 306 and/or Califoring for a search of the sagement System in | nia Rule of Court 5.450 he Superior Court of C | California, | | | |

Form A

This form is required with any filing where Child Custody and Visitation Orders are at issue and in all Domestic Violence Restraining Order Requests.
CONFIDENTIAL



| А | TTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): | FOR COURT USE ONLY | | | |
|----|--|--|--|--|--|
| | | | | | |
| | | | | | |
| | | | | | |
| | TELEPHONE NO.: FAX NO. (Optional): | | | | |
| E | -MAIL ADDRESS (Optional): | | | | |
| | ATTORNEY FOR (Name): | | | | |
| 5 | SUPERIOR COURT OF CALIFORNIA, COUNTY OF | | | | |
| | STREET ADDRESS: | | | | |
| | MAILING ADDRESS: | | | | |
| | CITY AND ZIP CODE: | | | | |
| _ | BRANCH NAME: PETITIONER/PLAINTIFF: | CASE NUMBER: | | | |
| | TETTIONELVI EAINTIIT. | CASE NOWIDEN. | | | |
| F | RESPONDENT/DEFENDANT: | | | | |
| | | (If applicable, provide): | | | |
| | OTHER PARENT/PARTY: | HEARING DATE: | | | |
| | PROOF OF SERVICE BY MAIL | HEARING TIME: | | | |
| | | DEPT.: | | | |
| NC | TICE: To serve temporary restraining orders you must use personal service (see for | rm 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 place. | d in the county where the mailing took | | | |
| 2. | My residence or business address is: | | | | |
| | , 1001001100 01 00011000 0001100 | | | | |
| | | | | | |
| | | | | | |
| 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 p | ostage fully prepaid. | | | |
| | b. placing the envelope for collection and mailing on the date and at the place sho | | | | |
| | business practices. I am readily familiar with this business's practice for collecting | • • • | | | |
| | mailing. On the same day that correspondence is placed for collection and mailing. | | | | |
| | business with the United States Postal Service in a sealed envelope with postag | e 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 | | | | |
| | address verification declaration. (Declaration Regarding Address Verification—Post, | | | | |
| | Custody, Visitation, or Child Support Order (form FL-334) may be used for this purp | ose.) | | | |
| 6. | I declare under penalty of perjury under the laws of the State of California that the forego | ing is true and correct | | | |
| ٥. | . accided and a portary of porjary and a trio laws of the oracle of camornia that the forego | ing is the and someth | | | |
| Da | te: | | | | |
| | \ | | | | |
| | (TYPE OR PRINT NAME) (SIGNAT | URE OF PERSON COMPLETING THIS FORM) | | | |
| | (SIGNAL) | Page 1 of 1 | | | |