



## STANISLAUS COUNTY SUPERIOR COURT

[www.stanct.org](http://www.stanct.org)

(209) 530-3100

Revised 06/10

# Petition to Establish Parental Relationship Packet

This packet includes the necessary forms to establish Parentage, Custody, Visitation and Child Support.

The term "Establishing parentage" means determining who the legal parents of a child are if the parents were not married when the child was born. If the parents were married when the child was born, the law usually considers the husband to be the father.

After January 1, 2005, if parents are registered domestic partners when a child is born, the law assumes that the domestic partners are parents. However, since this law is new and unsettled, same sex parents should get legal advice to make sure that the parentage is clear.

Parents who are not married when a child is born can sign a Voluntary Declaration of Paternity at the hospital. This form can also be signed at the local child support agency, public health or the Family Law Facilitator's Office if both parties are present and show identification. When people who are not married cannot agree about parentage, the Court can order genetic testing.

Usually a child's parentage must be established **BEFORE** the Court can make any child support, custody and/or visitation orders.

**ALERT! If a person is established as a legal parent of a child, that person MUST support the child. It is a crime for a legal parent to fail to support his or her child. A legal parent also has the right to get custody and/or visitation rights related to the child.**

### Additional Information:

Even if you get temporary orders for child support, child custody and visitation, **you MUST submit the documents necessary to obtain a Judgment of Paternity. THE COURT WILL NOT FINALIZE YOUR CASE FOR YOU NOR DOES FILING A PETITION SETTLE YOUR ISSUES. YOU MUST SUBMIT JUDGMENT PAPERWORK.**

A Judgment of Paternity protects your child's rights to receive support from both parents, to collect Social Security Worker's Compensation, State Disability or other benefits if a parent dies or becomes disabled, and to inherit from the estates of both parents or from other family members as the survivor of a deceased parent.

A Judgment of Paternity protects each parent's rights of support for the child from the other parent; to visit and be with the child; to access a child's medical, dental and educational records; and to participate in important decisions concerning the child.

Judicial Council forms, local forms and information are available in the Clerk's Office, the Stanislaus County Law Library located at 1101 13<sup>th</sup> Street, Modesto, and on the following Websites:

- Stanislaus County Superior Court  
[www.stanct.org](http://www.stanct.org)
- Local forms  
[www.stanct.org/Forms.aspx?id=3](http://www.stanct.org/Forms.aspx?id=3)
- Judicial Council's Self-Help website  
[www.courtinfo.ca.gov/selfhelp](http://www.courtinfo.ca.gov/selfhelp)
- For more information on Libraries, Websites, or Self-Help Legal Books  
[www.courtinfo.ca.gov/selfhelp/lowcost](http://www.courtinfo.ca.gov/selfhelp/lowcost)
- California Superior Court's Interactive Electronic Forms Program  
[www.ezlegalfile.com](http://www.ezlegalfile.com)
- California's Free Website for Legal Help  
[www.lawhelpcalifornia.org](http://www.lawhelpcalifornia.org)

### **Superior Court Self-Help Center/Family Law Facilitator's Office**

800 11<sup>th</sup> Street, Room 220, Modesto

Hours: **Monday – Thursday**, 8am – 12:30pm and 1pm – 3pm; **Friday**, 8am – 12pm

**PROVIDING ASSISTANCE TO PARTIES REPRESENTING THEMSELVES**

**Both offices provide services on a first come, first serve basis.**

#### **NOTES:**

- **The Income and Expense Declaration** (FL-150) is included in this packet. This form is also accessible on the Judicial Council website and it can be filled in directly from the website, and calculations will be computed for you.
- **Child Custody and Visitation issues** - If you are in agreement you may use the "Stipulation and Order for Custody and/or Visitation of Children" forms along with a Petition. If you are not in agreement, you may use an "Order to Show Cause" or "Notice of Motion" packet.
- **Notice of Change of Address and Telephone Number** (MC-040) - When you have a change in your address or telephone number, you **MUST** purchase this form and file it with the Clerk's Office.

Material prepared and/or distributed by the Superior Court Clerk's Office **IS INTENDED FOR INFORMATIONAL AND EDUCATIONAL PURPOSES ONLY**. Such material is **NOT** intended to be and **IT IS NOT LEGAL ADVICE** as to your specific case. **IT IS NOT INTENDED TO TAKE THE PLACE OF COMPETENT LEGAL ADVICE FROM A FAMILY LAW ATTORNEY**. You are strongly advised to seek the advice of a licensed family law attorney before starting or completing your case in order to protect valuable legal rights that you may have and of which you may be unaware. Please contact a competent family law attorney of your choice or contact the **LAWYERS REFERENCE SERVICE** of the Stanislaus County Bar Association at (209) 571-5727 for a referral. The Clerk's Office cannot give legal advice.

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

### What is a parenting plan?

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

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

### What are legal and physical custody?

A parenting plan usually includes:

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

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

### Can we make our own parenting plan?

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

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

### What if there is domestic violence or a protective order?

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

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

### What if we don't have a parenting plan?

If you can't reach an agreement, the court will refer you to mediation with family court services (FCS) to try to work out a parenting plan.

### What is mediation with family court services?

Family court services (FCS) provides mediation to help parents resolve disagreements about the care of their child. The mediator will meet with you and the other parent to try to help you both make a parenting plan. An orientation may be provided that offers additional information about the process.

If you are concerned about meeting with the other parent in mediation, or there is a domestic violence issue or a protective order involving the other parent, you may ask to meet alone with the mediator without the other parent. You may also request to have a support person with you at mediation. The support person may not speak for you.

### Do we have to agree to a parenting plan in mediation?

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

**Are there other ways to resolve our dispute?**

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

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

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

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

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

**Court Hearing**

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

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

**Where can I get help?**

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

1. Contact family court services.
2. Contact the family law facilitator or self-help center for information, local rules and court forms, and referrals to local legal services providers.
3. Find an attorney through your local bar association, the State Bar of California at <http://calbar.ca.gov>, or the Lawyer Referral Service at 1-866-442-2529.
4. Hire a private mediator for help with your parenting agreement. A mediator may be an attorney or counselor. Contact your local bar association, court ADR program, or family court services for a referral to local resources.
5. Find information on the Online Self-Help Center website at [www.courts.ca.gov/selfhelp](http://www.courts.ca.gov/selfhelp).
6. For free and low-cost legal help (if you qualify), go to: [www.lawhelpcalifornia.org](http://www.lawhelpcalifornia.org).
7. Find information at your local law library or ask at your public library.
8. Ask for a court hearing and let the judge decide what is best for your child.

**Requests for Accommodations**

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

# Yes, I need an Interpreter!

Sí, necesito un Intérprete!

**Name** (Nombre): \_\_\_\_\_

**Case Number** (Número de caso): \_\_\_\_\_

**Language/Dialect Spoken** (Que idioma/dialecto habla):

**Spanish (Español)**      **Dialecto:** \_\_\_\_\_

**Other:** \_\_\_\_\_      **Dialect:** \_\_\_\_\_

## Person requesting an Interpreter is:

Persona que solicita el intérprete es:

**Petitioner** (Solicitante)

**Respondent** (Demandado)

**Protected Person** (Persona Protegida)

**Restrained Person** (Persona Restringida)

**Other** (Otro): \_\_\_\_\_

**CONFIDENTIAL**

<b>ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME, ADDRESS, PHONE)</b>  Attorney for:  <b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF STANISLAUS</b> Street Address: 800 11th Street, Modesto, CA 95354 Civil Clerk' Office: 1100 I Street, P.O. Box 1098, Modesto, CA 95353	<i>FOR COURT USE ONLY NOTICE TO CLERK Place in confidential part of the court file.</i>
<b>Petitioner:</b>  <b>Respondent:</b>	
<b>CONFIDENTIAL DECLARATION</b>	Case Number:

You are required to complete this *Confidential Declaration* when you file any petition or response in any family law case type. You are required to provide the social security numbers for yourself and your spouse on this form if you know them. This form will be kept in a confidential part of the court file and may not be disclosed without good cause shown to the court.

After you have completed this form, you may redact (block or cross out) any social security number listed on this form from any future document or other written material filed with the court.

You may not redact or change any previously filed documents without a court order.

**Petitioner (name):** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Alias (if any):** \_\_\_\_\_ **Social security number:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Drivers License:** \_\_\_\_\_

**Female**     **Male**

**Respondent (name):** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Alias (if any):** \_\_\_\_\_ **Social security number:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Drivers License:** \_\_\_\_\_

**Female**     **Male**

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 Your Name)

\_\_\_\_\_  
(Sign Your Name)

PARTY WITHOUT ATTORNEY OR ATTORNEY STATE BAR NUMBER: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF STANISLAUS</b> STREET ADDRESS: 1100 I STREET MAILING ADDRESS: P.O. BOX 1098 CITY AND ZIP CODE: MODESTO, CA 95353 BRANCH NAME:	
PETITIONER:  RESPONDENT:	
<b>PETITION TO DETERMINE PARENTAL RELATIONSHIP</b>	CASE NUMBER:

1. The petitioner
  - a.  gave birth to the children listed in item 2.
  - b.  wants to be determined as a parent of the children in item 2 because *(specify)*:
  - c.  wants to be determined as not a parent of the children listed in item 2 because *(specify)*:
  - d.  is the child or the child's personal representative *(specify court and date of appointment)*:
  - e.  Other *(specify)*:
  
2. The children are
  - a. Child's name Birthdate Age
  - b.  a child who is not yet born.
  
3. The court has jurisdiction over the respondent because the respondent:
  - a.  lives in this state.
  - b.  had sexual intercourse in this state, which resulted in conception of the children listed in item 2.
  - c.  Other *(specify)*:
  
4. The action is brought in this county because *(you must check one or more to file in this county)*:
  - a.  the children live or are found in this county.
  - b.  a parent is deceased and proceedings for administration of the estate have been or could be started in this county.
  
5. Petitioner claims *(check all that apply)*:
  - a.  respondent is the parent of the children listed in item 2 above.
  - b.  parentage has been determined by a voluntary declaration of parentage or paternity. *(Attach a copy if available.)*
  - c.  respondent is the children's parent and has failed to support the children.
  - d.  *(name)*: has furnished or is furnishing the following reasonable expenses of pregnancy and birth for which the respondent as parent of the children should pay:

Amount	Payable to	For <i>(specify)</i> :
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  - e.  public assistance is being provided to the children.
  - f.  Other *(specify)*:
  
6. A completed *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)* (form FL-105) is attached.

PETITIONER:	CASE NUMBER:
RESPONDENT:	

Petitioner asks the court to make the determinations indicated below.

7. PARENT-CHILD RELATIONSHIP (check all that apply):

- a.  Petitioner  Respondent is the parent of the children listed in item 2.
- b.  Petitioner  Respondent is not the parent of the children listed in item 2.
- c.  Petitioner requests genetic testing to determine whether the  Petitioner  Respondent is the parent of the children listed in item 2.

8. CHILD CUSTODY AND VISITATION (PARENTING TIME)

a. If  Petitioner  Respondent is found to be the parent of the children listed in item 2.

	Petitioner	Respondent	Joint	Other
b. Legal custody of children to .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Physical custody of children to .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Child visitation (parenting time) be granted to .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

As requested in  form FL-311  form FL-312  form FL-341(C)  
 form FL-341(D)  form FL-341(E)  Attachment 6c(1)

e. The facts in support of the requested custody and visitation (parenting time) orders are (specify):  
 Contained in the attached declaration.

9. REASONABLE EXPENSES OF PREGNANCY AND BIRTH

Reasonable expenses of pregnancy and birth to be paid by as follows:

	Petitioner	Respondent	Joint
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. FEES AND COSTS OF LITIGATION

	Petitioner	Respondent	Joint
a. Attorney fees to be paid by	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Expert fees, guardian ad litem fees, and other costs of the action or pretrial proceedings to be paid by	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. NAME CHANGE

Children's names be changed, according to Family Code section 7638, as follows (specify old and new names):

12. CHILD SUPPORT

The court may make orders for support of the children and issue an earnings assignment without further notice to either party.

13.  OTHER ORDERS REQUESTED (specify):

14. I have read the restraining order on the back of the *Summons* (FL-210) and I understand it applies to me when this *Petition* is filed.

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 PETITIONER)

A blank *Response to Petition to Establish Parental Relationship* (form FL-220) must be served on the respondent with this petition.

**NOTICE: If you have a child from this relationship, the court is required to order child support based upon the income of both parents. Support normally continues until the child is 18. You should supply the court with information about your finances. Otherwise, the child support order will be based upon information supplied by the other parent. Any party required to pay child support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent.**



ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):     TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF STANISLAUS</b> STREET ADDRESS: 1100 I STREET MAILING ADDRESS: P.O. BOX 1098 CITY AND ZIP CODE: MODESTO, CA 95354 BRANCH NAME: _____	
(This section applies only to family law cases.) PETITIONER: RESPONDENT: OTHER PARTY:	
(This section applies only to guardianship cases.) GUARDIANSHIP OF (Name): _____ Minor	CASE NUMBER: _____
<b>DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)</b>	

1. I am a party to this proceeding to determine custody of a child.
2.  My present address and the present address of each child residing with me is confidential under Family Code section 3429 as I have indicated in item 3.
3. There are (specify number): \_\_\_\_\_ minor children who are subject to this proceeding, as follows:  
**(Insert the information requested below. The residence information must be given for the last FIVE years.)**

a. Child's name	Place of birth	Date of birth	Sex
Period of residence to present	Address <input type="checkbox"/> Confidential	Person child lived with (name and complete current address) <input type="checkbox"/> Confidential	Relationship
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	Child's residence (City, State)	Person child lived with (name and complete current address)	
b. Child's name	Place of birth	Date of birth	Sex
<input type="checkbox"/> Residence information is the same as given above for child a. (If NOT the same, provide the information below.)			
Period of residence to present	Address <input type="checkbox"/> Confidential	Person child lived with (name and complete current address) <input type="checkbox"/> Confidential	Relationship
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	Child's residence (City, State)	Person child lived with (name and complete current address)	

- c.  Additional residence information for a child listed in item a or b is continued on attachment 3c.
- d.  Additional children are listed on form FL-105(A)/GC-120(A). (Provide all requested information for additional children.)

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

SHORT TITLE:  	CASE NUMBER:  
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4. Do you have information about, or have you participated as a party or as a witness or in some other capacity in, another court case or custody or visitation proceeding, in California or elsewhere, concerning a child subject to this proceeding?

Yes  No (If yes, attach a copy of the orders (if you have one) and provide the following information):

Proceeding	Case number	Court <i>(name, state, location)</i>	Court order or judgment <i>(date)</i>	Name of each child	Your connection to the case	Case status
a. <input type="checkbox"/> Family						
b. <input type="checkbox"/> Guardianship						
c. <input type="checkbox"/> Other						

Proceeding	Case Number	Court <i>(name, state, location)</i>
d. <input type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency		
e. <input type="checkbox"/> Adoption		

5.  One or more domestic violence restraining/protective orders are now in effect. (Attach a copy of the orders if you have one and provide the following information):

Court	County	State	Case number <i>(if known)</i>	Orders expire <i>(date)</i>
a. <input type="checkbox"/> Criminal				
b. <input type="checkbox"/> Family				
c. <input type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency				
d. <input type="checkbox"/> Other				

6. Do you know of any person who is not a party to this proceeding who has physical custody or claims to have custody of or visitation rights with any child in this case?  Yes  No (If yes, provide the following information):

a. Name and address of person   <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights <hr/> Name of each child	b. Name and address of person   <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights <hr/> Name of each child	c. Name and address of person   <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights <hr/> Name of each child
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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)

7.  Number of pages attached: \_\_\_\_\_

**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.**

CASE NAME: _____	CASE NUMBER: _____
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**ATTACHMENT TO  
DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)**

<input type="checkbox"/> Child's name <input type="checkbox"/> Residence information is the same as given on form FL-105/GC-120 for child a. (If NOT the same, provide the information below.)		Place of birth	Date of birth	Sex
Period of residence  to present	Present address  <input type="checkbox"/> Confidential	Person child lived with (name and complete current address)  <input type="checkbox"/> Confidential		Relationship
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	Child's residence (City, State)	Person child lived with (name and complete current address)		
<input type="checkbox"/> Child's name <input type="checkbox"/> Residence information is the same as given on form FL-105/GC-120 for child a. (If NOT the same, provide the information below.)		Place of birth	Date of birth	Sex
Period of residence  to present	Address  <input type="checkbox"/> Confidential	Person child lived with (name and complete current address)  <input type="checkbox"/> Confidential		Relationship
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	Child's residence (City, State)	Person child lived with (name and complete current address)		
<input type="checkbox"/> Child's name <input type="checkbox"/> Residence information is the same as given on form FL-105/GC-120 for child a. (If NOT the same, provide the information below.)		Place of birth	Date of birth	Sex
Period of residence  to present	Address  <input type="checkbox"/> Confidential	Person child lived with (name and complete current address)  <input type="checkbox"/> Confidential		Relationship
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	Child's residence (City, State)	Person child lived with (name and complete current address)		

**SUMMONS**

(Parentage—Custody and Support)

**CITACIÓN (Paternidad—Custodia y Manutención)**

NOTICE TO RESPONDENT (Name):

AVISO AL DEMANDADO (Nombre):

FOR COURT USE ONLY  
(SOLO PARA USO DE LA CORTE)

You have been sued. Read the information below and on the next page.  
Lo han demandado. Lea la información a continuación y en la página siguiente.

Petitioner's name:

El nombre del demandante:

CASE NUMBER: (Número de caso)

<p>You have <b>30 calendar days</b> after this <i>Summons</i> and <i>Petition</i> are served on you to file a <i>Response</i> (form FL-220 or FL-270) at the court and have a copy served on the petitioner. A letter, phone call, or court appearance will not protect you.</p>	<p>Tiene <b>30 días de calendario</b> después de haber recibido la entrega legal de esta Citación y Petición para presentar una Respuesta (formulario FL-220 o FL-270) ante la corte y efectuar la entrega legal de una copia al demandante. Una carta o llamada telefónica o una audiencia de la corte no basta para protegerlo.</p>
<p>If you do not file your <i>Response</i> on time, the court may make orders affecting your right to custody of your children. You may also be ordered to pay child support and attorney fees and costs.</p>	<p>Si no presenta su Respuesta a tiempo, la corte puede dar órdenes que afecten la custodia de sus hijos. La corte también le puede ordenar que pague manutención de los hijos, y honorarios y costos legales.</p>
<p>For legal advice, contact a lawyer immediately. Get help finding a lawyer at the California Courts Online Self-Help Center (<a href="http://www.courts.ca.gov/selfhelp">www.courts.ca.gov/selfhelp</a>), at the California Legal Services website (<a href="http://www.lawhelpca.org">www.lawhelpca.org</a>), or by contacting your local bar association.</p>	<p>Para asesoramiento legal, póngase en contacto de inmediato con un abogado. Puede obtener información para encontrar un abogado en el Centro de Ayuda de las Cortes de California (<a href="http://www.sucorte.ca.gov">www.sucorte.ca.gov</a>), en el sitio web de los Servicios Legales de California (<a href="http://www.lawhelpca.org">www.lawhelpca.org</a>), o poniéndose en contacto con el colegio de abogados de su condado.</p>
<p><b>NOTICE:</b> <i>The restraining order on page 2 remains in effect against each parent until the petition is dismissed, a judgment is entered, or the court makes further orders. This order is enforceable anywhere in California by any law enforcement officer who has received or seen a copy of it.</i></p>	<p><b>AVISO:</b> <i>La orden de protección que aparecen en la pagina 2 continuará en vigencia en cuanto a cada parte hasta que se emita un fallo final, se despidia la petición o la corte dé otras órdenes. Cualquier agencia del orden público que haya recibido o visto una copia de estas orden puede hacerla acatar en cualquier lugar de California.</i></p>
<p><b>FEE WAIVER:</b> If you cannot pay the filing fee, ask the clerk for a fee waiver form. The court may order you to pay back all or part of the fees and costs that the court waived for you or the other party.</p>	<p><b>EXENCIÓN DE CUOTAS:</b> Si no puede pagar la cuota de presentación, pida al secretario un formulario de exención de cuotas. La corte puede ordenar que usted pague, ya sea en parte o por completo, las cuotas y costos de la corte previamente exentos a petición de usted o de la otra parte.</p>

[SEAL]

1. The name and address of the court are: (El nombre y dirección de la corte son:)
2. The name, address, and telephone number of petitioner's attorney, or petitioner without an attorney, are: (El nombre, la dirección y el número de teléfono del abogado del demandante, o del demandante si no tiene abogado, son:)

Date (Fecha): \_\_\_\_\_ Clerk, by (Secretario, por) \_\_\_\_\_, Deputy (Asistente)

**STANDARD RESTRAINING ORDER**  
(Parentage—Custody and Support)

**ORDEN DE RESTRICCIÓN ESTÁNDAR**  
(Paternidad—Custodia y Manutención)

**Starting immediately, you and every other party are restrained from removing from the state, or applying for a passport for, the minor child or children for whom this action seeks to establish a parent-child relationship or a custody order without the prior written consent of every other party or an order of the court.**

This restraining order takes effect against the petitioner when he or she files the petition and against the respondent when he or she is personally served with the *Summons* and *Petition* OR when he or she waives and accepts service.

This restraining order remains in effect until the judgment is entered, the petition is dismissed, or the court makes other orders.

This order is enforceable anywhere in California by any law enforcement officer who has received or seen a copy of it.

***En forma inmediata, usted y cada otra parte tienen prohibido llevarse del estado a los hijos menores para quienes esta acción judicial procura establecer una relación entre hijos y padres o una orden de custodia, ni pueden solicitar un pasaporte para los mismos, sin el consentimiento previo por escrito de cada otra parte o sin una orden de la corte.***

*Esta orden de restricción entrará en vigencia para el demandante una vez presentada la petición, y para el demandado una vez que éste reciba la notificación personal de la Citación y Petición, o una vez que renuncie su derecho a recibir dicha notificación y se dé por notificado.*

*Esta orden de restricción continuará en vigencia hasta que se emita un fallo final, se despidan la petición o la corte dé otras órdenes.*

*Cualquier agencia del orden público que haya recibido o visto una copia de esta orden puede hacerla acatar en cualquier lugar de California.*

**NOTICE — ACCESS TO AFFORDABLE HEALTH INSURANCE** Do you or someone in your household need affordable health insurance? If so, you should apply for Covered California. Covered California can help reduce the cost you pay toward high-quality, affordable health care. For more information, visit [www.coveredca.com](http://www.coveredca.com). Or call Covered California at 1-800-300-1506.

**AVISO — ACCESO A SEGURA DE SALUD MÁS ECONOMICO** Necesita seguro de salud a un costo asequible, ya sea para usted o alguien en su hogar? Si es así, puede presentar una solicitud con Covered California. Covered California lo puede ayudar a reducir al costo que paga por seguro de salud asequible y de alta calidad. Para obtener más información, visite [www.coveredca.com](http://www.coveredca.com). O llame a Covered California al 1-800-300-0213.

ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME, ADDRESS, PHONE)  Attorney for:	FOR COURT USE ONLY
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF STANISLAUS</b>  Street Address: 800 11th Street, Modesto, CA 95354 Civil Clerk' Office: 1100 I Street, P.O. Box 1098, Modesto, CA 95353	
Petitioner:  Respondent:	RELATED CASE NOS: _____
<b>NOTICE OF FAMILY LAW CASE MANAGEMENT CONFERENCE</b>	<b>CASE NO:</b> _____

**TO ALL PARTIES: YOU MUST APPEAR AT THE FOLLOWING HEARING  
AS SCHEDULED BELOW. THIS HEARING IS NOT THE TRIAL!**

Date: _____ Time: _____ AM/PM Dept#: _____
This case is assigned to Judge _____, Dept _____ for all purposes.

**NOTICE TO THE PETITIONER (PERSON WHO FILED THIS CASE WITH THE COURT) –  
YOU MUST DO ALL OF THE FOLLOWING:**

1. The petition must be served on the other party, and proof of service of the petition **must** be filed within **sixty (60) calendar days after the petition is filed**. If a responsive pleading is not filed within **thirty (30) calendar days after service of the petition**, you **must** file a request for the entry of default, form #FL-165. After filing the request for entry of default, **you must file the necessary documents to obtain the default judgment and conclude your case**. You may obtain information and assistance in preparing these documents from our Family Law Facilitator/Self Help Center, 800 11th Street, Room 220, Modesto, CA.
2. You must also serve a copy of this **Notice of Case Management Conference** on the other person (respondent) with the petition along with a blank **Case Management Conference Statement**. You must also file a proof of service of the **Notice of Case Management Conference** within **five (5) calendar days** after the documents are served on the other person.
3. A **Case Management Conference Statement** form FL-005 **must be filed with the court and served on all parties** by each counsel or self-represented party **by the 15<sup>th</sup> calendar day before** the date set for the **Case Management Conference**.

**NOTICE TO THE RESPONDENT (PERSON WHO IS RESPONDING TO THIS CASE) - YOU  
MUST DO ALL OF THE FOLLOWING:**

1. **You must serve the other party and file your response to this case within thirty (30) days** after you are served with the petition. This time may not be extended except as authorized by Local Rule 7.03. **Your failure to file a timely response may result in a default being taken against you—preventing you from further participating in the case.**
2. A **Case Management Conference Statement** form FL-005 **must be filed with the court and served on all parties** by counsel or self-represented party **by the 15<sup>th</sup> calendar day before** the date set for the **Case Management Conference**.

**WARNING TO BOTH PARTIES:**

The Court can impose monetary sanctions and/or dismiss the case if the parties do not appear, if the parties do not timely file their Case Management Conference Statements, or if the parties fail to follow the rules set forth above.

Date: \_\_\_\_\_ Clerk, by \_\_\_\_\_, Deputy

(SEE PAGE 2 FOR ADDITIONAL IMPORTANT INFORMATION)  
NOTICE OF CASE MANAGEMENT CONFERENCE

## IMPORTANT CASE MANAGEMENT CONFERENCE INFORMATION, RULES, & REQUIREMENTS

Counsel and self-represented parties are obligated to review and comply with Local Rules regarding Family Law proceedings at the following website: <http://www.stanct.org/courts/RULES/index.html> . If you do not file the *Case Management Conference Statement* required by local rule, or attend the case management conference or participate effectively in the conference, the Court may impose sanctions (including dismissal of the case, striking of the petition/response, and/or requiring payment of money).

**A. Subjects to be considered at the case management conference.** At the case management conference, the parties must address, if applicable, and the court may take appropriate action with respect to the following:

- Whether there are any related cases;
- Whether any additional parties may be joined in the proceeding;
- Whether there are any other matters (e.g. out of state custody orders) that may affect the court's jurisdiction or processing the case;
- Whether the parties have agreements on issues such as child custody, child support, spousal support, or division of property;
- Whether discovery has been completed and, if not, by when it will be completed;
- Whether certain issues (e.g. marital status, date of separation, or date of valuation) should be bifurcated;
- Whether the case is entitled to any statutory preference, and if so, the statute granting the preference;
- If the trial date has not been previously set, the date by which the case will be ready for trial and the available trial dates;
- The estimated length of trial;
- The nature of the disputed issues; and other matters that should be considered by the court or addressed in its case management order.

**B. Meet and confer requirement.** Unless the court orders another time period, no later than **thirty (30) days** before the initial case management conference, the parties must meet and confer, **unless there exists a current restraining order prohibiting personal contact with the other party and both parties are self-represented**, in person or by telephone, to consider each of the issues identified in subdivision A, and, in addition, to consider the following:

- Identifying and, if possible, informally resolving any anticipated motions;
- Identifying the facts and issues in the case that are uncontested and may be stipulated to;
- Identifying the facts and issues in the case that are in dispute;
- Determining whether the issues in the case can be narrowed by eliminating any claims or defenses by means of a motion or otherwise;
- Possible settlement; and other relevant matters.

**C. Case Management Statement.** **No later than fifteen (15) calendar days before the initial case management conference date, each party must file an initial case management statement with the clerk of the court.** The parties must use the Mandatory Case Management Conference Statement. All applicable items on the form must be completed. In lieu of each party filing a separate case management statement, any two or more parties may file a joint statement.

**D. Case management order.** The court will issue a case management order in each case. The order will set a schedule for subsequent proceedings and otherwise provide for the management of the case.

**E. Order to Show Cause.** The court may issue an **Order to Show Cause** to any party violating any provision of this rule. Responsive papers to the Order to Show Cause **may be filed and served no later than five (5) court days before the hearing.** The court may issue monetary sanctions up to \$300 and/or dismiss the petition and/or strike the response.

### Sanctions that typically will be imposed at the Order to Show Cause Hearing.

Failure to file proof of service timely.

1st Violation	\$100 per party
2nd and subsequent violations	\$150 per party/dismissal of petition or striking of response.

Failure to meet and confer \$50 to \$250

Failure to fully complete the Case Management Conference Statement \$50 to \$100/striking the statement

### The following sanctions will apply without issuing an Order to Show Cause:

Failure to appear at Case Management Conference \$300

Failure to file a Case Management Conference Statement \$150

Failure to timely file Case Management Conference Statement (\$100 if filed day of the conference) (1/1/05) \$25

ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME, ADDRESS, PHONE)  Attorney for:	FOR COURT USE ONLY
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF STANISLAUS</b>  Street Address: 800 11th Street, Modesto, CA 95354 Civil Clerk' Office: 1100 I Street, P.O. Box 1098, Modesto, CA 95353	
Petitioner:  Respondent:	RELATED CASE NOS: _____
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Date: \_\_\_\_\_ Clerk, by \_\_\_\_\_, Deputy

(SEE PAGE 2 FOR ADDITIONAL IMPORTANT INFORMATION)  
NOTICE OF CASE MANAGEMENT CONFERENCE



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Failure to file a Case Management Conference Statement \$150

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ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):     TELEPHONE NO.: _____ FAX NO.: _____ E-MAIL ADDRESS: _____ ATTORNEY FOR (Name): _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF STANISLAUS</b> STREET ADDRESS: 1100 I STREET MAILING ADDRESS: P.O. BOX 1098 CITY AND ZIP CODE: MODESTO, CA 95353 BRANCH NAME: _____	
PETITIONER:  RESPONDENT:	
<b>PROOF OF SERVICE OF SUMMONS</b>	
CASE NUMBER: _____	

1. At the time of service I was at least 18 years of age and not a party to this action. **I served the respondent with copies of:**
  - a.  Family Law—Marriage/Domestic Partnership: *Petition—Marriage/Domestic Partnership* (form FL-100), *Summons* (form FL-110), and blank *Response—Marriage/Domestic Partnership* (form FL-120)
  - or-
  - b.  Uniform Parentage: *Petition to Establish Parental Relationship* (form FL-200), *Summons* (form FL-210), and blank *Response to Petition to Establish Parental Relationship* (form FL-220)
  - or-
  - c.  Custody and Support: *Petition for Custody and Support of Minor Children* (form FL-260), *Summons* (form FL-210), and blank *Response to Petition for Custody and Support of Minor Children* (form FL-270)
  - and
  - d.  (1)  Completed and blank *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act* (form FL-105)
  - (2)  Completed and blank *Declaration of Disclosure* (form FL-140)
  - (3)  Completed and blank *Schedule of Assets and Debts* (form FL-142)
  - (4)  Completed and blank *Income and Expense Declaration* (form FL-150)
  - (5)  Completed and blank *Financial Statement (Simplified)* (form FL-155)
  - (6)  Completed and blank *Property Declaration* (form FL-160)
  - (7)  *Request for Order* (form FL-300), and blank *Responsive Declaration to Request for Order* (form FL-320)
  - (8)  Other (*specify*): \_\_\_\_\_
  
2. Address where respondent was served:
  
3. I served the respondent by the following means (*check proper boxes*):
  - a.  **Personal service.** I personally delivered the copies to the respondent (Code Civ. Proc., § 415.10) on (*date*): \_\_\_\_\_ at (*time*): \_\_\_\_\_
  - b.  **Substituted service.** I left the copies with or in the presence of (*name*): \_\_\_\_\_ who is (*specify title or relationship to respondent*):
    - (1)  **(Business)** a person at least 18 years of age who was apparently in charge at the office or usual place of business of the respondent. I informed him or her of the general nature of the papers.
    - (2)  **(Home)** a competent member of the household (at least 18 years of age) at the home of the respondent. I informed him or her of the general nature of the papers.

on (*date*): \_\_\_\_\_ at (*time*): \_\_\_\_\_

I thereafter mailed additional copies (by first class, postage prepaid) to the respondent at the place where the copies were left (Code Civ. Proc., § 415.20b) on (*date*): \_\_\_\_\_

A **declaration of diligence** is attached, stating the actions taken to first attempt personal service.

PETITIONER:	CASE NUMBER:
RESPONDENT:	

3. c.  **Mail and acknowledgment service.** I mailed the copies to the respondent, addressed as shown in item 2, by first-class mail, postage prepaid, on *(date)*: from *(city)*:
- (1)  with two copies of the *Notice and Acknowledgment of Receipt* (form FL-117) and a postage-paid return envelope addressed to me. **(Attach completed *Notice and Acknowledgment of Receipt* (form FL-117.)**  
(Code Civ. Proc., § 415.30.)
- (2)  to an address outside California (by registered or certified mail with return receipt requested). **(Attach signed return receipt or other evidence of actual delivery to the respondent.)** (Code Civ. Proc., §§ 415.40, 417.20.)
- d.  **Other** (*specify code section*):  
 Continued on Attachment 3d.

4. **Person who served papers**

Name:  
Address:

Telephone number:

This person is

- a.  exempt from registration under Business and Professions Code section 22350(b).
- b.  not a registered California process server.
- c.  a registered California process server:  an employee or  an independent contractor
- (1) Registration no.:
- (2) County:
- d. **The fee** for service was (*specify*): \$


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

-or-

6.  **I am a California sheriff, marshal, or constable**, and I certify that the foregoing is true and correct.

Date:

\_\_\_\_\_

(NAME OF PERSON WHO SERVED PAPERS)  (SIGNATURE OF PERSON WHO SERVED PAPERS)

ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME, ADDRESS, PHONE)  Attorney for:	<i>FOR COURT USE ONLY</i>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF STANISLAUS</b> Street Address: 800 11th Street, Modesto, CA 95354 Civil Clerk' Office: 1100 I Street, P.O. Box 1098, Modesto, CA 95353	
<b>Plaintiff/Petitioner:</b>  <b>Defendant/Respondent:</b>	RELATED CASES:
<b>CASE MANAGEMENT CONFERENCE STATEMENT</b>	<b>CASE NUMBER:</b> <b>Date:</b> <b>Time:</b>

1. Names of parties/attorneys:

a) Petitioner \_\_\_\_\_ Attorney \_\_\_\_\_

b) Respondent \_\_\_\_\_ Attorney \_\_\_\_\_

2. Nature of action (check the applicable action):

- Dissolution of marriage, legal separation, or nullity
- Action to establish parent and child relationship
- Dissolution of domestic partnership

3. Service of pleadings:

a) Date of service of petition \_\_\_\_\_ If not served, explain: \_\_\_\_\_

\_\_\_\_\_

b) Date of filing of response or default: \_\_\_\_\_

4. Case information (complete all applicable sections):

a) Date of marriage/partnership: \_\_\_\_\_ Date of separation: \_\_\_\_\_

b) Names/ages of minor children:


5. Other related family law cases (includes out of county/state orders such as domestic violence, dissolution judgments, custody or support): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Have parties met and conferred? \_\_\_\_\_ If not, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Describe any discovery conducted to date: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Describe discovery to be conducted: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Estimated time to complete discovery: \_\_\_\_\_ months.

9. Issues agreed upon (e.g. child custody/visitation, child/spousal support, division of property) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Issues that a party believes should be bifurcated (e.g. marital status, date of separation or date of valuation) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Estimated date that party will be ready for trial (**the court anticipates that a case should be ready for trial within 3-6 months from the date of the case management conference**) \_\_\_\_\_  
If longer than 6 months, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. Estimated length of trial (hours or days): \_\_\_\_\_

DATE: \_\_\_\_\_

\_\_\_\_\_  
Signature of Party/Attorney for Party

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, State Bar number, and address):</i>  TELEPHONE NO.: _____ FAX NO. <i>(Optional):</i> _____ E-MAIL ADDRESS <i>(Optional):</i> _____ ATTORNEY FOR <i>(Name):</i> _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF STANISLAUS</b> STREET ADDRESS: 1100 I STREET MAILING ADDRESS: P.O. BOX 1098 CITY AND ZIP CODE: MODESTO, CA 95354 BRANCH NAME: _____	
PETITIONER/PLAINTIFF: _____  RESPONDENT/DEFENDANT: _____  OTHER PARENT/PARTY: _____	CASE NUMBER: _____  <i>(If applicable, provide):</i>  HEARING DATE: _____ HEARING TIME: _____ DEPT.: _____
<b>PROOF OF SERVICE BY MAIL</b>	

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

1. I am at least 18 years of age, not a party to this action, and I am a resident of or employed in the county where the mailing took place.
2. My residence or business address is:
  
3. I served a copy of the following documents *(specify)* :

by enclosing them in an envelope AND

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

4. The envelope was addressed and mailed as follows:

- a. Name of person served:
- b. Address:
  
- c. Date mailed:
- d. Place of mailing *(city and state)*:

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

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

Date:

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



## INFORMATION SHEET FOR PROOF OF SERVICE BY MAIL

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

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

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

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

*Complete the top section of the proof of service forms as follows:*

**First box, left side:** In this box print the name, address, and phone number of the person for whom you are serving the documents.

**Second box, left side:** Print the name of the county in which the legal action is filed and the court's address in this box. Use the same address for the court that is on the documents you are serving.

**Third box, left side:** Print the names of the petitioner/plaintiff, respondent/defendant, and other parent in this box. Use the same names listed on the documents you are serving.

**First box, top of form, right side:** Leave this box blank for the court's use.

**Second box, right side:** Print the case number in this box. This number is also stated on the documents you are serving.

**Third box, right side:** Print the hearing date, time, and department. Use the same information that is on the documents you are serving.

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

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

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

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

ATTORNEY OR PARTY WITHOUT ATTORNEY OR GOVERNMENTAL AGENCY (under Family Code, §§ 17400, 17406) <i>(Name, State Bar number, and address).</i>  TELEPHONE NO.: _____ FAX NO.: _____ ATTORNEY FOR <i>(Name)</i> : _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF STANISLAUS</b> STREET ADDRESS: 1100 I STREET MAILING ADDRESS: P.O. BOX 1098 CITY AND ZIP CODE: MODESTO, CA 95353 BRANCH NAME: _____	
PETITIONER/PLAINTIFF: _____  RESPONDENT/DEFENDANT: _____  OTHER PARENT/PARTY: _____	CASE NUMBER: _____  <i>(If applicable, provide):</i> HEARING DATE: _____ HEARING TIME: _____ DEPT.: _____
<b>PROOF OF PERSONAL SERVICE</b>	

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

a. Date:	b. Time:
c. Address:	
  
5. I am
 

a. <input type="checkbox"/> not a registered California process server.	d. <input type="checkbox"/> exempt from registration under Business & Profession Code section 22350(b).
b. <input type="checkbox"/> a registered California process server.	
c. <input type="checkbox"/> an employee or independent contractor of a registered California process server.	e. <input type="checkbox"/> a California sheriff or marshal.
  
6. My name, address, and telephone number, and, if applicable, county of registration and number *(specify)*:
  
7.  I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
8.  I am a California sheriff or marshal and I certify that the foregoing is true and correct.

Date:

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



\_\_\_\_\_  
 (SIGNATURE OF PERSON WHO SERVED THE PAPERS)

## INFORMATION SHEET FOR PROOF OF SERVICE BY MAIL

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

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

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

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

*Complete the top section of the proof of service forms as follows:*

**First box, left side:** In this box print the name, address, and phone number of the person for whom you are serving the documents.

**Second box, left side:** Print the name of the county in which the legal action is filed and the court's address in this box. Use the same address for the court that is on the documents you are serving.

**Third box, left side:** Print the names of the petitioner/plaintiff, respondent/defendant, and other parent in this box. Use the same names listed on the documents you are serving.

**First box, top of form, right side:** Leave this box blank for the court's use.

**Second box, right side:** Print the case number in this box. This number is also stated on the documents you are serving.

**Third box, right side:** Print the hearing date, time, and department. Use the same information that is on the documents you are serving.

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

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

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

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



# SUPERIOR COURT OF STANISLAUS COUNTY

[www.stanct.org](http://www.stanct.org) (209) 530-3100

Street Address: 1100 I Street Modesto, CA 95353

Mailing Address: P.O. Box 1098 Modesto, CA 95353

Self Help Center: 800 11<sup>th</sup> Street Room #220 Modesto, CA 95353  
(PROVIDING ASSISTANCE TO PARTIES REPRESENTING THEMSELVES)

## STOP

The following forms need to be served on the other party **BLANK**.

## Response to Petition to Establish Parental Relationship Packet

All documents must be typed or printed legibly per Rules of Court 2.104, in blue or black ink.

This packet includes the necessary forms to respond to a Petition for Parentage, Custody, Visitation and Child Support.

The term "Establishing parentage" means determining who the legal parents of a child are if the parents were not married when the child was born. If the parents were married when the child was born, the law usually considers the husband to be the father.

After January 1, 2005, if parents are registered domestic partners when a child is born, the law assumes that the domestic partners are parents. However, since this law is new and unsettled, same sex parents should get legal advice to make sure that the parentage is clear. Parents who are not married when a child is born can sign a Voluntary Declaration of Paternity at the hospital. This form can also be signed at the local child support agency, public health or the Family Law Facilitator's Office if both parties are present and show identification. When people who are not married cannot agree about parentage, the Court can order genetic testing. Usually a child's parentage must be established **BEFORE** the Court can make any child support, custody and/or visitation orders.

**ALERT! If a person is established as a legal parent of a child, that person MUST support the child. It is a crime for a legal parent to fail to support his or her child. A legal parent also has the right to get custody and/or visitation rights related to the child. Even if you get temporary orders for child support, child custody and visitation, you MUST submit the documents necessary to obtain a Judgment of Paternity. THE COURT WILL NOT FINALIZE YOUR CASE FOR YOU. YOU MUST SUBMIT JUDGMENT PAPERWORK.**

A Judgment of Paternity protects your child's rights to receive support from both parents, to collect Social Security Worker's Compensation, State Disability or other benefits if a parent dies or becomes disabled, and to inherit from the estates of both parents or from other family members as the survivor of a deceased parent. A Judgment of Paternity protects each parent's rights of support for the child from the other parent; to visit and be with the child; to access a child's medical, dental and educational records; and to participate in important decisions concerning the child.

Revised 08/8/2011

Either party may file paperwork to get orders for custody, visitation or support at any time after the Petition has been filed. Additional packets are available for scheduling hearings to obtain any orders you may need.

Judicial Council forms, local forms, and information are available in the Clerk's Office, the Stanislaus County Law Library located at 1101 13<sup>th</sup> Street, Modesto, CA and on the following websites:

- ☛ **Stanislaus County Superior Court: [www.stanct.org](http://www.stanct.org)**
- ☛ **Stanislaus County – Local Forms: [www.stanct.org/Forms.aspx?id=3](http://www.stanct.org/Forms.aspx?id=3)**
- ☛ **Judicial Council's Self Help: [www.courts.ca.gov/selfhelp.htm](http://www.courts.ca.gov/selfhelp.htm)**
- ☛ **Judicial Council Forms: [www.courts.ca.gov/formsrules.htm](http://www.courts.ca.gov/formsrules.htm)**
- ☛ **Stanislaus County Law Library: [www.stanislauslawlibrary.org](http://www.stanislauslawlibrary.org)**
- ☛ **Free Interactive Electronic Forms Program: [www.icandocs.org/ca/california.html](http://www.icandocs.org/ca/california.html)**
- ☛ **California's Free Website for Legal Help: [www.lawhelpcalifornia.org](http://www.lawhelpcalifornia.org)**
- ☛ **Law Libraries, Websites, or Self-Help Legal Books: [www.courts.ca.gov/1091.htm](http://www.courts.ca.gov/1091.htm)**

### **REQUIRED FORMS:**

- **FL003 - Confidential Declaration (Local Form)**
- **FL-220 - Response to Petition to Establish Parental Relationship**
- **FL-105 - Declaration Under Uniform Child Custody Jur. & Enf. Act**
- **FL-335- Proof of Service by Mail**

### **CASE MANAGEMENT INFORMATION:**

- A Case Management Conference Statement form FL-005 must be filed with the court and served on all parties by each counsel or self-represented party by the 15<sup>th</sup> calendar day before the date set for the Case Management Conference.
- **Refer to the instructions on both sides of the Notice of Family Law Case Management Conference** (this form is green) for rules and requirements related to the Case Management Conference.
- **THE CASE MANAGEMENT CONFERENCE IS NOT A TRIAL, IT DOES NOT RESOLVE SUPPORT OR CUSTODY ISSUES AND IT IS NOT A JUDGMENT HEARING.** This hearing allows the Court to track cases to ensure that they are proceeding as required by law.

Parties are encouraged to review and comply with Local Rules regarding Family Law proceedings. Local Rules can be located on the following Superior Court website: [www.stanct.org](http://www.stanct.org).

Material distributed by the Superior Court Clerk's Office or Self Help Center **IS INTENDED FOR INFORMATIONAL AND EDUCATIONAL PURPOSES ONLY.** Such material is **NOT LEGAL ADVICE** and is not intended to be legal advice as to your specific case. **IT IS NOT INTENDED TO TAKE THE PLACE OF LEGAL ADVICE FROM AN ATTORNEY.** You are strongly urged to seek the advice of a licensed attorney before starting or completing your case in order to protect valuable legal rights that you may have, of which you may be unaware of. Please contact an attorney of your choice or contact the **LAWYERS REFERRAL SERVICE** of the **Stanislaus County Bar Association** at: (209) 571-5727 for a referral. The Clerk's Office cannot give you legal advice.

# Yes, I need an Interpreter!

Sí, necesito un Intérprete!

**Name** (Nombre): \_\_\_\_\_

**Case Number** (Número de caso): \_\_\_\_\_

**Language/Dialect Spoken** (Que idioma/dialecto habla):

**Spanish (Español)**      **Dialecto:** \_\_\_\_\_

**Other:** \_\_\_\_\_      **Dialect:** \_\_\_\_\_

## Person requesting an Interpreter is:

Persona que solicita el intérprete es:

**Petitioner** (Solicitante)

**Respondent** (Demandado)

**Protected Person** (Persona Protegida)

**Restrained Person** (Persona Restringida)

**Other** (Otro): \_\_\_\_\_

**CONFIDENTIAL**

<b>ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME, ADDRESS, PHONE)</b>  Attorney for:  <b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF STANISLAUS</b> Street Address: 800 11th Street, Modesto, CA 95354 Civil Clerk' Office: 1100 I Street, P.O. Box 1098, Modesto, CA 95353	<i>FOR COURT USE ONLY NOTICE TO CLERK Place in confidential part of the court file.</i>
<b>Petitioner:</b>  <b>Respondent:</b>	
<b>CONFIDENTIAL DECLARATION</b>	Case Number:

You are required to complete this *Confidential Declaration* when you file any petition or response in any family law case type. You are required to provide the social security numbers for yourself and your spouse on this form if you know them. This form will be kept in a confidential part of the court file and may not be disclosed without good cause shown to the court.

After you have completed this form, you may redact (block or cross out) any social security number listed on this form from any future document or other written material filed with the court.

You may not redact or change any previously filed documents without a court order.

**Petitioner (name):** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Alias (if any):** \_\_\_\_\_ **Social security number:** \_\_\_\_\_  
**Date of Birth:** \_\_\_\_\_ **Drivers License:** \_\_\_\_\_  
 **Female**     **Male**

**Respondent (name):** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Alias (if any):** \_\_\_\_\_ **Social security number:** \_\_\_\_\_  
**Date of Birth:** \_\_\_\_\_ **Drivers License:** \_\_\_\_\_  
 **Female**     **Male**

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 Your Name)

\_\_\_\_\_  
(Sign Your Name)

PARTY WITHOUT ATTORNEY OR ATTORNEY STATE BAR NUMBER: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF STANISLAUS</b> STREET ADDRESS: 1100 I STREET MAILING ADDRESS: P.O. BOX 1098 CITY AND ZIP CODE: MODESTO, CA 95353 BRANCH NAME:	
PETITIONER: RESPONDENT:	
<b>RESPONSE TO PETITION TO DETERMINE PARENTAL RELATIONSHIP</b>	CASE NUMBER:

1. The petitioner
  - a.  is a parent of the children in item 2.
  - b.  is not a parent of the children in item 2.
  - c.  is the child or the child's personal representative (specify court and date of appointment):
  - d.  Other (specify):
  
2. The children are
 

a. <u>Child's name</u>	<u>Birthdate</u>	<u>Age</u>
------------------------	------------------	------------

  
 b.  a child who is not yet born
  
3. The respondent
  - a.  lives in the state of California.
  - b.  was in California when the children listed in item 2 were conceived.
  - c.  does not live in the state of California.
  - d.  was not in California when the children listed in item 2 were conceived.
  - e.  Other (specify):
  
4. The children
  - a.  live or are found in this county.
  - b.  are children of a parent who is deceased, and proceedings for administration of the estate have been or could be started in this county.
  
5. The respondent is
  - a.  the parent of the children listed in item 2 above.
  - b.  not certain if the respondent is the parent of the children listed in item 2 above.
  - c.  not the parent of the children listed in item 2 above.
  - d.  Other (specify):
  
6. Additional statements
  - a.  Parentage has been determined by a voluntary declaration of parentage or paternity. (Attach a copy if available.)
  - b.  Parentage has been established in another case  governmental child support  Other (specify):
  - c.  Public assistance is being provided to the children.
  
7. A completed Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) (form FL-105) is attached.



PETITIONER:	CASE NUMBER:
RESPONDENT:	

The respondent asks that the court make the determinations listed below.

8. PARENT-CHILD RELATIONSHIP (check all that apply):

- a.  Respondent  Petitioner is the parent of the children listed in item 2.
- b.  Respondent  Petitioner is not the parent of the children listed in item 2.
- c.  Respondent requests genetic testing to determine whether the  Petitioner  Respondent is the parent of the children listed in item 2.

9. CHILD CUSTODY AND VISITATION (PARENTING TIME)

- |  | Petitioner               | Respondent               | Joint                    | Other                    |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Legal custody of children to .....                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Physical custody of children to .....                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Child visitation (parenting time) be granted to ..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

As requested in  form FL-311  form FL-312  form FL-341(C)  
 form FL-341(D)  form FL-341(E)  Attachment 6c(1)

- d. The facts in support of the requested custody and visitation (parenting time) orders are (specify):  
 Contained in the attached declaration.

10. REASONABLE EXPENSES OF PREGNANCY AND BIRTH:

Reasonable expenses of pregnancy and birth to be paid by as follows:

	Petitioner	Respondent	Joint
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. FEES AND COSTS OF LITIGATION

	Petitioner	Respondent	Joint
a. Attorney fees to be paid by	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Expert fees, guardian ad litem fees, and other costs of the action or pretrial proceedings to be paid by	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. NAME CHANGE

Children's names be changed, according to Family Code section 7638, as follows (specify old and new names):

13. OTHER ORDERS REQUESTED (specify):

14. CHILD SUPPORT

The court may make orders for support of the children and issue an earnings assignment without further notice to either party.

I have read the restraining order on the back of the *Summons* (FL-210) and I understand it applies to me.

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 RESPONDENT)
----------------------	---------------------------

**NOTICE: If you have a child from this relationship, the court is required to order child support based upon the income of both parents. Support normally continues until the child is 18. You should supply the court with information about your finances. Otherwise, the child support order will be based upon information supplied by the other parent. Any party required to pay child support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent.**

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):     TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF STANISLAUS</b> STREET ADDRESS: 1100 I STREET MAILING ADDRESS: P.O. BOX 1098 CITY AND ZIP CODE: MODESTO, CA 95354 BRANCH NAME: _____	
(This section applies only to family law cases.) PETITIONER: RESPONDENT: OTHER PARTY:	
(This section applies only to guardianship cases.) GUARDIANSHIP OF (Name): _____ Minor	CASE NUMBER: _____
<b>DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)</b>	

1. I am a party to this proceeding to determine custody of a child.
2.  My present address and the present address of each child residing with me is confidential under Family Code section 3429 as I have indicated in item 3.
3. There are (specify number): \_\_\_\_\_ minor children who are subject to this proceeding, as follows:  
**(Insert the information requested below. The residence information must be given for the last FIVE years.)**

a. Child's name	Place of birth	Date of birth	Sex
Period of residence to present	Address <input type="checkbox"/> Confidential	Person child lived with (name and complete current address) <input type="checkbox"/> Confidential	Relationship
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	Child's residence (City, State)	Person child lived with (name and complete current address)	
b. Child's name	Place of birth	Date of birth	Sex
<input type="checkbox"/> Residence information is the same as given above for child a. (If NOT the same, provide the information below.)			
Period of residence to present	Address <input type="checkbox"/> Confidential	Person child lived with (name and complete current address) <input type="checkbox"/> Confidential	Relationship
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	Child's residence (City, State)	Person child lived with (name and complete current address)	

- c.  Additional residence information for a child listed in item a or b is continued on attachment 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:  
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4. Do you have information about, or have you participated as a party or as a witness or in some other capacity in, another court case or custody or visitation proceeding, in California or elsewhere, concerning a child subject to this proceeding?

Yes  No (If yes, attach a copy of the orders (if you have one) and provide the following information):

Proceeding	Case number	Court <i>(name, state, location)</i>	Court order or judgment <i>(date)</i>	Name of each child	Your connection to the case	Case status
a. <input type="checkbox"/> Family						
b. <input type="checkbox"/> Guardianship						
c. <input type="checkbox"/> Other						

Proceeding	Case Number	Court <i>(name, state, location)</i>
d. <input type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency		
e. <input type="checkbox"/> Adoption		

5.  One or more domestic violence restraining/protective orders are now in effect. (Attach a copy of the orders if you have one and provide the following information):

Court	County	State	Case number <i>(if known)</i>	Orders expire <i>(date)</i>
a. <input type="checkbox"/> Criminal				
b. <input type="checkbox"/> Family				
c. <input type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency				
d. <input type="checkbox"/> Other				

6. Do you know of any person who is not a party to this proceeding who has physical custody or claims to have custody of or visitation rights with any child in this case?  Yes  No (If yes, provide the following information):

a. Name and address of person   <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child	b. Name and address of person   <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child	c. Name and address of person   <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child
---	---	---

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)

7.  Number of pages attached: \_\_\_\_\_

**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.**

CASE NAME:  	CASE NUMBER:  
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**ATTACHMENT TO  
DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)**

<input type="checkbox"/> Child's name <input type="checkbox"/> Residence information is the same as given on form FL-105/GC-120 for child a. (If NOT the same, provide the information below.)		Place of birth	Date of birth	Sex
Period of residence  to present	Present address  <input type="checkbox"/> Confidential	Person child lived with (name and complete current address)  <input type="checkbox"/> Confidential		Relationship
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	Child's residence (City, State)	Person child lived with (name and complete current address)		
<input type="checkbox"/> Child's name <input type="checkbox"/> Residence information is the same as given on form FL-105/GC-120 for child a. (If NOT the same, provide the information below.)		Place of birth	Date of birth	Sex
Period of residence  to present	Address  <input type="checkbox"/> Confidential	Person child lived with (name and complete current address)  <input type="checkbox"/> Confidential		Relationship
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)		
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<input type="checkbox"/> Child's name <input type="checkbox"/> Residence information is the same as given on form FL-105/GC-120 for child a. (If NOT the same, provide the information below.)		Place of birth	Date of birth	Sex
Period of residence  to present	Address  <input type="checkbox"/> Confidential	Person child lived with (name and complete current address)  <input type="checkbox"/> Confidential		Relationship
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	Child's residence (City, State)	Person child lived with (name and complete current address)		

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, State Bar number, and address):</i>   TELEPHONE NO.: _____ FAX NO. <i>(Optional):</i> _____ E-MAIL ADDRESS <i>(Optional):</i> _____ ATTORNEY FOR <i>(Name):</i> _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF STANISLAUS</b> STREET ADDRESS: 1100 I STREET MAILING ADDRESS: P.O. BOX 1098 CITY AND ZIP CODE: MODESTO, CA 95354 BRANCH NAME: _____	
PETITIONER/PLAINTIFF: _____  RESPONDENT/DEFENDANT: _____  OTHER PARENT/PARTY: _____	CASE NUMBER: _____  <i>(If applicable, provide):</i>  HEARING DATE: _____ HEARING TIME: _____ DEPT.: _____
<b>PROOF OF SERVICE BY MAIL</b>	

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

1. I am at least 18 years of age, not a party to this action, and I am a resident of or employed in the county where the mailing took place.
2. My residence or business address is:
  
3. I served a copy of the following documents *(specify)* :

by enclosing them in an envelope AND

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

4. The envelope was addressed and mailed as follows:

- a. Name of person served:
- b. Address:
  
- c. Date mailed:
- d. Place of mailing *(city and state)*:

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

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

Date:

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

## INFORMATION SHEET FOR PROOF OF SERVICE BY MAIL

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

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

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

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

*Complete the top section of the proof of service forms as follows:*

**First box, left side:** In this box print the name, address, and phone number of the person for whom you are serving the documents.

**Second box, left side:** Print the name of the county in which the legal action is filed and the court's address in this box. Use the same address for the court that is on the documents you are serving.

**Third box, left side:** Print the names of the petitioner/plaintiff, respondent/defendant, and other parent in this box. Use the same names listed on the documents you are serving.

**First box, top of form, right side:** Leave this box blank for the court's use.

**Second box, right side:** Print the case number in this box. This number is also stated on the documents you are serving.

**Third box, right side:** Print the hearing date, time, and department. Use the same information that is on the documents you are serving.

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

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

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

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

ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME, ADDRESS, PHONE)  Attorney for:	<i>FOR COURT USE ONLY</i>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF STANISLAUS</b> Street Address: 800 11th Street, Modesto, CA 95354 Civil Clerk' Office: 1100 I Street, P.O. Box 1098, Modesto, CA 95353	
<b>Plaintiff/Petitioner:</b>  <b>Defendant/Respondent:</b>	RELATED CASES:
<b>CASE MANAGEMENT CONFERENCE STATEMENT</b>	<b>CASE NUMBER:</b> <b>Date:</b> <b>Time:</b>

1. Names of parties/attorneys:

a) Petitioner \_\_\_\_\_ Attorney \_\_\_\_\_

b) Respondent \_\_\_\_\_ Attorney \_\_\_\_\_

2. Nature of action (check the applicable action):

- Dissolution of marriage, legal separation, or nullity
- Action to establish parent and child relationship
- Dissolution of domestic partnership

3. Service of pleadings:

a) Date of service of petition \_\_\_\_\_ If not served, explain: \_\_\_\_\_

\_\_\_\_\_

b) Date of filing of response or default: \_\_\_\_\_

4. Case information (complete all applicable sections):

a) Date of marriage/partnership: \_\_\_\_\_ Date of separation: \_\_\_\_\_

b) Names/ages of minor children:

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

5. Other related family law cases (includes out of county/state orders such as domestic violence, dissolution judgments, custody or support): \_\_\_\_\_

\_\_\_\_\_

6. Have parties met and conferred? \_\_\_\_\_ If not, explain: \_\_\_\_\_

\_\_\_\_\_

7. Describe any discovery conducted to date: \_\_\_\_\_

\_\_\_\_\_

8. Describe discovery to be conducted: \_\_\_\_\_

\_\_\_\_\_

Estimated time to complete discovery: \_\_\_\_\_ months.

9. Issues agreed upon (e.g. child custody/visitation, child/spousal support, division of property)

\_\_\_\_\_

\_\_\_\_\_

10. Issues that a party believes should be bifurcated (e.g. marital status, date of separation or date of valuation) \_\_\_\_\_

\_\_\_\_\_

11. Estimated date that party will be ready for trial (**the court anticipates that a case should be ready for trial within 3-6 months from the date of the case management conference**) \_\_\_\_\_

If longer than 6 months, explain: \_\_\_\_\_

\_\_\_\_\_

12. Estimated length of trial (hours or days): \_\_\_\_\_

DATE: \_\_\_\_\_

\_\_\_\_\_  
Signature of Party/Attorney for Party