# Instructions for Starting Petition to Determine Parental Relationship

## WHEN TO USE THIS PACKET

Use this packet if you are **not married to the other parent of your child and if you want to:** 

- Determine Paternity
- Obtain Orders for Custody or Visitation
- Obtain Orders for Child Support

There is a first time filing fee to file the enclosed forms, unless you are eligible for a "Fee Waiver" which is available as a separate packet.

**NOTE:** If there is already a Family Support case opened by the Department of Child Support Services you can get the same orders without filling out these forms. Please speak to an attorney or the Court's Self-Help Center for other options.

# STEPS TO DETERMINE PATERNITY:

The forms in this packet can be used to open a case between you and the other parent. Opening the case is the first step to determine paternity or obtaining orders for custody, visitation and support.

The other steps are as follows:

- Request a Judgment of Paternity by default if the other parent does not respond, or
- Ask the court for custody, visitation or support orders by completing, filing and serving a "Request for Order" packet.

Revised 01/16/2025

# SAMPLE FORMS

# FORM INSTRUCTIONS

FL-210

# **SUMMONS**

CITACIÓN (Paternidad—Custodia y Manutención) FOR COURT USE ONLY (SOLO PARA USO DE LA CORTE)

(Parentage—Custody and Support)

AVISO AL DEMANDADO (Nombre):

NOTICE TO RESPONDENT (Name): THE OTHER PARENT'S NAME

CASE NUMBER: (Número de caso)

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:

YOUR NAME

El nombre del demandante:

SAMPLE ONLY DO NOT

WRITE ON

THIS COPY!

**LEAVE BLANK** You have 30 calendar days after this Summons and Petition

are served on you to file a Response (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.

Tiene 30 dias de calendario después de habir 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.

If you do not file your Response 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.

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 paque manutención de los hijos, y honorarios y costos legales.

For legal advice, contact a lawyer immediately. Get help finding a lawyer at the California Courts Online Self-Help Center (www.courts.ca.gov/selfhelp), at the California Legal Services website (www.lawhelpca.org), or by contacting your local bar association.

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 (www.sucorte.ca.gov), en el sitio web de los Servicios Legales de California (www.lawhelpca.org), o poniéndose en contacto con el colegio de abogados de su condado.

NOTICE: 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.

AVISO: La órden de protección que aparecen en la pagina 2 continuará en vigencia en cuanto a cada parte hasta que se emita un fallo final, se despida 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.

FEE WAIVER: 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.

**EXENCIÓN DE CUOTAS:** 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.

[SEAL]			

1. The name and address of the court are: (El nombre y dirección de la corte son:)

Fresno County Superior Court 1130 "O" Street Fresno CA 93724-2220

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:)

YOUR NAME YOUR ADDRESS, CITY, STATE, ZIP CODE YOUR TELEPHONE NUMBER

Date (Fecha):	Clerk, by (Secretario, por)	-

, Deputy (Asistente)

Page 1 of 2



Form Adopted for Mandatory Use Judicial Council of California

### 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 despida 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. Or call

Covered California at 1-800-300-1506

AVISO — ACCESO A SEGURA DE SALUD MÁS ECONOMICO Necessita seguro de salud a un costo asequible, ya sea para usted o alguien en su hogar? Si es asi, 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. O llame a Covered California al 1-800-300-0213.



	STATE BAR NUMBER:	FOR COURT USE ONLY		
YOUR NAME	STATE BAN NOMBEN.			
YOUR ADDRESS		SAMPLE		
CITY, STATE, ZIP CODE				
YOUR TELEPHONE NUMBER	STATE: ZIP CODE: FAX NO.:	ONLY		
NANAE TUE	UST WRITE YOUR NAME AND THE OTHER PA	BONOT		
SUPERIOR COURT OF CALIFORNIA, COUN	EXACT SAME WAY THROUGHOUT YOUR FO			
STREET ADDRESS: 1130 "O" Street		VALDITE ON		
MAILING ADDRESS: Fresno CA 93724-2	2220	WRITE ON		
CITY AND ZIP CODE: Central Division		TILLS CODY!		
DRANGE NAIVIE.		—   THIS COPY!		
I OUR NAME	DENTIS NAME			
RESPONDENT: THE OTHER PAI	RENT'S NAME			
PETITION TO DETERMIN	E PARENTAL RELATIONSHIP	CASE NUMBER:  LEAVE BLANK		
1. The petitioner				
a. gave birth to the children listed				
b. wants to be determined as a p	arent of the children in item 2 because (s	PICK WHICH ONE YOU ARE		
a Vients to be determined as not	a parent of the children listed in item 2 be			
c. wants to be determined as not	a parent of the children listed in item 2 bo	coduse (speelity).		
s the child or the child's perso Other (specify):	nal representative (specify court and date	e of appointment):		
2. The children are				
a. <u>Child's name</u>	<u>Birthdate</u>	<u>Age</u>		
CHILD #1'S NAME	BIRTHDATE	AGE		
CHILD #2'S NAME	BIRTHDATE BIRTHDATE	AGE AGE		
CHILD #3'S NAME CHILD #4'S NAME	BIRTHDATE	AGE		
b. a child who is not yet born.				
3. The equrt has jurisdiction over the resp	ondent because the respondent:	CHOOSE ONE		
a. lives in this state.	ondon't booddoo the respondent	CHOOSE ONE		
	state, which resulted in conception of the	children listed in item 2.		
c. Other (specify):		CHECK WHICH ONE APPLIES TO YOU		
4. The action is brought in this county bed	cause (you must check one or more to file	in this county):		
a. the children live or are found in	•			
b. a parent is deceased and proc	eedings for administration of the estate h	ave been or could be started in this county.		
5. Petitioner claims (check all that apply):	_	CHECK THE APPROPRIATE BOXES		
	e children listed in item 2 above.	Charles and the state of the st		
	ed by a voluntary declaration of parentage			
c/ respondent is the children's parent and has failed to support the children. d (hame): has furnished or is furnishing the following reasonable expenses				
	ch the respondent as parent of the childre			
Amount	Payable to For (speci			
	the the flex of the design			
e.\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
\	rided to the children.			
f. Other (specify):	nueu to the children.			

PETITIONER: YOUR NAME		CASE NUMBER:					
RESPONDENT: THE OTHER PARENT'S NAME		LEAVE BLANK					
Petitioner asks the court to make the determination 7. PARENT-CHILD RELATIONSHIP (check all the court of the	hat apply): CHEC	CK THE APPROPRIATE BOXES					
b Petitioner Res CHECK A BC	c.\ Petitioner requests gen HAVE LEGAL CUSTODY, AND PHYSICAL CUSTODY OF THE CHILD(REN) AS WELL AS						
8. CHILD CUSTODY AND VISITATION (PAREN	TING TIME)						
	ound to be the parent of the children listed in  Petitioner Respo	I I					
b. Legal custody of children to      c. Physical custody of children to      d. Child visitation (parenting time) be granted							
As requested in		form FL-341(C) Attachment 8d					
9. REASONABLE EXPENSES OF PRE	dv and visitation (parenting time) orders are THIS BOX AND USE THE MC-031 ATTACHMEN LIKE TO PROVIDE FURTHER DETAILS TO SU EQUEST IN REGARDS TO CUSTODY/VISITATI	NT, IF YOU ATTACH ADDITIONAL PPORT FORMS FOR CHILD					
l de la companya del companya de la companya del companya de la co	Petitioner Respond  ECK APPROPRIATE BOXES IF QUESTING ORDERS IN #9 AND #10	ent Joint FORM(S) YOU PRINTED AND ATTACHED					
10. FEES AND COSTS OF LITIGATION  a. Attorney fees to be paid by  b. Expert fees, guardian ad litem fees, and oth the action or pretrial proceedings to be paid		lent Joint					
` _	g to Family Code section 7638, as follows (s	· · · · · · · · · · · · · · · · · · ·					
12. CHILD SUPPORT The court may make orders for support of the							
13. OTHER ORDERS REQUEIF THERE IS NOT A BOX FOR WHAT YOU ARE REQUESTING, CHECK THIS BOX AND WRITE IT HERE  14. I have read the restraining order filed.							
I declare under penalty of perjury under the laws of	of the State of California that the foregoing is	s true and correct.					
Date: TODAY'S DATE							
PRINT YOUR NAME HE	RE SIGI	N YOUR NAME HERE					
(TYPE OR PRINT NAME) A blank Response to Petition to Determine Parent	ral Relationship (form FL-220) must be serve	(SIGNATURE OF PETITIONER) ed 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.

PLAINTIFF/PETITIONER: YOUR NAME

DEFENDANT/RESPONDENT: THE OTHER PARENT'S NAME

CASE NUMBER:

LEAVE BLANK

# **DECLARATION**

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

BRIEFLY EXPLAIN WHY YOU ARE REQUESTING CUSTODY AND/OR VISITATION ORDERS IN THE BEST INTEREST OF THE CHILD(REN)

I declare under penalty of perjury under the laws of the State of Calif Date: TODAY'S DATE	ornia that the foregoing is true and correct.
PRINT YOUR NAME HERE	SIGN YOUR NAME HERE
(TYPE OR PRINT NAME)	(SIGNATURE OF DECLARANT)  Attorney for Plaintiff Petitioner Defendant
	Respondent Other (Specify):

PLAINTIFF/PETITIONER:	YOUR NAME	CASE NUMBER:
DEFENDANT/RESPONDENT:	THE OTHER PARENT'S NAME	LEAVE BLANK

# **DECLARATION**

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

BRIEFLY EXPLAIN WHY YOU ARE REQUESTING CUSTODY AND/OR VISITATION ORDERS IN THE BEST INTEREST OF THE CHILD(REN)

I declare under penalty of perjury under the laws of the State of Date: TODAY'S DATE	California that the foregoing is true and correct.
PRINT YOUR NAME HERE  (TYPE OR PRINT NAME)	SIGN YOUR NAME HERE (SIGNATURE OF DECLARANT)
	Attorney for Plaintiff Petitioner Defendant Respondent Other (Specify):
Form Approved for Optional Use Judicial Council of California MC-031 [Rev. July 1, 2005]  MC-031 [Rev. July 1, 2005]  MC-031 [Rev. July 1, 2005]  ATTAC	HED DECLARATION Page 1 of 1

# **FORM INSTRUCTIONS**

FL-105/GC-120

ATTORNEY OR PARTY WITHOUT ATTORNEY	STATE BAR NUMBER:	FOR COURT USE ONLY
NAME: FIRM NAME: STREET ADDRES CITY: TELEPHONE NO.: EMAIL ADDRESS ATTORNEY FOR (name):  YOUR NAME YOUR ADDRESS CITY, STATE, ZIP CODE YOUR TELEPHONE NU	lo ·	SAMPLE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:  SUPERIOR COURT OF CALIFORNIA, COUNTY OF CALIFORNIA, CALIFORNIA, COUNTY OF CALIFORNIA, COUNTY	annum de come consecuence de consecu	DO NOT WRITE ON
(This section applies to cases off PETITIONER: YOUR NAME RESPONDENT: THE OTHER PARENT'S NAM OTHER PARTY:		THIS COPY!
CHILD'S NAME (Juvenile cases only):  (This section applies only to pure control of the control o	NIFORM CHILD CUSTODY	CASE NUMBER:
,W	T:	LDREN proceeding to determine custody of a child. s proceeding, as follows (list oldest child first):
a. OLDEST CHILD'S NAME  b. NEXT OLDEST CHILD'S NAM  c. NEXT OLDEST CHILD'S NAM		CITY & STATE WHERE CHILD WAS BORN
` ICH	K THIS BOX IF  CABLE  MM/DD/YYYY  MC-020 or a semantion for each continuous processing and the children listed by	ceparate piece of paper, write "FL-105, Attachment 2, the additional child, and attach to this form.) in item 2 have lived together for the past five years. In the current
Dates of residence (Month/Year)	Residence (City, State) CURRENT ADDRESS NAI	reson child lived with and omplete current address  ME & CURRENT ADDRESS ERSON CHILD LIVES WITH Confidential (list state only)  Relationship  RELATIONSHIP OF PERSON TO CHILD
From:  To:    F   MM/DD/YYYY   THAT CHILD   STOPPED   STOPPED   LIVING   AT EACH   ADDRESS   F   To   To   To   To   To   To   To	THE CHILD'S ADDRESSES FOR THE PAST FIVE YEARS C	NAME & CURRENT ADDRESS OF PERSON HILD LIVED WITH FOR E PAST FIVE YEARS GO IN THESE BOXES  RELATIONSHIP OF PERSON TO CHILD
b. Check this box if there is more the form FL-105(A)/GC-120(A) and I	list each other child's current addres	ay be used for this purpose.)  ve not lived together for the past five years. (Attach as and their residence history for the past five years.)  Page 1 of 2  14 ADDRESSES IN THE LAST 5 YEARS. Ba" AND LIST THE ADDITIONAL ADDRESSES

IF YOU HAVE MORE THAN 2 CHILDREN INVOLVED IN THE CASE, CHECK BOX b. AND COMPLETE FORM FL-105(A)/GC-120(A)

FL-105/GC-120

CA	ASE NAME: YOUR LAST	NAME VS OTHE	R PARENT'S <u>LAST</u> NAME		CASE NUMBER:	AVE BLAN	K
4.	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?						
<u>_</u>	Yes No (If yes, attach a copy of the orders if you have one and provide the following information):						
	Proceeding	Case number	Court (name, state or tribe, location)	Court order or judgment (date)	Name of each child	Your connection to the case	Case status
	a. Family	TELL	. THE COURT IF THER	E IS ANOTHE	ED COURT CASE T	HAT	
	b. Probate Guardianship	DEA	LS WITH THE CUSTOD D(REN) IN THIS CASE	Y AND/OR V	ISITATION OF THE		
	c. Other		RMATION IN THIS SEC			ER 5	
	Proceeding		Case Number		Court (name, state	or tribe, locatior	1)
	d. Juvenile						
	e. Adoption						
5.	One or more dom	estic violence r ollowing informa	estraining/protective orders	s are now in eff	ect. (Attach a copy of	the orders if you	have one
	Court	County	State or Tribe	Case I	Number (if known)	Orders exp	ire (date)
	a. Criminal			E TUEDE 10	A DOMESTIC		
	b. Family  c. Juvenile	\\	CHECK THIS BOX I	NG ORDERS	IN EFFECT AND		***************************************
	d. Other		COMPLETE THE INFO	RMATION IN	THIS SECTION		
							Et en
6.	Do you know of any per or visitation with any chia. Name and address o	ild in this case?	a party to this proceeding Yes Soo Mo	(If yes, provi	ide the following inforn	nation):	·
	a. Name and address o	i person.	// D. Name and address	s or person.	c. Name and	address of pers	on.
		1	ELL THE COURT IF TH MS TO HAVE CUSTOD			S	
	Has physical cust Claims custody rig Claims visitation r Name of each child:	ghts	Has physical cu Claims custody Claims visitatio Name of each child:	rights	Claims	vsical custody custody rights visitation rights n child:	
7.	Number of pages	attached:					
	Pro	+Princessaccoun-enting	e laws of the State of Califo	ornia that the fo	regoing is true and co	rrect.	
Da	te: TODAY'S DAT		MACHINING LANGUAGE LANGUAGE STATE AND				
	PRINT YOU	***************************************	ERE		SIGN YOUR N	AME HERE	
	(NAME C	OF DECLARANT)			(SIGNATURE OF I	DECLARANT)	

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.

# **FORM INSTRUCTIONS**

FL-105(A)/GC-120(A)

	FL-105(A)/GC-120(A
CASE NAME: YOUR LAST NAME VS OTHER PARENT'S LAST NAME	CASE NUMBER:
	LEAVE BLANK
ATTACHMENT TO	

DE	CLARATION UN	DER UNIFORM	ATTACHMENT TO CHILD CUSTODY JURISDIC	CTION AND ENFORCEMENT ACT	(UCCJEA)
Instruct	tions: If all the child	ren subject to the	proceeding have not lived together	er for the last five years, use as many of ely, and attach all pages to form FL-10	copies of this form
3. b	Name of child: history for the provide only the	NEXT OLDEST ast five years. If state of residence	CHILD'S NAME the current address is confidential ce.)	(Provide the child's current address a under Family Code section 3429, ched in item 2a on form FL-105/GC-120. (	nd their residence ck the box and
OUT OL TI	provide th	e information bel		a III kom za om omi i z 100.00 120. (	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
CHECK THE BOX IF THE CHILDRE	IE Dates of	residence h/Year)	Residence (City, State)	Person child lived with (name and complete current address)	Relationship
HAVE BEE LIVING A THE SAM ADDRESS	From:   MM/DD/YYYY	To present  MM/DD/YYYY	CURRENT ADDRESS FOR THE CHILD  Confidential (list state only)	NAME & CURRENT ADDRESS OF PERSON CHILD LIVES WITH  Confidential (list state only)	RELATIONSHIP OF PERSON TO CHILD
ADDICESS	From:	To:	IF THIS CHILD HAS NO		
	From:	10:	AS THE CHILD ABOVE, I WHERE THE CHILD HA	FILL OUT S BEEN	
	From:	То:	LIVING FOR THE PAST	5 YEARS	
	From:	То:			
3. b	history for the population provide only the provide the	ast <b>five years.</b> If state of residenc	ce.) ne same as given for the child listed	(Provide the child's current address a under Family Code section 3429, che d in item 2a on form FL-105/GC-120. (	ck the box and
CHECK TH BOX IF TH	ie    Dates of	residence	Residence	Person child lived with (name and	Relationship
CHILDREI	N Francisco	h/Year) To present	(City, State)	complete current address)	RELATIONSHIP
HAVE BEE	T MM/DD/YYYY	MM/DD/YYYY	FOR THE CHILD	NAME & CURRENT ADDRESS OF PERSON CHILD LIVES WITH	OF PERSON TO CHILD
THE SAMI ADDRESSE		To:	IF THIS CHILD HAS NOT		
	From:	То:	AS THE CHILD ABOVE, F WHERE THE CHILD HAS LIVING FOR THE PAST 5	FILL OUT S BEEN	
	From:	То:			
	From:	То:			

Form Adopted for Mandatory Use Judicial Council of California FL-105(A)/GC-120(A) [Rev. January 1, 2025]

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

# FORM INSTRUCTIONS

FL-105(A)/GC-120(A)

CASE NAME: YOUR LAST NAME VS OTHER PARENT'S LAST NAME

CASE NUMBER:

LEAVE BLANK

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

DECL	ARATION UN	DER UNIFORI	CHILD (	CUSTODY JURISDIC	CTION AN	ID ENFORCEMENT ACT	(UCCJEA)
						ast five years, use as many c	
	_			_	•	tach all pages to form FL-10	
		NEXT OLDEST				the child's current address a	
		ast <b>rive years.</b> If state of residen		audress is confidential	unuer ran	nily Code section 3429, chec	in the box and
>			•	given for the child liste	d in item 2	a on form FL-105/GC-120. <i>(I</i>	f <b>not</b> the same,
OUEOK TUO	provide th	e information bei	w.)				
CHECK THIS BOX IF THE	Dates of	residence		Residence	Person o	child lived with (name and	Deletionabin
CHILDREN	(Mont	h/Year)		(City, State)	com	olete current address)	Relationship
HAVE BEEN	From:	To present	1	RENT ADDRESS	11	& CURRENT ADDRESS	RELATIONSHIP
LIVING AT	MM/DD/YYYY	MM/DD/YYYY	FO	R THE CHILD	OF PER	SON CHILD LIVES WITH	OF PERSON TO CHILD
THE SAME ADDRESSES	<b>I</b>		Conf	idential (list state only)	Con	fidential (list state only)	
ADDRESSES	From:	To:					
			IET	HIS CHILD HAS NO	TREEN	7	
	From:	To:		NG AT THE SAME A			
	FIOIII.	10.	1	HE CHILD ABOVE,		1	
			WHERE THE CHILD HAS BEEN				
	From:	To:	LIVI	NG FOR THE PAST	5 YEARS		
	From:	To:					
			<u> </u>		1		
			V. TOWN PRESENTATION	MAATE TO THE SECOND			
3. b.	Name of child:	NEXT OLDES	CHILD'S	NAME	(Provide	the child's current address a	nd their residence
	history for the p	ast <b>five years</b> . If	he current			nily Code section 3429, chec	
		state of resident	•	airon for the shild lists	d in itam O	a on form FL-105/GC-120. <i>(I</i>	f not the same
7		e information bel		given for the child lister	u III ileiii Z	a on form FL-105/GC-120. (/	i <b>not</b> the same,
CHECK THIS	Dates of	residence		Residence	Person	hild lived with (name and	
BOX IF THE		h/Year)		(City, State)		olete current address)	Relationship
CHILDREN HAVE BEEN	From:	To present	CURRI	ENT ADDRESS	NAME 8	CURRENT ADDRESS	RELATIONSHIP
LIVING AT	MM/DD/YYYY	MM/DD/YYYY		THE CHILD	OF PERS	ON CHILD LIVES WITH	OF PERSON TO CHILD
THE SAME		L	Conf	idential (list state only)	Con	fidential (list state only)	
ADDRESSES	From:	To:					
			IF TI	HIS CHILD HAS NO	BEEN		
				G AT THE SAME AL			
	From:	То:		HE CHILD ABOVE, F			
			WHERE THE CHILD HAS BEEN LIVING FOR THE PAST 5 YEARS				
	From:	To:					
	Erom:	To:	$\dashv$				
	From:	10.	L		I		

Page \_\_\_of\_

PARTY WITHOUT ATTORNEY or ATTORNEY STATE BAR NO.:  NAME: VOLUD BLANGE	FOR COURT USE ONLY
FIRM NAME: YOUR NAME	CARADIE
STREET ADD YOUR ADDRESS	SAMPLE
CITY: CITY, STATE, ZIP CODE STATE: ZIP CODE:	
E-MAIL ADDI YOUR TELEPHONE NUMBER	ONLY
ATTORNEY FOR (name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Fresno	DO NOT
STREET ADDRESS: 1130 "O" Street	
MAILING ADDRESS: Fresno CA 93721-2220	<b>WRITE ON</b>
CITY AND ZIP CODE: BRANCH NAME: Central Division	
PETITIONER: YOUR NAME	THIS COPY!
THE OTHER PARENTIC NAME	11113 331 11
RESPONDENT: THE OTHER PARENT'S NAME	
PROOF OF SERVICE OF SUMMONS	CASE NUMBER:
PROOF OF SERVICE OF SUMMONS	LEAVE BLANK
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. Tamily Law: Petition—Marriage/Domestic Partnership (form FL-100), Summons (form FL-100)	orm <u>FL-110</u> ), and blank <i>Response</i> —
Marriage/Domestic Partnership (form <u>FL-120</u> )	
b. Uniform Parentage: Petition to Determine Parental Relationship (form FL-200), Su	mmons (form FL-210), and blank
Response to Petition to Determine Parental Relationship (form FL-220)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
-or-	
c. Custody and Support: Petition for Custody and Support of Minor Children (form FL	
blank Response to Petition for Custody and Support of Minor Children (form FL-27	©) S OF ANY ATTACHED FORMS
	EN TO THE OTHER PARTY
Uniform Child Custody Jurisdiction and (I.E. PARENT)	
5 5 14 1/1/20 154 1/5	a arra biariik r roporty
(2) Completed and blank Declaration of Declaratio	<i>n</i> (form <u>FL-160</u> )
	or Order (form <u>FL-300</u> ), and blank
	ve Declaration to Request for Order
and Debts (form FI -142) (form FL-3	
(4) Completed and blank <i>Income and</i> [8] Other (specific properties of the complete properties of the	ecily).
Expense Declaration (form <u>FL-150</u> )	
2. Address where respondent was served:	
THE SERVER WRITES IN THE <u>ADDRESS</u> WHERE THE OTHER	
PARTY WAS SERVED A COPY OF THE DOCUMENTS LISTED ABOVE	
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. legislature) (Code	
	OF PERSONAL SERVICE (INCLUDE AM/PM)
who is (specify title or relationship to respondent):	(INCLUDE AND NO
(1) (Business) a person at least 18 years of age who was apparently in cha	rge at the office or usual place of
business of the respondent. I informed the person of the general nature of	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 the person of the general nature of the papers.	
on (date):	
I thereafter mailed additional copies (by first class, postage prepaid) to the respon	ndent at the place where the
copies were left (Code Civ. Proc., § 415.20b) on (date):	
FILL OUT SECTION 3a., <b>OR</b> 3b., <b>OR</b> hed, stating the actions taken to first attempt p	
3c., FOR <b>METHOD</b> OF SERVICE	Page 1

PROOF OF SERVICE OF SUMMONS

						FL-113
	PETITIONER:	YOUR NAME			CASE NUMBER:	
R	ESPONDENT:	THE OTHER PARENT'S NAME			LEAVE BLANK	
4.	d. Other Contin	envelope addressed to me. (At (Code Civ. Proc., § 415.30:)  to an address outside California return receipt or other evider (specify code section):  ued on Attachment 3d.	e):  nd Acknowledgment of  tach completed Noti  a (by registered or cer  ace of actual delivery	of Receipt (form ice and Acknown tified mail with roto the respondents)	from (city):  FL-117) and a postage-paid ref  Wedgment of Receipt (form FL  return receipt requested). (Attac  dent.) (Code Civ. Proc., §§ 415  L OUT SECTION 3a., OR 3b  FOR METHOD OF SERVIO	ch signed .40, 417.20.)
	CITY	, STATE, ZIP CODE  nber: SERVER'S PHONE NUM	BER	grovers are consistent to the constant and the constant a		
	This person is a.	t from registration under Business egistered California process serve tered California process server: egistration no.: ounty: he fee for service was (specify):	and Professions Cod r.		The state of the s	
5.	≮declare ∪	under penalty of perjury under the	laws of the State of Ca	alifornia that the	foregoing is true and correct.	
S.	<b>☐</b> ★am a Cal	ifornia sheriff, marshal, or cons		it the foregoing i	is true and correct.	
	_					
Date	e: DATE SE	RVER SIGNS				
	SERVER	PRINTS THEIR NAME H	IERE		SERVER SIGNS HER	<b>E</b>

(NAME OF PERSON WHO SERVED PAPERS)

(SIGNATURE OF PERSON WHO SERVED PAPERS)

# BLANK FORMS

(To be Completed)

# **SUMMONS**

# CITACIÓN (Paternidad—Custodia y Manutención)

(Parentage—Custody and Support)
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)

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.	Tiene <b>30 dias de calendario</b> después de habir 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.
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.	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.
For legal advice, contact a lawyer immediately. Get help finding a lawyer at the California Courts Online Self-Help Center (www.courts.ca.gov/selfhelp), at the California Legal Services website (www.lawhelpca.org), or by contacting your local bar association.	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 (www.sucorte.ca.gov), en el sitio web de los Servicios Legales de California (www.lawhelpca.org), o poniéndose en contacto con el colegio de abogados de su condado.
NOTICE: 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.	AVISO: La órden de protección que aparecen en la pagina 2 continuará en vigencia en cuanto a cada parte hasta que se emita un fallo final, se despida 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.
FEE WAIVER: 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.	<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.

[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)
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## 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 despida 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*. Or call Covered California at 1-800-300-1506.

AVISO — ACCESO A SEGURA DE SALUD MÁS ECONOMICO Necessita seguro de salud a un costo

asequible, ya sea para usted o alguien en su hogar? Si es asi, 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. O llame a Covered California al 1-800-300-0213.



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:	PARTY WITH	OUT ATTORNEY OR ATTORNEY	STATE BAR NU	IMBER:	FOR COURT USE ONLY
STREET ADDRESS.  CITY:  STATE ZIP CODE:  FAXNO.  SUPERIOR COURT OF CALIFORNIA, COUNTY OF  STREET ADDRESS.  MARING ADDRESS.  CITY AND ZE ODE:  BOUNCH NAME.  PETITION TO DETERMINE PARENTAL RELATIONSHIP  1. The petitioner  a.   gave birth to the children listed in item 2.  b.   wants to be determined as a parent of the children listed in item 2 because (specify):  c.   wants to be determined as 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):  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 interroorse 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 chack 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 (chack all that apply):  a.   respondent is the parent of the children listed in item 2 above.  b.   a parentage has been determined by a voluntary declaration of parentage or patentity. (Atlach a copy if available.)  c.   crespondent is the children's parent and has failed to support the children.  Andount   Payable to For (specify):  e.   public assistance is being provided to the children.	NAME:				
CASE MUMBER  PETITION TO DETERMINE PARENTAL RELATIONSHIP  1. The petitioner a. gave birth to the children listed in item 2 because (specify):  c. wants to be determined as not a parent of the children listed in item 2 because (specify):  c. distribution and surface and surface and 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. distribution is the children in this county. b. distribution is the child of the children in this state, which resulted in conception of the children listed in item 2.  c. dhield's name  Birthdate  Age  Age  b. distribution in this county because (you must check one or more to file in this county): a. distribution is brought in this county because (you must check one or more to file in this county): a. distribution is brought in this county because (you must check one or more to file in this county): a. distribution is brought in this county because (you must check one or more to file in this county): a. distribution is brought in this county because (you must check one or more to file in this county): a. distribution is brought in this county because (you must check one or more to file in this county): a. distribution is brought in this county because (you must check one or more to file in this county): b. distribution is the children is the parent of the children isted in item 2 above. b. distribution is the parent of the children isted in item 2 above. b. distribution is the children's parent and has failed to suport the children. b. distribution of parentage or paternity, (Attach a copy if available) or pregnancy and birth for which the respondent as parent of the children should pay: Amount Payable to For (specify):	FIRM NAME:				
TELEPHONE NO: FAX NO.:  EAVIL ADDRESS  SUPERIOR COURT OF CALIFORNIA, COUNTY OF  STREET ADDRESS  MALINE ADDRESS	STREET ADD	DRESS:			
EAWA.RADRESS ATTORNET FOR foares) SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET FORRESS MAILING ADDRESS GITY AND 29 CODE BRANCH MADE PETITIONER: RESPONDENT:  PETITION TO DETERMINE PARENTAL RELATIONSHIP  1. The petitioner a.	CITY:		STATE:	ZIP CODE:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MALINA PLORESS: MALINA	TELEPHONE	NO.:	FAX NO.:		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS CITY AND ZEP CODE SERVANH MANE PETITIONER: RESPONDENT:  PETITION TO DETERMINE PARENTAL RELATIONSHIP  1. The petitioner a.	E-MAIL ADDF	RESS:			
STREET ADDRESS MALING ADDRESS CITY MAD 2P CODE BRANCH NAME PETITIONE:  RESPONDENT:  PETITION TO DETERMINE PARENTAL RELATIONSHIP  1. The petitioner a gave birth to the children listed in item 2. b wants to be determined as a parent of the children listed 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  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 countly because (you must check one or more to file in this countly): 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 countly.  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 parent of the children should pay:	ATTORNEY I	FOR (name):			
MALING ACCIDENCES GENTA MADE PETITIONER: RESPONDENT:  PETITION TO DETERMINE PARENTAL RELATIONSHIP  1. The petitioner a.	SUPERIC	R COURT OF CALIFORNIA, C	OUNTY OF		
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PETITION TO DETERMINE PARENTAL RELATIONSHIP  1. The petitioner a.	PETITIO	ONER:			
PETITION TO DETERMINE PARENTAL RELATIONSHIP  1. The petitioner a.	DESDON	DENT:			
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3. The court has jurisdiction over the respondent because the respondent:  a.					
<ul> <li>3. The court has jurisdiction over the respondent because the respondent: <ul> <li>a.   lives in this state.</li> <li>b.   had sexual intercourse in this state, which resulted in conception of the children listed in item 2.</li> <li>c.   Other (specify):</li> </ul> </li> <li>4. The action is brought in this county because (you must check one or more to file in this county): <ul> <li>a.   the children live or are found in this county.</li> <li>b.   a parent is deceased and proceedings for administration of the estate have been or could be started in this county.</li> </ul> </li> <li>5. Petitioner claims (check all that apply): <ul> <li>a.   respondent is the parent of the children listed in item 2 above.</li> <li>b.   parentage has been determined by a voluntary declaration of parentage or paternity. (Attach a copy if available.)</li> <li>c.   respondent is the children's parent and has failed to support the children.</li> <li>d.   (name):</li></ul></li></ul>					
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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 (specify):  e. public assistance is being provided to the children.					,
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Amount Payable to For (specify):  e. public assistance is being provided to the children.	۵. 🖵		r which the respondent as		-
e. public assistance is being provided to the children.					• •
		. miount	. 3,45.5 10	. 5. (5,500,7).	
	₽ [	nublic assistance is being	nrovided to the children		
f. Uther (specify):	. =	Other (specify):	, p. 21.222 to 11.0 0,		

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 c. Petitioner requests genetic testing to determine whether the Petitioner children listed in item 2.	2. Respondent is the parent of the
8. CHILD CUSTODY AND VISITATION (PARENTING TIME)  a. If Petitioner Respondent is found to be the parent of the children listed in Petitioner Respondent Pe	n item 2. condent Joint Other
As requested in form FL-311 form FL-312 form FL-341(E)  e. The facts in support of the requested custody and visitation (parenting time) orders are Contained in the attached declaration.	form FL-341(C) Attachment 8d e (specify):
9. REASONABLE EXPENSES OF PREGNANCY AND BIRTH Reasonable expenses of pregnancy and birth to be paid by as follows:	dent Joint
10. FEES AND COSTS OF LITIGATION  a. Attorney fees to be paid by  b. Expert fees, guardian ad litem fees, and other costs of the action or pretrial proceedings to be paid by	dent Joint
11. NAME CHANGE  Children's names be changed, according to Family Code section 7638, as follows (s	specify old and new names):
12. CHILD SUPPORT The court may make orders for support of the children and issue an earnings assignment  13.  OTHER ORDERS REQUESTED (specify):	t without further notice to either party.
<ol> <li>I have read the restraining order on the back of the Summons (FL-210) and I understand filed.</li> </ol>	it applies to me when this <i>Petition</i> is
I declare under penalty of perjury under the laws of the State of California that the foregoing i	is true and correct.
Date:	
<b>&gt;</b>	
(TYPE OR PRINT NAME) A blank Response to Petition to Determine Parental Relationship (form FL-220) must be serv	(SIGNATURE OF PETITIONER)  yed 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.

				MC-03
PLAINTIFF/PETITIONER:			CASE NUMBER:	
EFENDANT/RESPONDENT:				
		DECLARATION		
(This	form must be attached to a	nother form or court pape	er before it can be filed in court.)	
clare under penalty of periur	ry under the laws of the Stat	e of California that the fo	regoing is true and correct.	
e:	,		<b>.</b>	
(TYPE OR	R PRINT NAME)		(SIGNATURE OF DECLARANT)	
		Attorney		ner 🔲 Defend

DI AINTIEC PETITO	NED.				. = 400 000 0000000000000000000000000000	 MC-03
PLAINTIFF/PETITIO	NER:			CASE NU	JMBER:	
FENDANT/RESPON	DENT:					
A A AMERICA			DECLARATION			
	(This form must be a	ttached to anoth	ner form or court pa	aper before it can be	e filed in court.)	

Date:

(TYPE OR PRINT NAME)

Attorney for

Respondent

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

Defendant

(SIGNATURE OF DECLARANT)

Petitioner

Plaintiff

Other (Specify):

ATTOF	NEY OR PARTY WIT	HOUT ATTORNEY	STATE BAI	R NUMBER:		FOR COUR	RT USE ONLY			
NAME:										
FIRM N										
STREE	T ADDRESS:									
CITY:			STATE:	ZIP CODE:						
TELEP	HONE NO.:		FAX NO.:							
EMAIL	ADDRESS:									
ATTOF	NEY FOR (name):									
SUP	RIOR COURT C	F CALIFORNIA, CC	UNTY OF							
	ET ADDRESS:	,								
	NG ADDRESS:									
	ND ZIP CODE:									
ВІ	RANCH NAME:									
RE	PETITIONER: ESPONDENT:	ection applies to ca	ses other than proba	te guardiansh	ips.)					
	HER PARTY: D'S NAME ( <i>Juve</i>									
GHVI	<i>(Thi</i> ? RDIANSHIP OF	• •	only to probate guardia	anship cases.	)	CASE NUMBER:				
JUAI	VDIVIABULE OF (	паш <del>о</del> ј.			Minor					
	DECI	ΔΡΔΤΙΩΝ ΙΙΝΏ	ER UNIFORM CHI	I D CHSTO						
			ENFORCEMENT A							
				(55552	·· ·)					
1. 1	am (check one)	): a party to	this proceeding to de		•	the authorized rethis proceeding to deter	presentative of the mine custody of a child			
2. T					····	eding, as follows (list old				
L	Full Name			Date o	f birth	Place of birth (	city and state)			
a	١.									
-										
	).									
c	<b>:</b> .									
c										
L. 3. a	Additional Check (Provide the	Children" at the top this box if there is current address of	o, provide all requeste only one child or if all the child listed in iten	ed information of the childre on 2a and their	for each addition listed in item residence hist	e piece of paper, write "I' ional child, and attach to 2 have lived together for ory for the past <b>five yea</b> l	this form.) the past five years. rs. If the current			
							ly the state of residence.)			
		of residence onth/Year)	Residen (City, Sta		l.	child lived with and te current address	Relationship			
	From:	To present								
			Confidential (lis	st state only)	Confide	ntial (list state only)				
	From:	То:								
	From:	То:								
	From:	То:								
	From:	То:								
b	Check	this box if there is	more than one child a	ind all the chil	dren <i>have not</i>	rsed for this purpose.) lived together for the pas heir residence history fo	st five years. (Attach r the past five years.) Page 1 of 2			

CA	SE NAME:				CASE NUMBER:	FL	-105/GC-120		
4.	Do you have information or custody or visitation p	proceeding, in Ca	you participated as a pa alifornia or elsewhere, co a copy of the orders if y	ncerning a child	d subject to this procee	eding?	er court case		
	Proceeding	Case number	Court (name, state or tribe, location)	Court order or judgment (date)	Name of each child	Your connection to the case	Case status		
	a. Family								
	b. Probate Guardianship								
	c. Other								
	Proceeding		Case Number		Court (name, state or tribe, location)				
	d. Juvenile								
	e. Adoption								
5. One or more domestic violence restraining/protective orders are now in ef and provide the following information):				ect. (Attach a copy of	the orders if you	ı have one			
	Court	County	State or Tribe	Case	Number (if known)	Orders exp	oire (date)		
	a. Criminal								
	b. Family								
	c. Juvenile								
	d. Other								
6.	Do you know of any per or visitation with any chi a. Name and address o	ild in this case?	party to this proceeding Yes No b. Name and addres	(If yes, provi	ide the following inforn		-		
	Claims custody rights Claims visitation rights Claims vi		Has physical of Claims custod Claims visitation	y rights on rights	rights Claims custody rights rights Claims visitation rights				
	Name of each child:		Name of each child:		Name of each	i chiia:			
7. I de	Number of pages	***************************************	l - laws of the State of Cali	fornia that the fo	pregoing is true and co	rrect.			
Da	te:								
	/NAME C	DE DECLARANT)		<u> </u>	(SIGNATURE OF I	DECLADANT			

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.

			10	A 4	00	/ A \
FL-1	105	(A)	/G	C-1	20	(A

				1 4-1	03(A)/00-120(A)
CASE NAI	ME:			CASE NUMBER:	
Instructio	ons: If all the ch	nildren subiect to t	he proceeding have not lived togeth	CTION AND ENFORCEMENT AC er for the last five years, use as many vely, and attach all pages to form FL-10	copies of this form
3. b	provide only Reside	e past <b>five years.</b> the state of reside	nce.) the same as given for the child liste	(Provide the child's current address and under Family Code section 3429, cheed in item 2a on form FL-105/GC-120.	ck the box and
		of residence onth/Year)	Residence (City, State)	Person child lived with (name and complete current address)	Relationship
	From:	To present	Confidential (list state only)	Confidential (list state only)	
	From:	То:			
	From:	To:			
	From:	То:			
	From:	То:			
3. b	provide only Reside	e past <b>five years.</b> the state of reside	nce.) the same as given for the child liste	(Provide the child's current address of under Family Code section 3429, cheed in item 2a on form FL-105/GC-120.	ck the box and
		of residence onth/Year)	Residence (City, State)	Person child lived with (name and complete current address)	Relationship
	From:	To present	Confidential (list state only)	Confidential (list state only)	
	From:	То:			
	From:	То:			
	From:	То:			
	From:	To:			

				El .40	D5(A)/GC-120(A)
CASE NAM	лЕ:			CASE NUMBER:	55(A)/60-120(A)
				CTION AND ENFORCEMENT ACT	
				ner for the last five years, use as many ovely, and attach all pages to form FL-10	
3. b	provide only Reside	e past <b>five years.</b> I the state of resider	nce.) the same as given for the child liste	(Provide the child's current address and under Family Code section 3429, checked in item 2a on form FL-105/GC-120. (	ck the box and
	Dates of residence (Month/Year)		Residence (City, State)	Person child lived with (name and complete current address)	Relationship
	From:	To present	Confidential (list state only)	Confidential (list state only)	
	From:	То:			
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	From:	То:			
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3. b	provide only Reside	e past <b>five years.</b> I the state of resider	nce.) the same as given for the child liste	(Provide the child's current address a I under Family Code section 3429, chec ed in item 2a on form FL-105/GC-120. (a	ck the box and
Dates of residence (Month/Year)			Residence (City, State)	Person child lived with (name and complete current address)	Relationship
	From:	To present	Confidential (list state only)	Confidential (list state only)	
	From:	То:			
	From:	То:			

Page \_\_\_\_ of \_\_\_

From:

From:

To:

To:

			•=•
PARTY WITHO	OUT ATTORNEY OF ATTORNEY STATE BAR NO.:		FOR COURT USE ONLY
NAME:			
FIRM NAME:			
STREET ADDR	RESS:		
CITY:	STATE:	ZIP CODE:	
TELEPHONE N	IO.: FAX NO.:		
E-MAIL ADDRE	ESS:		
ATTORNEY FO	DR (name):		
SUPERIOR	COURT OF CALIFORNIA, COUNTY OF		
STREET ADDR	RESS:		
MAILING ADD	RESS:		
CITY AND ZIP	CODE:		
BRANCH NAM	E:		
PETITIO	ONER:		
RESPON	DENT:		
	PROOF OF SERVICE OF SUMMON	NS	CASE NUMBER:
a.	me of service I was at least 18 years of age and not a Family Law: Petition—Marriage/Domestic Partnership Marriage/Domestic Partnership (form FL-120)  Uniform Parentage: Petition to Determine Parental Response to Petition to Determine Parental Relation  Custody and Support: Petition for Custody and Support blank Response to Petition for Custody and Support  (1) Completed and blank Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) (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)	or (form FL-100), Summons (form FL-200), Summ	orm FL-110), and blank Response— mmons (form FL-210), and blank  20), Summons (form FL-210), and  30)  d and blank Financial Statement  d) (form FL-155)  d and blank Property  on (form FL-160)  or Order (form FL-300), and blank  ore Declaration to Request for Order  320)
2. Address	s where respondent was served:		
	•		
3. I served a. 🔲 b. 🔲	the respondent by the following means (check proper Personal service. I personally delivered the copies on (date):  Substituted service. I left the copies with or in the power who is (specify title or relationship to respondent):  (1) (Business) a person at least 18 years of a business of the respondent. I informed the (2) (Home) a competent member of the house informed the person of the general nature of the least (data).	to the respondent (Code Civ. l at (time): bresence of (name): ge who was apparently in cha person of the general nature of shold (at least 18 years of age) of the papers.	rge at the office or usual place of of the papers.
	on (date):	at (time):	ndent at the place where the
	I thereafter mailed additional copies (by first class,		ndent at the place where the
	copies were left (Code Civ. Proc., § 415.20b) on (de		personal service
	A declaration of diligence is attached, stating the	actions taken to first attempt t	Dei Sullai Sel Vice.

PETITIONER:	CASE NUMBER:
RESPONDENT:	
3. c. Mail and acknowledgment service. I mailed the copies to the respondent, addr	from (city): -117) and a postage-paid return dgment of Receipt (form FL-117).)  urn receipt requested). (Attach signed
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 in (1) Registration no.:  (2) County:  (3) The fee for service was (specify): \$	). ndependent contractor
5.	regoing is true and correct.
-or-	
6.	rue and correct.
Date:	
(NAME OF PERSON WHO SERVED PAPERS)	SIGNATURE OF PERSON WHO SERVED PAPERS)

# LEAVE FORMS FL-220 & FL-335 BLANK FOR THE RESPONDENT

PA	RTY WITHOUT ATTORNEY OR ATTORNEY	STATE BAR NUMB	ER:	FOR COURT USE ONLY
NA	ME:			
FIF	RM NAME:			
ST	REET ADDRESS:			
CIT	Y:	STATE: ZIP	CODE:	
TE	LEPHONE NO.:	FAX NO.:		
E-1	MAIL ADDRESS:			
AT	TORNEY FOR (name):			
	UPERIOR COURT OF CALIFORNIA, COUN	TY OF		-
	STREET ADDRESS:			
	MAILING ADDRESS:			
	CITY AND ZIP CODE:			
	BRANCH NAME:			
	PETITIONER:			
	ESPONDENT:			
				CASE NUMBER:
	<b>RESPONSE TO PETITION TO DE</b>	TERMINE PARENT	AL RELATIONSHIP	
1.	The petitioner			
٠.	a. is a parent of the children in i	tem 2		
	b. is not a parent of the children			
	c. is the child or the child's pers		pecify court and date of an	pointment):
	d. Other (specify):	onal representative (o)	out and date of ap	pomanon.
	d. Strief (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 ch		vere conceived.	
	c. does not live in the state of C			
	d. was not in California when the	e children listed in iten	2 were conceived.	
	e.  Other (specify):			
4	The children			
٦.	a.  live or are found in this count	V		
			edings for administration	of the estate have been or could be started
		3 deceased, and proof	comigs for darministration	of the coluce have been of could be claried
	in this county.			
5.	The respondent is			
	a.  the parent of the children liste	ed in item 2 above.		
	b. not certain if the respondent	is the parent of the chi	dren listed in item 2 above	9.
	c. not the parent of the children			
	d. Other (specify):			
6.	Additional statements			
				aternity. (Attach a copy if available.)
	b. Parentage has been establish	ned in another case 📮	governmental child support of the property	pport   Other (specify):
	c. Public assistance is being pro			
7.	A completed Declaration Under Uniform	n Child Custody Juriso	liction and Enforcement A	ct (UCCJEA) (form FL-105) is attached.

CEB Essential ceb.com

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.

FL-220 [Rev. September 1, 2021]

	1 L-333
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO. (Optional):	
E-MAIL ADDRESS (Optional):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
STREET ADDRESS:	
MAILING ADDRESS:	
CITY AND ZIP CODE:	
BRANCH NAME:	
PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	
	(If applicable, provide):
OTHER PARENT/PARTY:	HEARING DATE:
PROOF OF SERVICE BY MAIL	HEARING TIME:
THOSE OF SERVICE DE MINIE	DEPT.:
NOTICE: To serve temporary restraining orders you must use personal servi  1. I am at least 18 years of age, not a party to this action, and I am a resident of	
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  b. placing the envelope for collection and mailing on the date and at the business practices. I am readily familiar with this business's practice mailing. On the same day that correspondence is placed for collection business with the United States Postal Service in a sealed envelope of the same day that correspondence is placed for collection business with the United States Postal Service in a sealed envelope of the same day that correspondence is placed for collection business with the United States Postal Service in a sealed envelope of the same day that correspondence is placed for collection business with the United States Postal Service in a sealed envelope of the same day that correspondence is placed for collection business with the United States Postal Service in a sealed envelope of the same day that correspondence is placed for collection business with the United States Postal Service in a sealed envelope of the same day that correspondence is placed for collection business with the United States Postal Service in a sealed envelope of the same day that correspondence is placed for collection business with the United States Postal Service in a sealed envelope of the same day that correspondence is placed for collection business with the United States Postal Service in a sealed envelope of the same day that correspondence is placed for collection business with the United States Postal Service in a sealed envelope of the same day that correspondence is placed for collection business with the United States Postal Service in a sealed envelope of the same day that correspondence is placed for collection business with the United States Postal Service in a sealed envelope of the same day that correspondence is placed for collection business with the United States Postal Service in a sealed envelope of the same day that the same d	e place shown in item 4 following our ordinary for collecting and processing correspondence for n and mailing, it is deposited in the ordinary course of
<ul><li>4. The envelope was addressed and mailed as follows:</li><li>a. Name of person served:</li><li>b. Address:</li></ul>	
<ul><li>c. Date mailed:</li><li>d. Place of mailing (city and state):</li></ul>	
<ol> <li>I served a request to modify a child custody, visitation, or child support ju- address verification declaration. (Declaration Regarding Address Verifica Custody, Visitation, or Child Support Order (form FL-334) may be used for</li> </ol>	tion—Postjudgment Request to Modify a Child
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)  Page 1 of 1
	Page 1 of 1

# 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.

