Print These Forms

Clear These Forms

Superior Court of California
County of Riverside
Family Law Default Judgment Coversheet

Petitioner's Information:

Name (as appears on Petition):
Telephone Number:

Street Address:
City, State, Zip Code:

Respondent's Information:

Name (as appears on Petition):
Telephone Number:

Street Address:
City, State, Zip Code:

What type of case did you file? ☐ DIVORCE ☐ LEGAL SEPARATION

Where is your case filed?

☐ 4175 Main Street, Riverside, CA 92501
☐ 880 N. State St., Hemet, CA 92543
☐ 46-200 Oasis St., Indio, CA 92201
☐ 265 N. Broadway, Blythe, CA 9222

Case Number:

Date of Marriage/Domestic Partnership (same as listed in Petition):

Date of Separation (same as listed in Petition):

Date of Service of Summons/Petition:

Are there minor children from this marriage/Domestic Partnership? ☐ Yes ☐ No

Please list your minor children from the relationship:

Name (First, Middle, Last):
Date of Birth (00/00/0000):

Name (First, Middle, Last):
Date of Birth (00/00/0000):

Name (First, Middle, Last):
Date of Birth (00/00/0000):

Name (First, Middle, Last):
Date of Birth (00/00/0000):

Custody/Visitation: Is there an existing Recommendation and Order After Mediation? ☐ Yes ☐ No

Do you have a court order for Child Support? ☐ Yes ☐ No

Do you have a court order for Spousal Support? ☐ Yes ☐ No

Is there a Domestic Violence Restraining Order in effect? ☐ Yes ☐ No

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):* Self-Represented	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE ☐ 4175 Main St., Riverside, CA 92501 ☐ 880 N. State St., Hemet, CA 92543 ☐ 46-200 Oasis St., Indio, CA 92201 ☐ 265 N. Broadway, Blythe, CA 92225	
PETITIONER: RESPONDENT:	
REQUEST TO ENTER DEFAULT	CASE NUMBER:

1. **To the clerk:** Please enter the default of the respondent who has failed to respond to the petition.

2. A completed *Income and Expense Declaration* (form FL-150) or *Financial Statement (Simplified)* (form FL-155)
   ☒ is attached ☐ is not attached.
   A completed *Property Declaration* (form FL-160) ☐ is attached ☐ is not attached
   because *(check at least one of the following):*
   (a) ☐ there have been no changes since the previous filing.
   (b) ☐ the issues subject to disposition by the court in this proceeding are the subject of a written agreement.
   (c) ☐ there are no issues of child, spousal, or partner support or attorney fees and costs subject to determination by the court.
   (d) ☐ the petition does not request money, property, costs, or attorney fees. (Fam. Code, § 2330.5.)
   (e) ☐ there are no issues of division of community property.
   (f) ☐ this is an action to establish parental relationship.

Date:

(TYPE OR PRINT NAME) (SIGNATURE OF [ATTORNEY FOR] PETITIONER)

3. **Declaration**
   a. ☐ No mailing is required because service was by publication or posting and the address of the respondent remains unknown.
   b. ☒ A copy of this *Request to Enter Default,* including any attachments and an envelope with sufficient postage, was provided to the court clerk, with the envelope addressed as follows *(address of the respondent's attorney or, if none, the respondent's last known address):*

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)

FOR COURT USE ONLY

☐ *Request to Enter Default* mailed to the respondent or the respondent's attorney on *(date):*
☐ Default entered as requested on *(date):*
☐ Default **not** entered. Reason:

Clerk, by _____, Deputy

Form Adopted for Mandatory Use
Judicial Council of California
FL-165 [Rev. January 1, 2005]

REQUEST TO ENTER DEFAULT
(Family Law—Uniform Parentage)

Code of Civil Procedure, §§ 585, 587;
Family Code, § 2335.5
www.courtinfo.ca.gov

CASE NAME *(Last name, first name of each party):*	CASE NUMBER:

4. **Memorandum of costs**
   a. [X] Costs and disbursements are waived.
   b. Costs and disbursements are listed as follows:
      (1) [ ] Clerk's fees ..... $.....
      (2) [ ] Process server's fees ..... $.....
      (3) [ ] Other *(specify):* ..... $.....
      ..... $.....
      ..... $.....
      ..... $ _____
      TOTAL ..... $.....
   c. I am the attorney, agent, or party who claims these costs. To the best of my knowledge and belief, the foregoing items of cost are correct and have been necessarily incurred in this cause or proceeding.

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)

5. **Declaration of nonmilitary status.** The respondent is not in the military service of the United States as defined in section 511 et seq. of the Servicemembers Civil Relief Act (50 U.S.C. Appen. § 501 et seq.), and is not entitled to the benefits of such act.

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 OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address):*	*FOR COURT USE ONLY*
TELEPHONE NO.: E-MAIL ADDRESS *(Optional):* ATTORNEY FOR *(Name):* Self-Represented	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE ☐ 4175 Main St., Riverside, CA 92501 ☐ 880 N. State St., Hemet, CA 92543 ☐ 46-200 Oasis St., Indio, CA 92201 ☐ 265 N. Broadway, Blythe, CA 92225	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER 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 8½-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 8½-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)

Form Adopted for Mandatory Use
Judicial Council of California
FL-150 [Rev. January 1, 2007]

Family Code, §§ 2030–2032, 2100–2113, 3552, 3620–3634, 4050–4076, 4300–4339
www.courtinfo.ca.gov

American LegalNet, Inc.
www.Forms*Workflow*.com

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER 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	$	
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 BAQ, royalty payments, etc.) *(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):*

TOTAL INCOME: $ 0.00

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	$
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)*	$

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER 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)*. . $ 0.00

q. Other *(specify)*: . . . . . $ _____

r. **TOTAL EXPENSES** (a–q) *(do not add in the amounts in a(1)(a) and (b))* $ 0.00

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 is required if either party is requesting attorney fees.)*:

a. To date, I have paid my attorney this amount for fees and costs *(specify)*: $ XXXXXXXXXXXX

b. The source of this money was *(specify)*: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

c. I still owe the following fees and costs to my attorney *(specify total owed)*: $ XXXXXXXXXXXX

d. My attorney's hourly rate is *(specify)*: $ XXXXXXXXXX

I confirm this fee arrangement.

Date: XXXXXXXXXXXX

XXXXXXXXXXXXXXXXXXXXXXXXXXXXX
(TYPE OR PRINT NAME OF ATTORNEY)

▶ XXXXXXXXXXXXXXX
(SIGNATURE OF ATTORNEY)

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER 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 expenses for the children in this case** — Amount per month
    a. Child care 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):*

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

SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE

- [ ] 4175 Main St., Riverside, CA 92501
- [ ] 880 N. State St., Hemet, CA 92543
- [ ] 46-200 Oasis St., Indio, CA 92201
- [ ] 265 N. Broadway, Blythe, CA 92225

PETITIONER:
RESPONDENT:
OTHER PARENT/PARTY:

This form is for dividing COMMUNITY PROPERTY. Generally, everything you bought while you were married is, "community property", even if only one of you earned or spent the money. Most debts incurred by either party during the marriage are community debts, even if a credit card was in the name of one spouse only. Community property and community debts are usually divided equally.

[X] **PETITIONER'S** [ ] **RESPONDENT'S**

[X] **COMMUNITY AND QUASI-COMMUNITY PROPERTY DECLARATION**

[ ] **SEPARATE PROPERTY DECLARATION**

CASE NUMBER:

See *Instructions* on page 4 for information about completing this form. For additional space, use *Continuation of Property Declaration* (form FL-161).

A	B	C -	D =	E	F	
ITEM NO. BRIEF DESCRIPTION	DATE ACQUIRED	GROSS FAIR MARKET VALUE	AMOUNT OF DEBT	NET FAIR MARKET VALUE	PROPOSAL FOR DIVISION Award or Confirm to: PETITIONER	RESPONDENT
1. REAL ESTATE [ ] NONE		$	$	$	$	$
2. HOUSEHOLD FURNITURE, FURNISHINGS, APPLIANCES [ ] NONE						
3. JEWELRY, ANTIQUES, ART, COIN COLLECTIONS, etc. [ ] NONE						
4. VEHICLES, BOATS, TRAILERS [ ] NONE						
5. SAVINGS ACCOUNTS [ ] NONE						
6. CHECKING ACCOUNTS [ ] NONE						

Form Approved for Mandatory Use
Judicial Council of California
FL-160 [Rev. July 1, 2016]

PROPERTY DECLARATION
(Family Law)

Family Code, §§ 115, 2104, 2500-2660
www.courts.ca.gov

A	B	C - D = E			F	
ITEM NO. BRIEF DESCRIPTION	DATE ACQUIRED	GROSS FAIR MARKET VALUE	AMOUNT OF DEBT	NET FAIR MARKET VALUE	PROPOSAL FOR DIVISION Award or Confirm to: PETITIONER	RESPONDENT
7. CREDIT UNION, OTHER DEPOSITORY ACCOUNTS ☐ NONE		$	$	$	$	$
8. CASH ☐ NONE						
9. TAX REFUND ☐ NONE						
10. LIFE INSURANCE WITH CASH SURRENDER OR LOAN VALUE ☐ NONE						
11. STOCKS, BONDS, SECURED NOTES, MUTUAL FUNDS ☐ NONE						
12. RETIREMENT AND PENSIONS ☐ NONE						
13. PROFIT-SHARING, IRAS, DEFERRED COMPENSATION, ANNUITIES ☐ NONE						
14. ACCOUNTS RECEIVABLE, UNSECURED NOTES ☐ NONE						
15. PARTNERSHIP, OTHER BUSINESS INTERESTS ☐ NONE						
16. OTHER ASSETS ☐ NONE						
17. ASSETS FROM CONTINUATION SHEET						
18. TOTAL ASSETS						

A	B	C	D	
ITEM NO. DEBTS— SHOW TO WHOM OWED	DATE INCURRED	TOTAL OWING	PROPOSAL FOR DIVISION Award or Confirm to: PETITIONER	RESPONDENT
19. STUDENT LOANS		$	$	$
☐ NONE 20. TAXES				
☐ NONE 21. SUPPORT ARREARAGES				
☐ NONE 22. LOANS—UNSECURED				
☐ NONE 23. CREDIT CARDS				
☐ NONE 24. OTHER DEBTS				
☐ NONE 25. OTHER DEBTS FROM CONTINUATION SHEET				
26. TOTAL DEBTS				

☐ A *Continuation of Property Declaration* (form FL-161) is attached and incorporated by reference.

I declare under penalty of perjury under the laws of the State of California that, to the best of my knowledge, the foregoing is a true and correct listing of assets and obligations and the amounts shown are correct.

Date:

(TYPE OR PRINT NAME)

SIGNATURE

INFORMATION AND INSTRUCTIONS FOR COMPLETING FORM FL-160

Property Declaration (form FL-160) is a multipurpose form, which may be filed with the court as an attachment to a *Petition* or *Response* or served on the other party to comply with disclosure requirements in place of a *Schedule of Assets and Debts* (form FL-142). Courts may also require a party to file a *Property Declaration* as an attachment to a *Request to Enter Default* (form FL-165) or *Judgment* (form FL-180).

When filing a *Property Declaration* with the court, do not include private financial documents listed below.

Identify the type of declaration completed

1. Check "Community and Quasi-Community Property Declaration" on page 1 to use *Property Declaration* (form FL-160) to provide a combined list of community and quasi-community property assets and debts. Quasi-community property is property you own outside of California that would be community property if it were located in California.

2. Do not combine a separate property declaration with a community and quasi-community property declaration. Check "Separate Property Declaration" on page 1 when using *Property Declaration* to provide a list of separate property assets and debts.

Description of the Property Declaration chart

Pages 1 and 2

1. Column A is used to provide a brief description of each item of separate or community or quasi-community property.
2. Column B is used to list the date the item was acquired.
3. Column C is used to list the item's gross fair market value (an estimate of the amount of money you could get if you sold the item to another person through an advertisement).
4. Column D is used to list the amount owed on the item.
5. Column E is used to indicate the net fair market value of each item. The net fair market value is calculated by subtracting the dollar amount in column D from the amount in column C ("C minus D").
6. Column F is used to show a proposal on how to divide (or confirm) the item described in column A.

Page 3

1. Column A is used to provide a brief description of each separate or community or quasi-community property debt.
2. Column B is used to list the date the debt was acquired.
3. Column C is used to list the total amount of money owed on the debt.
4. Column D is used to show a proposal on how to divide (or confirm) the item of debt described in column A.

When using this form only as an attachment to a *Petition* or *Response*

1. Attach a *Separate Property Declaration* (form FL-160) to respond to item 9. Only columns A and F on pages 1 and 2 and columns A and D on page 3 are required.
2. Attach a *Community or Quasi-Community Declaration* (form FL-160) to respond to item 10, and complete column A on all pages.

When serving this form on the other party as an attachment to *Declaration of Disclosure (*form FL-140)

1. Complete columns A through E on pages 1 and 2, and columns A through C on page 3.
2. Copies of the following documents must be attached and served on the other party:
   (a) *For real estate* (item 1): deeds with legal descriptions and the latest lender's statement.
   (b) *For vehicles, boats, trailers* (item 4): the title documents.
   (c) *For all bank accounts* (item 5, 6, 7): the latest statement.
   (d) *For life insurance policies with cash surrender or loan value* (item 10): the latest declaration page.
   (e) *For stocks, bonds, secured notes, mutual funds* (item 11): the certificate or latest statement.
   (f) *For retirement and pensions* (item 12): the latest summary plan document and latest benefit statement.
   (g) *For profit-sharing, IRAs, deferred compensation, and annuities* (item 13): the latest statement.
   (h) *For each account receivable and unsecured note* (item 14): documentation of the account receivable or note.
   (i) *For partnerships and other business interests* (item 15): the most current K-1 and Schedule C.
   (j) *For other assets* (item 16): the most current statement, title document, or declaration.
   (k) *For support arrearages* (item 21): orders and statements.
   (l) *For credit cards and other debts* (items 23 and 24): the latest statement.
3. Do not file copies of the above private financial documents with the court.

When filing this form with the court as a attachment to *Request to Enter Default* (FL-165) or *Judgment* (FL-180)
Complete all columns on the form.

For more information about forms required to process and obtain a judgment in dissolution, legal separation, and nullity cases, see ***http://www.courts.ca.gov/8218.htm.***

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

SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE

☐ 4175 Main St., Riverside, CA 92501
☐ 880 N. State St., Hemet, CA 92543
☐ 46-200 Oasis St., Indio, CA 92201
☐ 265 N. Broadway, Blythe, CA 92225

PETITIONER:
RESPONDENT:
OTHER PARENT/PARTY:

This form is for dividing SEPARATE PROPERTY. Separate property includes:
-All property you owned before the marriage;
-All property given to you as a gift or inheritance (even if the gift or inheritance occured during the marriage)
-The rents, profits, or other money earned from your separate property;
-Property you got after the date of separation.

☒ **PETITIONER'S** ☐ **RESPONDENT'S**
☐ **COMMUNITY AND QUASI-COMMUNITY PROPERTY DECLARATION**
☒ **SEPARATE PROPERTY DECLARATION**

CASE NUMBER:

See *Instructions* on page 4 for information about completing this form. For additional space, use *Continuation of Property Declaration* (form FL-161).

A	B	C -	D =	E	F	
ITEM NO. BRIEF DESCRIPTION	DATE ACQUIRED	GROSS FAIR MARKET VALUE	AMOUNT OF DEBT	NET FAIR MARKET VALUE	PROPOSAL FOR DIVISION Award or Confirm to: PETITIONER	RESPONDENT
1. REAL ESTATE ☐ NONE		$	$	$	$	$
2. HOUSEHOLD FURNITURE, FURNISHINGS, APPLIANCES ☐ NONE						
3. JEWELRY, ANTIQUES, ART, COIN COLLECTIONS, etc. ☐ NONE						
4. VEHICLES, BOATS, TRAILERS ☐ NONE						
5. SAVINGS ACCOUNTS ☐ NONE						
6. CHECKING ACCOUNTS ☐ NONE						

Form Approved for Mandatory Use
Judicial Council of California
FL-160 [Rev. July 1, 2016]

PROPERTY DECLARATION
(Family Law)

Family Code, §§ 115, 2104, 2500-2660
www.courts.ca.gov

A	B	C	- D	= E	F	
ITEM NO. BRIEF DESCRIPTION	DATE ACQUIRED	GROSS FAIR MARKET VALUE	AMOUNT OF DEBT	NET FAIR MARKET VALUE	PROPOSAL FOR DIVISION Award or Confirm to: PETITIONER	RESPONDENT
7. CREDIT UNION, OTHER DEPOSITORY ACCOUNTS ☐ NONE		$	$	$	$	$
8. CASH ☐ NONE						
9. TAX REFUND ☐ NONE						
10. LIFE INSURANCE WITH CASH SURRENDER OR LOAN VALUE ☐ NONE						
11. STOCKS, BONDS, SECURED NOTES, MUTUAL FUNDS ☐ NONE						
12. RETIREMENT AND PENSIONS ☐ NONE						
13. PROFIT-SHARING, IRAS, DEFERRED COMPENSATION, ANNUITIES ☐ NONE						
14. ACCOUNTS RECEIVABLE, UNSECURED NOTES ☐ NONE						
15. PARTNERSHIP, OTHER BUSINESS INTERESTS ☐ NONE						
16. OTHER ASSETS ☐ NONE						
17. ASSETS FROM CONTINUATION SHEET						
18. TOTAL ASSETS						

A	B	C	D	
ITEM NO. DEBTS— SHOW TO WHOM OWED	DATE INCURRED	TOTAL OWING	PROPOSAL FOR DIVISION Award or Confirm to: PETITIONER	RESPONDENT
19. STUDENT LOANS		$	$	$
☐ NONE 20. TAXES				
☐ NONE 21. SUPPORT ARREARAGES				
☐ NONE 22. LOANS—UNSECURED				
☐ NONE 23. CREDIT CARDS				
☐ NONE 24. OTHER DEBTS				
☐ NONE 25. OTHER DEBTS FROM CONTINUATION SHEET				
26. TOTAL DEBTS				

☐ A *Continuation of Property Declaration* (form FL-161) is attached and incorporated by reference.

I declare under penalty of perjury under the laws of the State of California that, to the best of my knowledge, the foregoing is a true and correct listing of assets and obligations and the amounts shown are correct.

Date:

(TYPE OR PRINT NAME)

SIGNATURE

INFORMATION AND INSTRUCTIONS FOR COMPLETING FORM FL-160

Property Declaration (form FL-160) is a multipurpose form, which may be filed with the court as an attachment to a *Petition* or *Response* or served on the other party to comply with disclosure requirements in place of a *Schedule of Assets and Debts* (form FL-142). Courts may also require a party to file a *Property Declaration* as an attachment to a *Request to Enter Default* (form FL-165) or *Judgment* (form FL-180).

When filing a *Property Declaration* with the court, do not include private financial documents listed below.

Identify the type of declaration completed

1. Check "Community and Quasi-Community Property Declaration" on page 1 to use *Property Declaration* (form FL-160) to provide a combined list of community and quasi-community property assets and debts. Quasi-community property is property you own outside of California that would be community property if it were located in California.

2. Do not combine a separate property declaration with a community and quasi-community property declaration. Check "Separate Property Declaration" on page 1 when using *Property Declaration* to provide a list of separate property assets and debts.

Description of the Property Declaration chart

Pages 1 and 2

1. Column A is used to provide a brief description of each item of separate or community or quasi-community property.
2. Column B is used to list the date the item was acquired.
3. Column C is used to list the item's gross fair market value (an estimate of the amount of money you could get if you sold the item to another person through an advertisement).
4. Column D is used to list the amount owed on the item.
5. Column E is used to indicate the net fair market value of each item. The net fair market value is calculated by subtracting the dollar amount in column D from the amount in column C ("C minus D").
6. Column F is used to show a proposal on how to divide (or confirm) the item described in column A.

Page 3

1. Column A is used to provide a brief description of each separate or community or quasi-community property debt.
2. Column B is used to list the date the debt was acquired.
3. Column C is used to list the total amount of money owed on the debt.
4. Column D is used to show a proposal on how to divide (or confirm) the item of debt described in column A.

When using this form only as an attachment to a *Petition* or *Response*

1. Attach a *Separate Property Declaration* (form FL-160) to respond to item 9. Only columns A and F on pages 1 and 2 and columns A and D on page 3 are required.
2. Attach a *Community or Quasi-Community Declaration* (form FL-160) to respond to item 10, and complete column A on all pages.

When serving this form on the other party as an attachment to *Declaration of Disclosure (*form FL-140)

1. Complete columns A through E on pages 1 and 2, and columns A through C on page 3.
2. Copies of the following documents must be attached and served on the other party:
   (a) *For real estate* (item 1): deeds with legal descriptions and the latest lender's statement.
   (b) *For vehicles, boats, trailers* (item 4): the title documents.
   (c) *For all bank accounts* (item 5, 6, 7): the latest statement.
   (d) *For life insurance policies with cash surrender or loan value* (item 10): the latest declaration page.
   (e) *For stocks, bonds, secured notes, mutual funds* (item 11): the certificate or latest statement.
   (f) *For retirement and pensions* (item 12): the latest summary plan document and latest benefit statement.
   (g) *For profit-sharing, IRAs, deferred compensation, and annuities* (item 13): the latest statement.
   (h) *For each account receivable and unsecured note* (item 14): documentation of the account receivable or note.
   (i) *For partnerships and other business interests* (item 15): the most current K-1 and Schedule C.
   (j) *For other assets* (item 16): the most current statement, title document, or declaration.
   (k) *For support arrearages* (item 21): orders and statements.
   (l) *For credit cards and other debts* (items 23 and 24): the latest statement.
3. Do not file copies of the above private financial documents with the court.

When filing this form with the court as a attachment to *Request to Enter Default* (FL-165) or *Judgment* (FL-180)
Complete all columns on the form.

For more information about forms required to process and obtain a judgment in dissolution, legal separation, and nullity cases, see ***http://www.courts.ca.gov/8218.htm.***

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address):*	
TELEPHONE NO.: FAX NO. : E-MAIL ADDRESS: ATTORNEY FOR (*Name*): Self-Represented	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE ☐ 4175 Main St., Riverside, CA 92501 ☐ 880 N. State St., Hemet, CA 92543 ☐ 46-200 Oasis St., Indio, CA 92201 ☐ 265 N. Broadway, Blythe, CA 92225	
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	
DECLARATION REGARDING SERVICE OF DECLARATION OF DISCLOSURE AND INCOME AND EXPENSE DECLARATION ☒ Petitioner's ☒ Preliminary ☐ Respondent's ☒ Final	CASE NUMBER:

1. I am the ☐ attorney for ☒ petitioner ☐ respondent in this matter.

2. ☒ Petitioner's ☐ Respondent's *Preliminary Declaration of Disclosure* (form FL-140), current* *Income and Expense Declaration* (form FL-150), completed *Schedule of Assets and Debts* (form FL-142) or *Community and Separate Property Declarations* (form FL-160) with appropriate attachments, all tax returns filed by the party in the two years before service of the preliminary disclosures, and all other required information under Family Code section 2104 were served on:

   ☒ the other party ☐ the other party's attorney by ☐ personal service ☐ mail
   ☐ Other *(specify):*
   on (date):

3. ☒ Petitioner's ☐ Respondent's *Final Declaration of Disclosure* (form FL-140), current* *Income and Expense Declaration* (form FL-150), completed *Schedule of Assets and Debts* (form FL-142) or *Community or Separate Property Declarations* (form FL-160) with attachments, and the material facts and information required by Family Code section 2105 were served on:

   ☒ the other party ☐ other party's attorney by ☐ personal service ☐ mail
   ☐ Other *(specify):*
   on (date):

4. ☐ Service of ☐ Petitioner's ☐ Respondent's ☐ preliminary ☐ final declaration of disclosure
   ☐ current income and expense declaration has been waived as follows:
   a. ☐ The parties agreed to waive final declaration of disclosure requirements under Family Code section 2105(d.) (*Form FL-144 may be used for this purpose.*) The waiver ☐ was filed on *(date):*
      ☐ is being filed at the same time as this form.
   b. ☐ The party has failed to comply with disclosure requirements, and the court has granted the request for voluntary waiver of receipt under Family Code section 2107 on *(date):*
   c. ☐ This is a default proceeding that does not include a stipulated judgment or settlement agreement. Petitioner waives final disclosure requirements under Family Code section 2110.

**Current* is defined as completed within the past three months providing no facts have changed. (Cal. Rules of Court, rule 5.260.)

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

NOTE: File this document with the court.
Do not file a copy of the Preliminary or Final Declaration of Disclosure or any attachments to either declaration of disclosure with this document.

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):* Self-Represented	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE ☐ 4175 Main St., Riverside, CA 92501 ☐ 880 N. State St., Hemet, CA 92543 ☐ 46-200 Oasis St., Indio, CA 92201 ☐ 265 N. Broadway, Blythe, CA 92225	
PETITIONER: RESPONDENT:	
DECLARATION FOR DEFAULT OR UNCONTESTED ☐ **DISSOLUTION** ☐ **LEGAL SEPARATION**	CASE NUMBER:

(NOTE: Items 1 through 12 apply to both dissolution and legal separation proceedings.)

1. I declare that if I appeared in court and were sworn, I would testify to the truth of the facts in this declaration.
2. I agree that my case will be proven by this declaration and that I will not appear before the court unless I am ordered by the court to do so.
3. All the information in the ☐ amended ☒ *Petition* ☐ *Response* is true and correct.
4. **Type of case** *(check a, b, or c):*
   a. ☒ **Default without agreement**
      (1) No response has been filed and there is no written agreement or stipulated judgment between the parties;
      (2) The default of the respondent was entered or is being requested, and I am not seeking any relief not requested in the petition; and
      (3) The following statement is true *(check one):*
         (A) ☐ There are no assets or debts to be disposed of by the court.
         (B) ☐ The community and quasi-community assets and debts are listed on the **completed** current *Property Declaration* (form FL-160), which includes an estimate of the value of the assets and debts that I propose to be distributed to each party. The division in the proposed *Judgment* (form FL-180) is a fair and equal division of the property and debts, or if there is a negative estate, the debts are assigned fairly and equitably.
   b. ☐ **Default with agreement**
      (1) No response has been filed and the parties have agreed that the matter may proceed as a default matter without notice; and
      (2) The parties have entered into a written agreement regarding their property and their marriage or domestic partnership rights, including support, the original of which is being or has been submitted to the court. I request that the court approve the agreement.
   c. ☐ **Uncontested**
      (1) Both parties have appeared in the case; and
      (2) The parties have entered into a written agreement regarding their property and their marriage or domestic partnership rights, including support, the original of which is being or has been submitted to the court. I request that the court approve the agreement.
5. **Declaration of disclosure** *(check a, b, or c):*
   a. ☐ Both the petitioner and respondent have filed, or are filing concurrently, a *Declaration Regarding Service of Declaration of Disclosure* (form FL-141) and an *Income and Expense Declaration* (form FL-150).
   b. ☒ This matter is proceeding by default. I am the petitioner in this action and have filed a proof of service of the preliminary *Declaration of Disclosure* (form FL-140) with the court. I hereby waive receipt of the final *Declaration of Disclosure* (form FL-140) from the respondent.
   c. ☐ This matter is proceeding as an uncontested action. Service of the final *Declaration of Disclosure* (form FL-140) is mutually waived by both parties. A waiver provision executed by both parties under penalty of perjury is contained on the *Stipulation and Waiver of Final Declaration of Disclosure* (form FL-144), in the settlement agreement or proposed judgment or another, separate stipulation.

PETITIONER: RESPONDENT:	CASE NUMBER:

6. ☐ **Child custody and visitation (parenting time)** should be ordered as set forth in the proposed *Judgment* (form FL-180).
   a. ☐ The information in *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act* (UCCJEA) (form FL-105) ☐ has ☐ has not changed since it was last filed with the court. *(If changed, attach updated form.)*
   b. ☐ There is an existing court order for custody/parenting time in another case in *(county)*:
      The case number is *(specify):*
   c. ☐ The current custody and visitation (parenting time) previously ordered in this case, or current schedule is *(specify):*
      ☐ Contained on Attachment 6c.
   d. ☐ Facts in support of requested judgment (*In a default case, state your reasons below):*
      ☐ Contained on Attachment 6d.

7. ☐ **Child support** should be ordered as set forth in the proposed *Judgment* (form FL-180).
   a. If there are minor children, check and complete item (1) if applicable and item (2) or (3):
      (1) ☐ Child support is being enforced in another case in *(county):*
      The case number is *(specify):*
      (2) ☐ The information in the child support calculation attached to the proposed judgment is correct based on my personal knowledge.
      (3) ☐ I request that this order be based on the ☐ petitioner's ☐ respondent's earning ability. The facts in support of my estimate of earning ability are *(specify):*
      ☐ Continued on Attachment 7a(3).
   b. Complete items (1) and (2) regarding public assistance.
      (1) I ☐ am receiving ☐ am not receiving ☐ intend to apply for public assistance for the child or children listed in the proposed order.
      (2) To the best of my knowledge, the other party ☐ is ☐ is not receiving public assistance.
   c. ☐ The petitioner ☐ respondent is presently receiving public assistance, and all support should be made payable to the local child support agency at the address set forth in the proposed judgment. A representative of the local child support agency has signed the proposed judgment.

8. **Spousal, Partner, and Family Support** *(If a support order or attomey fees are requested, submit a completed* Income and Expense Declaration *(form FL-150) unless a current form is on file. Include your best estimate of the other party's income. Check at least one of the following.)*
   a. ☐ I knowingly give up forever any right to receive spousal or partner support.
   b. ☐ I ask the court to reserve jurisdiction to award spousal or partner support in the future to *(name):*
   c. ☐ I ask the court to terminate forever spousal or partner support for: ☐ petitioner ☐ respondent.
   d. ☐ Spousal support or domestic partner support should be ordered as set forth in the proposed *Judgment* (form FL-180) based on the factors described in:
      ☐ *Spousal or Partner Support Declaration Attachment* (form FL-157)
      ☐ written agreement
      ☐ attached declaration *(Attachment 8d.)*
   e. ☐ Family support should be ordered as set forth in the proposed *Judgment* (form FL-180).
   f. ☐ Other *(specify):*

PETITIONER: RESPONDENT:	CASE NUMBER:

9. ☐ **Parentage** of the children of the petitioner and respondent born prior to their marriage or domestic partnership should be ordered as set forth in the proposed *Judgment* (form FL-180).
   a. ☐ A Voluntary Declaration of Paternity is attached.
   b. ☐ Parentage was previously established by the court in *(county):*
   The case number is *(specify):*
   ☐ Written agreement of the parties attached here or to the *Judgment* (form FL-180).

10. ☐ **Attorney fees** should be ordered as set forth in the proposed *Judgment* (form FL-180)
   ☐ facts in support in form FL-319
   ☐ other *(specify facts below)*:

11. ☐ The judgment should be entered nunc pro tunc for the following reasons *(specify)*:

12. ☐ The petitioner ☐ respondent requests restoration of his or her former name as set forth in the proposed *Judgment* (form FL-180).

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

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

STATEMENTS IN THIS BOX APPLY ONLY TO DISSOLUTIONS

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

16. I ask that the court grant the request for a judgment for dissolution of marriage or domestic partnership based on irreconcilable differences and that the court make the orders set forth in the proposed *Judgment* (form FL-180) submitted with this declaration.

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

THIS STATEMENT APPLIES ONLY TO LEGAL SEPARATIONS

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

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

19. ☐ Other *(specify):*

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

Date:

(TYPE OR PRINT NAME) (SIGNATURE OF DECLARANT)

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):* Self-Represented	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE ☐ 4175 Main St., Riverside, CA 92501 ☐ 880 N. State St., Hemet, CA 92543 ☐ 46-200 Oasis St., Indio, CA 92201 ☐ 265 N. Broadway, Blythe, CA 92225	
MARRIAGE OR PARTNERSHIP OF PETITIONER: RESPONDENT:	
JUDGMENT ☐ **DISSOLUTION** ☐ **LEGAL SEPARATION** ☐ **NULLITY** ☐ **Status only** ☐ **Reserving jurisdiction over termination of marital or domestic partnership status** ☐ **Judgment on reserved issues** **Date marital or domestic partnership status ends:**	CASE NUMBER:

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

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

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

THE COURT ORDERS, GOOD CAUSE APPEARING

4. a. ☐ Judgment of dissolution is entered. Marital or domestic partnership status is terminated and the parties are restored to the status of single persons
   (1) ☐ on *(specify date):*
   (2) ☐ on a date to be determined on noticed motion of either party or on stipulation.
   b. ☐ Judgment of legal separation is entered.
   c. ☐ Judgment of nullity is entered. The parties are declared to be single persons on the ground of *(specify):*
   d. ☐ This judgment will be entered nunc pro tunc as of *(date):*
   e. ☐ Judgment on reserved issues.
   f. The ☐ petitioner's ☐ respondent's former name is restored to *(specify):*
   g. ☒ Jurisdiction is reserved over all other issues, and all present orders remain in effect except as provided below.
   h. ☐ This judgment contains provisions for child support or family support. Each party must complete and file with the court a *Child Support Case Registry Form* (form FL-191) within 10 days of the date of this judgment. The parents must notify the court of any change in the information submitted within 10 days of the change, by filing an updated form. The *Notice of Rights and Responsibilities—Health-Care Costs and Reimbursement Procedures and Information Sheet on Changing a Child Support Order* (form FL-192) is attached.

CASE NAME *(Last name, first name of each party):*	CASE NUMBER:

4. i. ☐ The children of this marriage or domestic partnership are:
   (1) ☐ Name Birthdate

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

   j. ☐ Child custody and visitation (parenting time) are ordered as set forth in the attached
   (1) ☐ Settlement agreement, stipulation for judgment, or other written agreement which contains the information required by Family Code section 3048(a).
   (2) ☐ *Child Custody and Visitation Order Attachment* (form FL-341).
   (3) ☐ *Stipulation and Order for Custody and/or Visitation of Children* (form FL-355).
   (4) ☐ Previously established in another case. Case number: Court:

   k. ☐ Child support is ordered as set forth in the attached
   (1) ☐ Settlement agreement, stipulation for judgment, or other written agreement which contains the declarations required by Family Code section 4065(a).
   (2) ☐ *Child Support Information and Order Attachment* (form FL-342).
   (3) ☐ *Stipulation to Establish or Modify Child Support and Order* (form FL-350).
   (4) ☐ Previously established in another case. Case number: Court:

   l. ☐ Spousal, domestic partner, or family support is ordered:
   (1) ☐ Reserved for future determination as relates to ☐ petitioner ☐ respondent
   (2) ☐ Jurisdiction terminated to order spousal or partner support to ☐ petitioner ☐ respondent
   (3) ☐ As set forth in the attached *Spousal, Partner, or Family Support Order Attachment* (form FL-343).
   (4) ☐ As set forth in the attached settlement agreement, stipulation for judgment, or other written agreement.
   (5) ☐ Other *(specify):*

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

   n. ☐ Attorney fees and costs are ordered as set forth in the attached
   (1) ☐ Settlement agreement, stipulation for judgment, or other written agreement.
   (2) ☐ *Attorney Fees and Costs Order* (form FL-346).
   (3) ☐ Other *(specify):*

   o. ☒ Other *(specify):* SEE ADDENDUM TO JUDGMENT

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

Date:

JUDICIAL OFFICER

5. Number of pages attached: _____

☒ SIGNATURE FOLLOWS LAST ATTACHMENT

NOTICE

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

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

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

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

NOTICE OF RIGHTS AND RESPONSIBILITIES

Health-Care Costs and Reimbursement Procedures

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

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

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

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

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

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

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

   a. **Burden to prove.** The party claiming that the coverage is inadequate to meet the child's needs has the burden of proving that to the court.

   b. **Cost of additional coverage.** If a parent purchases health-care insurance in addition to that ordered by the court, that parent must pay all the costs of the additional coverage. In addition, if a parent uses alternative coverage that costs more than the coverage provided by court order, that parent must pay the difference.

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

INFORMATION SHEET ON CHANGING A CHILD SUPPORT ORDER

General Information

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

When a Child Support Order May Be Modified

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

Examples

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

How to Change a Child Support Order

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

What forms do I need?

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

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

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

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

You must also fill out one of these forms:

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

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

Talk to the family law facilitator at your court.

After you fill out the forms, file them with the court clerk and ask for a hearing date. Write the hearing date on the form.

The clerk will ask you to pay a filing fee. If you cannot afford the fee, fill out these forms, too:

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

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

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

The server must also serve blank copies of these forms:

- FL-320, *Responsive Declaration to Request for Order* ***and*** FL-150, *Income and Expense Declaration,* ***or***
- FL-155, *Financial Statement (Simplified)*

Then the server fills out and signs a *Proof of Service* (form FL-330 or FL-335). Take this form to the clerk and file it.

Go to your hearing and ask the judge to change the support. Bring your tax returns from the last two years and your last two months' pay stubs. The judge will look at your information, listen to both parents, and make an order. After the hearing, fill out:

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

Need help?

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

PETITIONER: _____ CASE NUMBER: _____
RESPONDENT: _____

ADDENDUM TO JUDGMENT
CUSTODY/VISITATION

Legal and physical custody of the minor child/ren shall be as follows:

Child's Name	Birth Date	Legal Custody to:	Physical Custody to:

The other parent shall have the following visitation:

☐ Reasonable right of visitation as agreed between the parties.

☐ As set forth in the order pursuant to Referral to the Child Custody Recommending Counseling Services, consisting of _____ pages, which was filed on _____ , and is attached and incorporated.

☐ Other: _____

_____

Pursuant to Family Code § 3048(a):

(1) This court exercises jurisdiction under Family Code § 3421-3424

(2) Notice and opportunity to be heard were given under Family Code § 3425

(3) A clear description of the custody and visitation rights of each party is set forth herein.

(4) Violation of the order may subject the party in violation to civil or criminal penalties, or both.

(5) The habitual residence of the child/ren is the United States of America.

CHILD SUPPORT

☐ A printout of the computer calculation and findings is attached and incorporated. Child support is allocated per child as shown on the printout.

☐ **Guideline Child Support Findings:**

Federal Tax Filing Status:

Petitioner: ☐ Single ☐ Head of Household ☐ Married Filing Jointly ☐ Married Filing Separately

Respondent: ☐ Single ☐ Head of Household ☐ Married Filing Jointly ☐ Married Filing Separately

☐ Gross monthly incomes are as follows: Petitioner's $ _____ : Respondent's $ _____.

Approximate percentage of time child/ren spend with each parent: Petitioner: _____ % Respondent: _____ %

☐ Petitioner: ☐ Respondent is experiencing a statutory hardship of $ _____ per month.

☐ Petitioner pays: ☐ Medical Insurance: $ _____ ☐ Union Dues: $ _____ ☐ Mandatory Pension: $ _____

☐ Respondent pays: ☐ Medical Insurance: $ _____ ☐ Union Dues: $ _____ ☐ Mandatory Pension: $ _____

Based on the above, the amount of child support payable by ☐ Petitioner ☐ Respondent as calculated under the statutory guideline is $_____ per month. Support shall be allocated between minor children as follows:

$_____ for support of the first (oldest) child; $ _____ for support of the second child;
$_____ for support of the third child; $ _____ for support of the fourth child.

PETITIONER: _____ CASE NUMBER: _____
RESPONDENT: _____

ADDENDUM TO JUDGMENT

☐ **Child Support Payments:** ☐ Petitioner ☐ Respondent shall pay to the other party as and for child support the sum of $ _____ per month due one-half on the first and one-half on the fifteenth day of each month commencing _____ , and continuing until further order of the court, or until each child has married, dies, is emancipated, reaches the age of 19, or reaches the age of 18 and is not a full-time student, whichever first occurs.

☐ **Arrears.** ☐ Petitioner ☐ Respondent owes to the other parent child support arrears in the principal sum of $ _____ for the period of _____ to _____ . These arrears shall be paid as follows: $ _____ per month due _____ each month commencing _____ , until paid in full.

☐ **Non-Guideline Child Support:** The parties acknowledge that : (1) they are fully informed of their rights concerning guideline child support; (2) they have agreed to the child support provisions of this Agreement without coercion or duress; (3) this Agreement is in the best interests of the child involved; (4) the needs of the child/ren will be adequately met by this agreed-upon child support; and (5) they have not assigned the right to support to the county and no public assistance application is pending, except as set forth below.

Additional Child Support Orders:

An Income Withholding Order for the above child support shall issue.

☐ **Child Care.** ☐ Petitioner ☐ Respondent shall pay to the other parent for child care costs related to employment:

☐ The sum of $ _____ per month commencing _____ .
☐ A sum equal to one-half (1/2) of the verifiable daycare expenses.

Health Care. ☐ Petitioner ☐ Respondent shall obtain and/or maintain for the minor child/ren medical, dental and visual insurance, if available at reasonable costs through employment, self-employment or union affiliation. The cost is presumed reasonable if it does not exceed 5% of the responsible parent's gross income.

Any health expenses not paid by insurance shall be shared: Petitioner 50% and Respondent 50%

If the person who receives child support enters into a contract with a private child support collector, the party ordered to pay support must pay the fee charged by the private support collector. The fee must not exceed 33 1/3 percent of the total amount of arrears nor may it exceed 50 percent of any fee charged by the private child support collector. The money judgment created by this provision is in favor of the private child support collector and the party receiving support jointly.

☐ **Reserved.** The issue of child support is reserved. ☐ The Department of Child Support Services is collecting support for these children and this case shall be consolidated with case number _____ .

☐ The Department of Child Support Services (DCSS) approves of the foregoing support order. ☐ Is no longer collecting.
☐ Has closed the (DCSS) case.

Date: _____ (Signature of DCSS Attorney:) _____
(SIGNATURE)

PETITIONER: _____ CASE NUMBER: _____
RESPONDENT: _____

ADDENDUM TO JUDGMENT

STATISTICAL INFORMATION

The parties were married or registered as domestic partners on _____ and separated on _____.

☐ There is/are no minor child/ren of the marriage/domestic partnership.

SPOUSAL/PARTNER SUPPORT

☐ **Waiver:** ☐ **Petitioner** ☐ **Respondent knowingly and intelligently waive(s) spousal/partner support forever. Jurisdiction shall be terminated over spousal/partner support. When a court has no jurisdiction over support, no support can be ordered regardless of the hardship that this might cause.**

☐ **Termination.** The court's jurisdiction to award spousal/partner support to the Respondent is terminated.

☐ **Reserved.** The court reserves jurisdiction over spousal/partner support as to ☐ Petitioner ☐ Respondent. Notwithstanding this reservation, the existing temporary spousal support order ordering ☐ Petitioner ☐ Respondent to pay $ _____ to the other party shall remain in effect until further order of the court, death of either party, or remarriage or registration of a new domestic partnership of the party receiving support.

☐ **Spousal/Partnership Support Payments** ☐ Petitioner ☐ Respondent shall pay to the other party for spousal/partner support, the sum of $ _____ per month, payable one-half on the first and one-half on the fifteenth day of each month commencing _____, and continuing until the earliest of (1) the death of either party; (2) remarriage or registration of a new domestic partnership of the party receiving support, (3) further order of the Court or (4) the termination date of: _____.

NOTICE: It is the goal of the State of California that each party must make reasonable good faith efforts to become self-supporting as provided in Family Code § 4320. Failure to make reasonable good faith efforts may be one of the factors considered by the court as a basis for modifying or terminating spousal/partner support.

With respect to any child or spousal order, each party is required to notify the other within **10 calendar days** of any change in employment or income, including the employer's name, address and anticipated rate of pay. If either party fails to notify the other party of any such change, the court reserves jurisdiction to modify any support obligation retroactively to the date the notice should have been given.

PROPERTY DIVISION

☐ There are no property issues before the court, thus the court hereby terminates jurisdiction over property issues.

☐ **Community Property/Debt Awarded to Petitioner.** Petitioner is awarded his/her share of community and community debt as listed below. Petitioner shall be responsible for paying any and all debts and obligations secured by the community property awarded to him/her. Petitioner shall hold respondent harmless from all debts and obligations awarded to him/her. All furniture and furnishings in his/her possession except as otherwise listed.

1. _____ **7.** _____

2. _____ **8.** _____

3. _____ **9.** _____

4. _____ **10.** _____

5. _____ **11.** _____

6. _____ **12.** _____

PETITIONER: _____ CASE NUMBER: _____
RESPONDENT: _____

ADDENDUM TO JUDGMENT

☐ **Community Property/Debt Awarded to Respondent.** Respondent is awarded his/her share of community property and community debt as listed below. Respondent shall be responsible for paying any and all debts and obligations secured by the community property awarded to him/her. Respondent shall hold Petitioner harmless from all debts and obligations awarded to him/her. All furniture and furnishings in his/her possession except otherwise listed.

1. _____ **7.** _____
2. _____ **8.** _____
3. _____ **9.** _____
4. _____ **10.** _____
5. _____ **11.** _____
6. _____ **12.** _____

☐ **Separate Property/Debts of Petitioner.** The following is confirmed to Petitioner as his/her separate property/debts:

1. _____ **5.** _____
2. _____ **6.** _____
3. _____ **7.** _____
4. _____ **8.** _____

☐ **Separate Property/Debts of Respondent.** The following is confirmed to Respondent as his/her separate property/debts:

1. _____ **5.** _____
2. _____ **6.** _____
3. _____ **7.** _____
4 _____ **8.** _____

☐ **Retirement Benefits:**

Date of marriage or domestic partnership: _____ Date of separation: _____

Petitioner's Address: _____ Respondent's Address: _____

_____ _____

Any retirement benefits distributed to a non-employee spouse shall be made payable upon or after death of either party consistent with Family Code § 2550 and the employee shall elect a survivor benefit annuity, where available, for the benefit of the other party to ensure that the non-employee party's share of the community property interest in the pension plan is distributed to that party. A copy of this order shall be provided to the plan administrator and each party shall inform the plan administrator of any change in assets until all benefits are paid.

PETITIONER: _____ CASE NUMBER: _____
RESPONDENT: _____

ADDENDUM TO JUDGMENT

☐ Petitioner is awarded one-half interest in all retirement benefits earned during the marriage or domestic partnership and prior to the date of separation, as a result of Respondent's employment with _____ _____ . Name of plan, if known: _____ .

All retirement benefits earned by Petitioner through his/her employment with _____ before the date of marriage or domestic partnership and after the date of separation, if any, are confirmed to Petitioner.

☐ Respondent is awarded one-half interest in all retirement benefits earned during the marriage or domestic partnership and prior to the date of separation, as a result of Petitioner's employment with _____ _____ . Name of plan, if known: _____ .

All retirement benefits earned by Respondent through his/her employment with _____ before the date of marriage or domestic partnership and after the date of separation, if any, are confirmed to Respondent.

OTHER ORDERS:

☐ Pursuant to Family Code § 2107 (b)(3), Petitioner requests that the court grant his/her voluntary waiver of receipt of the Respondent's preliminary declaration of disclosures. Good cause exists for this waiver as the parties have fully discussed the property issues in this case and Petitioner believes that all property has been adequately disclosed and distributed in this Judgment. (*Applicable only if this is a default case and the parties have a written agreement.)*

☐ The parties represent and agree that this is a full and final settlement of all issues presented in this matter, including division of all assets and debts specifically included on disclosures and filed in this matter, whether accounted for in this Judgment or not. The court shall retain jurisdiction to make rulings only on later-discovered assets and debts.

☐ The parties hereby further agree that they shall execute any and all documents required to carry out the terms of this Judgment. In the event a party fails to execute documents required to transfer property, the aggrieved party may file a Request for Order requesting that the Clerk of the Court be designated as Elisor to sign in place of the non-cooperative party in order to accomplish the required transfer(s).

☐ Petitioner ☐ Respondent, understanding that the distribution of assets and debts included herein may be unequal, hereby waives his/her right to an equal distribution.

☐ As and for an equalization of the distribution of Community Assets and Debts, ☐ Petitioner ☐ Respondent shall pay to the other party the sum of $ _____ . The equalization payment shall be made as follows: _____

_____

_____

_____

☐ **MISCELLANEOUS ORDERS:** _____

_____

_____

_____

_____

_____

PETITIONER: _____ CASE NUMBER: _____
RESPONDENT: _____

ADDENDUM TO JUDGMENT

The parties are responsible for knowing and understanding the terms of the Judgment. If you have a question, or are uncertain about the terms of this Judgment, legal assistance or research should be conducted prior to signing.

This judgment may be signed by a Court Commissioner as a Judge Pro Tem.

THE UNDERSIGNED PARTIES APPROVE AS TO FORM AND CONTENT:

Date: _____

_____ _____
(PRINTED NAME OF PETITIONER) (SIGNATURE OF PETITIONER)

Date: _____

_____ _____
(PRINTED NAME OF RESPONDENT) (SIGNATURE OF RESPONDENT)

☐ Respondent was not present, thus his/her signature is not required.

THIS ADDENDUM TO JUDGMENT IS ORDERED INCORPORATED INTO AND MADE A PART OF THIS JUDGMENT AND THE PARTIES ARE ORDERED TO COMPLY WITH ALL OF THE EXECUTORY TERMS.

_____ _____
(JUDGE/COMMISSIONER) (DATE)

PETITIONER: _____ CASE NUMBER: _____

RESPONDENT: _____

ADDENDUM TO JUDGMENT

(If this is a Marital or Domestic Partnership Settlement Addendum, check one)

☐ This is NOT pursuant to a Default, and NEITHER party's signature must be notarized.

☐ This IS pursuant to a Default, and DEFAULTING PARTY'S signature must be notarized.

NOTARY

==========

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF CALIFORNIA
COUNTY OF RIVERSIDE

On _____ before me, (here insert name and title of the officer), personally appeared

_____ ,

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____ (Seal)

==========

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):* Self-Represented	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE ☐ 4175 Main St.. Riverside. CA 92501 ☐ 880 N. State St., Hemet, CA 92543 ☐ 46-200 Oasis St., Indio, CA 92201 ☐ 265 N. Broadway, Blythe, CA 92225	
PETITIONER: RESPONDENT:	
NOTICE OF ENTRY OF JUDGMENT	CASE NUMBER:

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

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

Date:

Clerk, by _____, Deputy

—NOTICE TO ATTORNEY OF RECORD OR PARTY WITHOUT ATTORNEY—

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

STATEMENT IN THIS BOX APPLIES ONLY TO JUDGMENT OF DISSOLUTION

Effective date of termination of marital or domestic partnership status *(specify):*

WARNING: Neither party may remarry or enter into a new domestic partnership until the effective date of the termination of marital or domestic partnership status, as shown in this box.

CLERK'S CERTIFICATE OF MAILING

I certify that I am not a party to this cause and that a true copy of the *Notice of Entry of Judgment* was mailed first class, postage fully prepaid, in a sealed envelope addressed as shown below, and that the notice was mailed

at *(place):* , California, on *(date):*

Date: Clerk, by _____, Deputy

Name and address of petitioner or petitioner's attorney

Name and address of respondent or respondent's attorney

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

NOTICE OF ENTRY OF JUDGMENT
(Family Law—Uniform Parentage—Custody and Support)

Family Code, §§ 2338, 7636,7637
www.courtinfo.ca.gov

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address):*

TELEPHONE NO.: FAX NO. (*Optional):*

E-MAIL ADDRESS *(Optional):*

ATTORNEY FOR *(Name):* Self-Represented

COURT PERSONNEL:
STAMP DATE RECEIVED HERE

DO NOT FILE

SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE

- ☐ 4175 Main St., Riverside, CA 92501
- ☐ 880 N. State St., Hemet, CA 92543
- ☐ 46-200 Oasis St., Indio, CA 92201
- ☐ 265 N. Broadway, Blythe, CA 92225

PETITIONER/PLAINTIFF:

RESPONDENT/DEFENDANT:

OTHER PARENT:

CHILD SUPPORT CASE REGISTRY FORM

☐ Mother ☒ First form completed
☐ Father ☐ Change to previous information

CASE NUMBER:

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

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

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

Child Support:	Family Support:	Spousal Support:
(1) ☐ Current base child support: $ ☐ Reserved order ☐ $0 (zero) order	☐ Current base family support: $ ☐ Reserved order ☐ $0 (zero) order	☐ Current spousal support: $ ☐ Reserved order ☐ $0 (zero) order
(2) ☐ Additional monthly support: $	☐ Additional monthly support: $	
(3) ☐ Total past-due support: $	☐ Total past-due support: $	☐ Total past-due support: $
(4) ☐ Payment on past-due support: $	☐ Payment on past-due support: $	☐ Payment on past-due support: $

   (5) Wage withholding was ☐ ordered ☐ ordered but stayed until *(date):*

2. Person required to pay child or family support *(name):*
   Relationship to child *(specify):* SELECT
3. Person or agency to receive child or family support payments *(name):*
   Relationship to child *(if applicable):* SELECT

TYPE OR PRINT IN INK

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

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

	Child's name	Date of birth	Social security number
a.			
b.			
c.			

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

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

5. Father's name:
   a. Date of birth:
   b. Social security number:
   c. Street address:

      City, state, zip code:
   d. Mailing address:

      City, state, zip code:
   e. Driver's license number:

      State:
   f. Telephone number:
   g. ☐ Employed ☐ Not employed ☐ Self-employed

      Employer's name:

      Street address:

      City, state, zip code:

      Telephone number:

6. Mother's name:
   a. Date of birth:
   b. Social security number:
   c. Street address:

      City, state, zip code:
   d. Mailing address:

      City, state, zip code:
   e. Driver's license number:

      State:
   f. Telephone number:
   g. ☐ Employed ☐ Not employed ☐ Self-employed

      Employer's name:

      Street address:

      City, state, zip code:

      Telephone number:

7. ☐ A restraining order, protective order, or nondisclosure order due to domestic violence is in effect.
   a. The order protects: ☐ Father ☐ Mother ☐ Children
   b. From: ☐ Father ☐ Mother
   c. The restraining order expires on *(date):*

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

Date:

(TYPE OR PRINT NAME) (SIGNATURE OF PERSON COMPLETING THIS FORM)

INFORMATION SHEET FOR CHILD SUPPORT CASE REGISTRY FORM

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

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

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

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

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

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

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

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

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

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

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

Instructions for numbered paragraphs:

1. a. Enter the date the court order was filed. This date is shown in the "COURT PERSONNEL: STAMP DATE RECEIVED HERE" box on page 1 at the top of the order on the right side. If the order has not been filed, leave this item blank for the court clerk to fill in.

   b. If the court order you filed or received is the first child or family support order for this case, check the box by "Initial child support or family support order." If this is a change to your order, check the box by "Modification."

   c. Information regarding the amount and type of support ordered and wage withholding is on the court order you are filing or have received.

      (1) If your order provides for any type of current support, check all boxes that describe that support. For example, if your order provides for both child and spousal support, check both of those boxes. If there is an amount, put it in the blank provided. If the order says the amount is reserved, check the "Reserved order" box. If the order says the amount is zero, check the "$0 (zero) order" box. Do not include child care, special needs, uninsured medical expenses, or travel for visitation here These amounts will go in (2). Do NOT complete the Child Support Case Registry form if you receive spousal support only.

      (2) If your order provides for a set monthly amount to be paid as additional support for such needs as child care, special needs, uninsured medical expenses or travel for visitation check the box in Item 2 and enter the monthly amount. For example, if your order provides for base child support and in addition the paying parent is required to pay $300 per month, check the box in item 2 underneath the "Child Support" column and enter $300. Do NOT check this box if your order provides only for a payment of a percentage, such as 50% of the childcare.

(3) If your order determined the amount of past due support, check the box in Item 3 that states the type of past due support and enter the amount. For example, if the court determined that there was $5000 in past due child support and $1000 in past due spousal support, you would check the box in item 3 in the "Child Support" column and enter $5000 and you would also check the box in item 3 in the "Spousal Support" column and enter $1000.

(4) If your order provides for a specific dollar amount to be paid towards any past due support, check the box in Item 4 that states the type of past due support and enter the amount. For example, the court ordered $350 per month to be paid on the past due child support, you would check the box in Item 4 in the "Child Support" column and enter $350.

(5) Check the "ordered" box if wage withholding was ordered with no conditions. Check the box "ordered but stayed until" if wage withholding was ordered but is not to be deducted until a later date. If the court delayed the effective date of the wage withholding, enter the specific date. Check only one box in this item.

2. a. Write the name of the person who is supposed to pay child or family support.
   b. Write the relationship of that person to the child.

3. a. Write the name of the person or agency supposed to receive child or family support payments.
   b. Write the relationship of that person to the child.

4. List the full name, date of birth, and social security number for each child included in the support order. If there are more than five children included in the support order, check the box below item 4e and list the remaining children with dates of birth and social security numbers on another sheet of paper. Attach the other sheet to this form.

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

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

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

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

5. If you are the father in this case, list your full name in this space. See instructions for a–g under item 6 below.

6. If you are the mother in this case, list your full name in this space.

   a. List your date of birth.
   b. Write your social security number.
   c. List the street address, city, state, and zip code where you live.
   d. List the street address, city, state, and zip code where you want your mail sent, if different from the address where you live.
   e. Write your driver's license number and the state where it was issued.
   f. List the telephone number where you live.
   g. Indicate whether you are employed, not employed, self-employed, or by checking the appropriate box. If you are employed, write the name, street address, city, state, zip code, and telephone number where you work.

7. If there is a restraining order, protective order, or nondisclosure order, check this box.

   a. Check the box beside each person who is protected by the restraining order.
   b. Check the box beside the parent who is restrained.
   c. Write the date the restraining order expires. See the restraining order, protective order, or nondisclosure order for this date.

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

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

Print This Form Clear This Form

Instructions for filing

1. Fill out the form packet.

2. Make 3 copies - (You will have the Original, plus 3 more sets).

3. You will need 3 envelopes with sufficient postage (2 large envelopes, 1 small envelope). Address 1 large envelope to yourself, and the other large envelope to the Respondent. The small envelope is addressed to the Respondent only.

4. File – (give the original plus 2 copies to the Clerk, plus all envelopes). Keep the extra copy for yourself.

5. The Signed Judgment will be returned to you by mail. If you receive the Judgment back and it has been rejected, please visit the Family Law Facilitator for further instruction.