Instructions For **Temporary Orders**

WHEN TO USE THIS PACKET

If you believe the health and safety of your child(ren) is/are at risk if the court does not make immediate orders, you can ask the court for "temporary orders." These orders are not the norm and are to be requested only in extreme situations to avoid irreparable harm.

STEPS TO FILE A TEMPORARY ORDER REQUEST:

You must **notify** the other party *before* 10:00 a.m. the COURT day before you file your request for temporary orders. This means if you want to file on a Monday you need to give notice before 10:00 a.m. on Friday. You must be very specific when you give notice. You must tell the other party exactly <u>what you are filing</u>, <u>what you are asking for</u>, and <u>when you will be filing your forms</u>. If you do not give proper prior notice, it is likely your request will be denied. The court can only consider your request for emergency orders if you give timely prior notice or you show that an exception applies. There are very few exceptions to the prior notice requirement. These exceptions are listed on the "Request for Ex Parte Orders" pleading document. If you are unable to give notice or feel notice should not be required in your case, you will need to provide facts to support the reason why you feel you should not have to comply with the notice requirement. Remember, <u>the law is notice is required</u>, so you are asking the court for an exception in your case. An exception will not be granted unless there is a thorough explanation with facts to support the request.

Note: Even if an explanation is provided, the court may decide not to waive the notice requirement.

1. The following forms in this packet are to be completed:

☐ Temporary Emergency (Ex Parte) Orders
☐ Request for Ex Parte Orders
☐ Request for Order
☐ Attached Declaration
☐ Declaration under Uniform Child Custody Jurisdiction Act
☐ FL-105

2. You will need to make <u>at least</u> 2 additional copies of each form you fill out and any attachments you are including. If there is an existing custody/visitation order, you must attach a copy of the order.

Instructions for **Temporary Orders**

ADDITIONAL INFORMATION

3. Once the packets are completed, you must submit the original and 2 copies to the Family Law Clerk on the 2nd floor of the courthouse. Once submitted, the court will review your paperwork and decide if it will grant ex parte relief or temporary orders. If temporary orders are granted, a hearing will be set and you will need to have someone other than you, over the age of 18, personally serve the other party with the paperwork no later than 5 court days before the hearing or as otherwise ordered by the court. Whoever serves the papers must complete a Proof of Personal Service [FL-330] and file it with the court before the court date.

In your attached declaration, you must tell the court why you should be granted a temporary/emergency order. You must provide a very detailed declaration to the court explaining why you need emergency orders. The declaration must contain **facts** within your personal knowledge to show why the emergency order is needed. It is not enough to say it is "an emergency" or "the child is in danger" or "harm will occur if orders are not made." Those statements are opinions and conclusions. You need to provide facts to support what you are asking for and facts to support your opinion regarding harm or danger. If you feel there is a chance of harm or danger, you need to explain the circumstances to the court. If you do not provide facts and a detailed description to support your request, it will not be granted.

If you have an existing case, the Petitioner and Respondent never change; the petitioner is the person who started the case in the beginning and will remain the petitioner for the duration of the case.

There is a filing fee for filing the enclosed forms. You may be eligible for a "Fee Waiver" which is available as a separate packet.

Revised 01/15/2025

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: YOUR NAME	
	FOR COURT USE ONLY
YOUR ADDRESS	SAMPLE
CITY, STATE, ZIP CODE STATE: ZIP CODE:	
YOUR TELEPHONE NUMBER E-MAIL ADDRESS: FAX NO.:	ONLY
ATTORNEY FOR (name):	DO NOT
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: Fresno County Superior Court	DONOI
MAILING ADDRESS: 1130 "O" Street	WRITE ON
CITY AND ZIP CODE: Frospo CA 93724-2220	VVIXITE OIL
PETITIONER: PARTY WHO INITIALLY OPENED CASE	THIS COPY!
RESPONDENT: THE OTHER PARTY	THIS COLT.
OTHER PARENT/PARTY:	
TEMPORARY EMERGENCY (EX PARTE) ORDERS	CASE NUMBER:
Child Custody Visitation (Parenting Time) Property Control	COURT CASE NUMBER
Other (specify):	COOKT CASE NOWIBER
CHECK ALL THE BOXES THAT APPLY	
TO (name(s)): WRITE THE OTHER PARTY'S NAME	
Petitioner Respondent Other Parent/Party	Other (specify):
A court hearing will be held on the R CHECK THE BOXES THAT APPLY high	his order, as follows:
a. Date: LEAVE THIS BOX BI	LANK
b. Address of court same as noted above other (specily).	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE
CHILD CUSTODY	
<u>lemp</u>	porary physical custody, care, and control to: itioner Respondent Other Party/Parent
CHILD #1'S NAME BIRTHDATE	
CHILD #2'S NAME BIRTHDATE	
CHILD #3'S NAME BIRTHDATE	
CHILD #4'S NAME BIRTHDATE	5 5 5
Continued on Attachment 3(a)	
b. Visitation (Parenting Time) The temporary orders for physical custody (3) are subject to the other party's or parties' rights of visitation (parenting Time) IF YOU ARE ASKING FOR TEMPORARY VISITATION(PARENTING CHECK THIS BOX AND BRIEFLY DESCRIBE THE ORDER REQ	ng time) as follows (specify): ING TIME) ORDERS,

THIS IS A COURT ORDER.

Page 1 of 2



See Attachment 3(b)

		FL-30
PETITIONER: PARTY WHO INITIALLY OPENED CA	ASE	COURT CASE NUMBER
OTHER PARENT/PARTY:		GOOKT GAGE NOMBER
 CHILD CUSTODY (continued) Travel restrictions 		
(1) The party or parties with temporary physical custody, children from the state of California unless the co		
(2) Petitioner Respondent Other Pare	nt/Party must not r	emove their minor children (specify):
(b) if from the following counties (specify):	ORDER TO PROHIL	COURT TO MAKE A TEMPORARY BIT THE OTHER PARTY FROM O OUT OF THE STATE OR CERTAIN THE BOXES THAT APPLY
d. Child abduction prevention orders are attached (s	ee form FL-341(B)).	
 e. (1) Jurisdiction: This court has jurisdiction to make child Jurisdiction and Enforcement Act (part 3 of the Califo 		
(2) Notice and opportunity to be heard: The respondir provided by the laws of the State of California.	ng party was given no	otice and an opportunity to be heard as
(3) Country of habitual residence: The country of habit The United States of America Other (specific		child or children is (specify):
(4) If you violate this order, you may be subject to civ	vil or criminal penal	ties, or both. CHECK ALL THE
4. PROPERTY CONTROL		BOXES THAT APPLY TO YOUR REQUEST
a. Petitioner Respondent Other Parent control of the following property that the parties o	/Party is given exc wn or are buying	lusive temporary use possession, and lease or rent
b. Petitioner Respondent Other Parent and encumbrances coming due while the order is in effect	•	o make the following payments on the liens
Pay to: For:	Amount: \$	Due date:
Pay to: For:	Amount: \$	Due date:
Pay to: For: Pay to: For:	Amount: \$ Amount: \$	Due date: Due date:
5. All other existing orders, not in conflict with these temporary		
6. OTHER ORDERS (specify):		Additional orders are listed in Attachment 6.
IF THERE WASN'T A BOX FOR WHAT YOU ARE REQUESTING, CHECK THE BOX AND WRITE IT HERE		
Date: DO NOT DATE HERE		DO NOT SIGN HERE
	- Incompany of the second	

JUDGE OF THE SUPERIOR COURT

1	Name: YOUR NAME
2	Address:Your address
3	CITY, STATE, ZIP CODE
4	Telephone: YOUR TELEPHONE NUMBER
5	
6	SUPERIOR COURT OF CALIFORNIA, COUNTY OF FRESNO
7	FAMILY LAW DIVISION
8	
9	PARTY WHO INITIALLY OPENED CASE Case No.: COURT CASE NUMBER
10	Petitioner)
11	Vs. REQUEST FOR EX PARTE ORDERS
12	Respondent WRITE THE OTHER PARTIES' NAME
13	THAT APPLY
14	Other Parent (
15	
16	
17	THIS IS A REQUEST FOR A CHANGE IN STATUS QUO. CHECK THE BOX TO
18	YOUR NAME INDICATE WHICH PARTY YOU ARE IN THE CASE
19	1. I am the Petitioner Respondent Other Parent in the above-
20	referenced action.
21	2. I have information that a similar application is being filed, or has been filed
22	in Fresno County Superior Court or another court (specify):
23	IF YOU BELIEVE THE OTHER PERSON HAS OR
24	WILL BE FILING A REQUEST FOR EMERGENCY ORDERS, WRITE THAT INFORMATION HERE
25	OR, OI have no information that a similar application is being filed or has
26	been filed before any court related to the same parties in this action and
27	involving the same issues.
28	HAS OR WILL BE FILING A REQUEST FOR EMERGENCY ORDERS, CHECK THIS BOX

1	3. NOTICE (If you gave notice, complete item 3a. If you did not give notice com	
2	a. (The gave notice as described in items (1) through	CHECK THE BOX OF THE PARTIES YOU
3	(1) I gave notice to (select all that apply):	GAVE NOTICE TO
4	[] petitioner. [] petitioner's attorney.	
5	[] respondent. [] respondent's attorney.	
6	[] other parent. [] other parent's attorney.	
	[] child's attorney. [] other (specify):	
	NDICATING N YOU GAVE (2) I gave notice on (date):)[] a.m. [] p.m.
9		WRITE THE DATE AND
	[] by fax [] by voicemail	IME YOU NOTIFED THE OTHER PARTY THAT
10	[] by electronic means (if permitted)	YOU WOULD BE FILING YOUR REQUEST FOR
11	[] by overnight mail or other overnight carrier	EMERGENCY ORDERS
12	(3) I gave notice (select one):	
B AF	check A OX THAT PPLIES TO COURT. COURT. [] after 10 a.m. the court day before presenting the court day before presenting the court.	
16	the court because of the following exception	nal circumstances
17 18	(specify): IF YOU DID NOT GIVE PRIOR NOTICE EXCEPTIONAL CIRCUMSTANCES, YO COURT WHY YOU DID NOT GIVE	U MUST TELL THE
19	PLEASE REFER TO THE TEMPORARY IN	STRUCTION PAGE (1)
20	(4) I notified the person in 3a(1) that the following to	
21	(4) I notified the person in 3a(1) that the following te	imporary emergency
22	orders are being requested (specify): YOU MUST TELL THE OTHER PARTY E.	XACTLY WHAT
23	YOU ARE FILING AND WHAT YOU ARE	ASKING FOR
24	(5) The person in 3a(1) responded as follows:	
25	WRITE THE OTHER PARTY'S RESPONS	SE
26		To the second se
<u>27</u>	(6)	3a(1) will oppose the
B ⁽	OX THAT request for temporary emergency orders. PPLIES TO	
OF FRESNO	REQUEST FOR EX PARTE ORDERS	Page 2 of 5

1	b. Request for waiver of notice. Due to exceptional circumstances, I did
2	not give notice about the request for temporary emergency orders. I ask
3	/ that the court waive notice to the other party to help prevent (specify):
4	[] immediate danger or irreparable harm to myself or to the child(ren)
5	in this case.
6	[] an immediate risk that the child(ren) in this case will be removed from
7	the state of California.
	[] other exceptional circumstances (specify):
CHEC BOX T	
APPLIE YOUR C	S TO
TOOK	Facts showing exceptional circumstances in support of the request to
11	waive notice include (specify):
12	IF YOU DID NOT CONTACT THE OTHER PARTY, YOU
13	MUST TELL THE COURT THE EXCEPTIONAL CIRCUMSTANCES ON WHY YOU DID NOT GIVE NOTICE
14	AND ARE ASKING FOR THE NOTICE TO BE WAIVED
15	c. Unable to provide notice. I did not give notice about the request for
16	temporary emergency orders. I used my best efforts to tell the opposing
17	party when and where the application would be presented but was
18	unable to do so. The efforts I made to inform the other person were
19	(specify): WRITE DOWN EXACTLY HOW YOU TRIED TO NOTIFY THE OTHER PARTY
20	STATE EXACTLY WHAT ATTEMPTS YOU MADE AND WHEN YOU MADE THEM
21	4. Child Custody and Visitation
22	a. [] I do not have a child custody and visitation order and I want one.
i	b. [] I have a child custody and visitation order and I want it changed.
1	A copy of the current order is attached (copy must be attached).
YOUR	C. The custody and visitation practices for the last twelve months have
26	been (specify):
27	WHO HAVE THE CHILDREN BEEN LIVING WITH?
28	HOW OFTEN DO THE CHILDREN VISIT WITH THE OTHER PARENT?
COUNTY OF FRESNO	WHAT DAYS AND TIMES DO THE CHILDREN VISIT WITH THE OTHER PARENT? REQUEST FOR EX PARTE ORDERS Page 3 of 5
Fresno CA	Tage of a

Fresno, CA

- 1		
1	d.	I propose the following plan for custody and visitation (specify):
2		WRITE WHAT YOU WOULD LIKE THE CUSTODY AND VISITATION PLAN TO BE
3		WHO SHOULD THE CHILDREN LIVE WITH?
4		WHEN SHOULD THEY VISIT THE OTHER PARENT?
5	е.	I believe that if the current custody and visitation practices/orders are
6		not changed, the child(ren) may be in danger of immediate physical or
7		emotional harm (please explain):
8		
9		BE IN DANGER OF IMMEDIATE PHYSICAL OR EMOTIONAL HARM
10		
11		
12		
13		
14		·
15		<u> </u>
16		
17		
18		
19		
20		
21		·
22	f.	I [] have not contacted Child Protective Services (CPS) for an CHECK ALL THAT APPLY
	IECK A X THAT	investigation of the problem.
1	LIES TO JR CASE	CPS [] has [] has not opened an investigation of the problem.
<u> </u>		A Team Decision-Making Meeting (TDM) [] has [] has not occurred.
25		A copy of the TDM Summary Report [] is [] is not attached.
26		I did not attach a copy of the TDM Summary Report because (specify):
27 28		A TDM is scheduled for (date):
1		

1	g.	. [] have [] have not contacted the District Attorney's Office about the		
CHE		problem. The District Attorney's Office [] has [] has not opened an		
BOX APPLII		investigation.		
YOUR	CASE	I [] have [] have not contacted the Police or Sheriff's Department		
4		about the problem. The following people were placed under arrest:		
5				
6		An Emergency Protective Order (EPO) [] was [] was not issued.		
7	CHECK	The EPO protects the following people:		
8	THAT	and expires on (date):		
9	APPLY	A copy of the EPO [] is [] is not attached. I did not attach a copy		
10		because:		
11				
12		Law enforcement report number:		
13				
14				
15	I declare under penalty of perjury under the laws of the State of California			
16	th	nat the information above is true and correct.		
17				
18	Do	rate: TODAY'S DATE		
19		PRINT YOUR NAME HERE SIGN YOUR NAME HERE		
20		(TYPE OR PRINT NAME) (SIGNATURE)		
21		(FITE OR FRITTIVITE)		
22				
23				
24				
25				
26				
27				
28				

COUNTY OF FRESNO Fresno, CA

FL-300

PARTY WITHOUT ATTORNEY OR ATTORNEY STATE BAR NUMBER:	FOR COURT USE ONLY
NAME: YOUR NAME	SAMPLE
STREET ADDR YOUR ADDRESS	SAIVIPLE
CITY: CITY, STATE, ZIP CODE TELEPHONE N EMAIL ADDRES YOUR TELEPHONE NUMBER STATE: ZIP CODE: FAX NO.:	ONLY
ATTORNEY FOR (name):	DO NOT
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: Fresno County Superior Court	DONOI
MAILING ADDRESS: 1130 "O" Street	WRITE ON
CITY AND ZIP CODE: BRANCH NAME: Fresno CA 93724-2220	
PETITIONER: PARTY WHO INITIALLY OPENED CASE RESPONDENT: THE OTHER PARTY OTHER PARENT/PARTY: CHECK THIS BOX	THIS COPY!
REQUEST FOR ORDER CHANGE TEMPORARY EMERGENCY ORDERS	CASE NUMBER:
Child Custody Visitation (Parenting Time) Spousal or Partner Support Child Support Property Control Attorney's Fees and Costs Other (specify):	COURT CASE NUMBER
	change or end an order
	d form <u>FL-300-INFO</u> and form
1. TO (name(s)): Petitioner Respondent Other Parent/Party Other (s) 2. A COURT HEARING WILL BE HELD AS FOLLOWS: CHECK THE BOXES THAT APPLY a. Date: b. Address of c LEAVE THIS BOX BLANK 3. WARNING to the person served with the Request for Order: The court may make the request not file a Responsive Declaration to Request for Order (form FL-320), serve a copy on the other before the hearing (unless the court has ordered a shorter period of time), and appear at the hear more information.)	parties at least nine court days
It is ordered that: COURT ORDER (FOR COURT USE ONLY)	•
4 Time 5 A Respc 6 The part (specify) 7 The order served v 8 Other (s) LEAVE SECTIONS 4-8 BLANK	(date): i): ling counseling as follows and must be personally
Date: LEAVE BLANK	JUDICIAL OFFICER

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:

PARTY WHO INITIALLY OPENED CASE
THE OTHER PARTY

CASE NUMBER:

COURT CASE NUMBER

REQUEST FOR ORDER

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

RESTRAINING ORDER INFORMATION		
One or more domestic violence restraining/protective orde		
	nt/Party (Attach a copy of the orders	IF THERE IS A RESTRAINING
The orders are from the following court or courts (specify of	county and state):	ORDER IN EFFECT
a. Criminal: County/state (specify):	Case No. (if known):	BETWEEN YOU AND THE
b. Family: County/state (specify):	Case No. (if known):	OTHER PARTY, COMPLETE
c. Juvenile: County/state (specify):	Case No. (if known):	SECTION 1. AND ATTACH A
d. Other: County/state (specify):	Case No. (if known):	COPY, IF YOU HAVE ONE
2) 011125 0001 051	I IF YOU ARE ASKING FOR CHILD CI	USTODY/VISITATION ORDERS
VISITATION (PARENTING TIME)	Troquosit	omporary emergency cracic
a. I request that the court make orders about the followin	g children (specify):	
Child's Name	Legal Custody to (person who	Physical Custody to (person
CHECK Child's Name Date of Birth	decides: health, education, etc).	with whom child lives):
BOXES CHILD #1'S NAME BIRTHDATE THAT CHILD #2'S NAME BIRTHDATE		
THAT	IF YOU ARE ASKING FOR CUST	ODY ORDERS, CHECK
CHILD #3'S NAME BIRTHDATE	THE BOXES AND WRITE IN THE	E NAME(S) OF WHOM
CHIED #4 3 NAME BIRTHDATE	YOU WANT TO HAVE LEGAL ANI	D PHYSICAL CUSTODY
K K	K	Attachment 2a.
b. The orders I request for child custody	visitation (parenting time) are:	1
(1) Specified in the attached forms:		HECK BOXES THAT APPLY
CHECK ALL Form FL-305 Form FL-3:	11 Form FL-312	Form FL-341(C)
Form FL-341(D) Form FL-34	41(E) Other (specify):	
(2) As follows (specify):		Attachment 2b.
7 1	I= VA	7
IF YOU CHECK THIS BOX,	TO DR	NEED MORE SPACE OVIDE FURTHER
PROVIDE FURTHER DETAILS TO SUPPORT		LS, USE FORM MC-031
REGARDS TO CUSTODY/VISITATION		HECK THIS BOX
	TTACH ADDITIONAL FORMS FOR CHILD	
The state of the s	OX OF THE FORM(S) YOU PRINTED AND	
c. The orders that I request are in the best interest of the	children because (specify):	Attachment 2c.
EXPLAIN WHY THE ORDERS YOU ARE	DECLIESTING	
ARE GOOD FOR YOUR CHILD(
ANZ GGGS FOR TGGR GINES	The state of the s	

PETITIONER: PARTY WHO INITIALLY OPENED CASE	CASE NUMBER:
RESPONDENT: THE OTHER PARTY	COURT CASE NUMBER
OTHER PARENT/PARTY:	
2. d. This is a change from the current order for child custody	visitation (parenting time).
(1) The order for legal or physical custody was filed on (da	ate): . The court ordered (specify):
IF YOU ARE CHANGING AN EXISTING CUSTODY ORDE	ER, CHECK THIS BOX
IF YOU ARE WRITE IN THE DATE YOUR EXISTING ORDER WAS FIL	ED ON AND GIVE A BRIEF DESCRIPTION OF WHAT
ASKING TO YOUR CUSTODY ORDER IS	
CHANGE (2) The visitation (parenting time) order was filed on (date	,
EXISTING ORDERS, IF YOU ARE CHANGING AN EXISTING <u>VISITATION</u> ORD	DER, CHECK THIS BOX
CHECK THE WRITE IN THE DATE YOUR EXISTING ORDER WAS FILE	ED ON AND GIVE A BRIEF DESCRIPTION OF
APPROPRIATE WHAT YOUR VISITATION ORDER IS	
BOXES	
pro-pro-pro-pro-pro-pro-pro-pro-pro-pro-	Attachment 2d.
3. CHILD SUPPORT COMPLETE THIS SECTION IF YOU ARE ASKING F	OR CHILD SUPPORT
(Note: An earnings assignment may be issued. See Income Withholding to	or Support (form <u>FL-195</u>)
a. I request that the court order child support as follows:	for each child Monthly amount (\$) requested
Child's name and age based on the chil	Id support guideline. (if not by guideline)
CHILD #1'S NAME BIRTHDATE	
CHILD #2'S NAME BIRTHDATE	
CHILD #3'S NAME BIRTHDATE	MPLETE WHICH EVER ONE APPLIES
CHILD #4'S NAME BIRTHDATE	
	Attachment 3a.
b. I want to change a current court order for child support filed on (da	ate):
The court ordered child support as follows (specify):	
COMPLETE THIS SECTION IF YOU ARE ASKING TO CHANGE AN	N ORDER THAT WAS PREVIOUSLY MADE
	15
c. I have completed and filed with this Request for Order a current Incom a current Financial Statement (Simplified) (form FL-155) because I me	
d. The court should make or change the support orders because (specify	
EXPLAIN WHY THE COURT SHOULD GRANT YOUR REQUEST	Attaciment 3d.
FOR CHILD SUPPORT OR YOUR REQUEST TO CHANGE IT	
IF YOU ARE REQUESTING CHILD SUPPORT ORDERS, CHECK	
THIS BOX AND COMPLETE FORM FL-150	
4. SPOUSAL OR DOMESTIC PARTNER SUPPORT COMPLETE THIS SEC	CTION IF YOU ARE ASKING FOR SPOUSAL SUPPOI
(Note: An Earnings Assignment Order for Spousal or Partner Support (ton	
a. Amount requested (monthly): \$	
b. I want the court to change end the current s	support order filed on (date):
The court ordered \$ per month for support.	
c. This request is to modify (change) spousal or partner support at	fter entry of a judgment.
I have completed and attached Spousal or Partner Support Dec	
that addresses the same factors covered in form FL-157.	
d. I have completed and filed a current <i>Income and Expense Declaration</i>	
e. The court should should make, change, or end the support orders bec	
EXPLAIN WHY THE COURT SHOULD GRANT YOUR F	I
FOR SPOUSAL SUPPORT OR YOUR REQUEST TO C	HANGE II

	TY WHO INITIALLY OPENED CA		BER: JRT CASE NUMBER	- Commence of the Commence of
5. PROPERTY CONTROL a. The petitione control of the followi	ng property that we own or are CHECK ANY OT APPLY, TO TELL	rent/party be given exclusive buying lease or rent THER BOXES THAT THE COURT WHAT		n, and
b. The petitions	r res	REQUESTING	the following payments or	ı debts
	e while the order is in effect:	A wa a combo C	Dua data.	
Pay to:	For:	Amount: \$		
	For:			
	For:			
	ge from the current order for property	• • •		
d. Specify in Attachme	nt 5d the reasons why the court shoul	id make or change the proper	rty control orders.	
a. A current <i>Income an</i>b. A <i>Request for Attorn</i>	and costs, which total (specify amount of Experiments) CHECK ANY OTHE APPLY, TO TELL THE	ER BOXES THAT HE COURT WHAT	he following to support my re	
in that form.	YOU ARE RE ation for Attorney's Fees and Costs A	-	declaration that addresses t	tho
factors covered in th		macriment (101111 <u>r L-130)</u> of a	deciaration that addresses t	IIIC
7. OTHER ORDERS REC	UESTED (specify):		Attachme	ent 7.
	X FOR WHAT YOU ARE REQUESTING, TO CHECK THE "OTHER" BOX ON THE RDER REQUESTED		IT HERE	
a. To serve the I	TIME UNTIL HEARING I urgently ne Request for Order no less than (numb ate and service of the the Request fo ause (specify):	oer): court days before	e the hearing. Attachme	ent 8.
9. FACTS TO SUPPORT cannot be longer than	the orders I request are listed below. O pages, unless the court gives me p	The facts that I write in suppo permission.	ort and attach to this request Attachme	
•	WHY YOU ARE REQUESTING THE DE FACTS AND/OR EVIDENCE TO			
I declare under penalty of perjury is true and correct. Date: TODAY'S DATE PRINT YOUR INTERPREDED		SIGN YOU	ed in this form and all attach IR NAME HERE JATURE OF APPLICANT)	ments

Requests for Accommodations

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

PLAINTIFF/PETITIONER: PARTY WHO INITIALLY OPENED CASE

DEFENDANT/RESPONDENT: THE OTHER PARTY

CASE NUMBER:

COURT CASE NUMBER

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)

declare under penalty of perjury under the laws of the State of Califo Date: TODAY'S DATE	ornia 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):

PLAINTIFF/PETITIONER: PARTY WHO INITIALLY OPENED CASE

DEFENDANT/RESPONDENT: THE OTHER PARTY

CASE NUMBER:

COURT CASE NUMBER

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 Date: TODAY'S DAT		s of the State of California that the foregoing is true and correct.	
PRIN	T YOUR NAME HERE (TYPE OR PRINT NAME)	SIGN YOUR NAME HERE (SIGNATURE OF DECLARANT)	
		Attorney for Plaintiff Petitioner Respondent Other (Specify):	Defendant
Form Approved for Optional Use Judicial Council of California MC-031 [Rev. July 1, 2005]	CEB* Essential Forms	ATTACHED DECLARATION	Page 1 of 1

FL-105/GC-120

ATTORNEY OR PARTY WITHO	OUT ATTORNEY	STATE BAI	R NUMBER:		FOR COUR	RT USE ONLY	
FIRM NAME: STREET ADDRES CITY: CITY: CITY, S	NAME ADDRESS STATE, ZIP CO TELEPHONE	0 ·	ZIP CODE:			1PLE JLY	
ATTORNEY FOR (name):						NOT	
MAILING ADDRESS: 1	CALIFORNIA, COL resno County S 130 "O" Street resno CA 9372	Superior Court				NOT E ON	
PETITIONER: PA		ses other than proba FIALLY OPENED RTY		ps.)	THIS	COPY!	
OTHER PARTY: CHILD'S NAME (<i>Juveni</i>	le cases only):	Γ	CHEC	K THE			
(This	section applies on	nly to probate guard	APPROPI	RIATE BOX	CASE NUMBER:		
	ARATION UNDE	ANK ER UNIFORM CHI			COURT CAS	SE NUMBER	
1. I am (check one):	a party to	this proceeding to de	etermine custo	dy of a child	the authorized re	presentative of the	
2. There are (specify	number):	WRITE IN THE			proceeding to determent to determent to determent to be a second t	mine custody of a child lest child first):	
	Full Name		Date of		Place of birth (d	city and state)	
a. OLDEST	CHILD'S NAME		MM/DD/	/YYY	CITY & STATE WHERE CHILD WAS BORN		
L	DEST CHILD'S		MM/DD/	YYYY	CITY & STATE WHERI	E CHILD WAS BORN	
	DEST CHILD'S		MM/DD/		CITY & STATE WHERE		
d. NEXT OL	DEST CHILD'S	NAME	MM/DD/		CITY & STATE WHERI		
Àdditional C	hildren" at t	CK THIS BOX IF LICABLE IN ON CHECK THE CHICAB THE CHICAB APPLICAB	information	for each add	ate piece of paper, write "hitional child, and attach to n 2 have lived together for story for the past five year vide only the state of residents.	this form.)	
Dates o	f residence th/Year)	Resider (City, Sta	nce	Person	child lived with and ete current address	Relationship	
From: MM/DD/YYYY	To present MM/DD/YYYY	CURRENT AD FOR THE COnfidential (list	CHILD	OF PERSO	CURRENT ADDRESS ON CHILD LIVES WITH Jential (list state only)	RELATIONSHIP OF PERSON TO CHILD	
From: F	To: To MM//DD/YYYY THAT CHILD STOPPED To AT EACH ADDRESS To T	THE CHII ADDRES FOR THE FIVE YEA GO IN THE BOXE	SSES PAST ARS	ADDR CHILD THE PA	ME & CURRENT ESS OF PERSON LIVED WITH FOR ST FIVE YEARS GO THESE BOXES	RELATIONSHIP OF PERSON TO CHILD	
b. Check th	is box if there is m	nore than one child a	and all the child	lren <i>have no</i>	used for this purpose.) t lived together for the pas their residence history fo	st five years. (Attach r the past five years.) Page 1 of	

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

Form Adopted for Mandato Judicial Council of Californi FL-105/GC-120 [Rev. Janua IF THE CHILD(REN) HAS LIVED AT MORE THAN 4 ADDRESSES IN THE LAST 5 YEARS,

CHECK THIS BOX AND CREATE AN "ATTACHMENT 3a" AND LIST THE ADDITIONAL ADDRESSES

CA	ASE NAME: PETITIONEI	R'S <u>LAST</u> NAM	E VS RI	ESPONDENT'S <u>LAST</u> I	NAM	E		CASE NUMBER:	T CAS	SF NU	MBER

4.	Do you have information or custody or visitation p	n about, or ha oroceeding, in	ve you Califor	participated as a par nia or elsewhere. coi	ty or nceri	as a witne ning a child	ss or in I subiec	some other ca t to this proce	apacity ii eding?	n, anoth	er court case
<	Yes No			opy of the orders if yo						ation):	
	Duranding			Court	1	ourt order			1	our	
	Proceeding	Case number	er (na	ame, state or tribe, location)	or	judgment <i>(date)</i>	iname	of each child	1	ction to case	Case status
	a. Family			COURT IS TUSE		ANOTHE	-D 00	UDT OAGE			
	b. Probate Guardianship	DEA	LS W	ECOURT IF THER ITH THE CUSTOD EN) IN THIS CASE.	ΥΑ	ND/OR V	ISITAT	TION OF THE			
	c. Other	INF	ORMA	TION IN THIS SEC	CTIC	ON. IF "NO	<u>D</u> ", SK	IP TO NUME	SER 5		
	Proceeding		Case	Number			Cour	t (name, state	or tribe,	locatio	1)
	d. Juvenile							1,000			V- A (
	e. Adoption										
5.	One or more dome			ning/protective orders	s are	now in effe	ect. <i>(Att</i>	ach a copy of	the orde	ers if you	ı have one
	Court	Count	1	State or Tribe		Case N	Number	(if known)	Ord	ders exp	oire <i>(date)</i>
	a. Criminal				randran surouscesso						
	b. Family			HECK THIS BOX I							
	c. Juvenile			PLETE THE INFO					}		
	d. Other		***************************************				***************************************				
6.	Do you know of any person who is not a party to this proceeding who has physical custody of or claims to have rights to custody of or visitation with any child in this case? Yes Yes Yes On (If yes, provide the following information): a. Name and address of person: C. Name and address of person: TELL THE COURT IF THERE IS ANYONE FLISE THAT										
				O HAVE CUSTOD		- 10 / 11 1			s		
Claims custody rights Claims custody rights Claims			ysical cu custody visitation	rights							
	Name of each child: Name of each child:				Name of eac	n child:					
_											
7.	Number of pages			aftha Otata 10 m	•	41		. Car America - 1			
	eclare under penalty of parte: TODAY'S DAT	***************************************	ne iaws	or the State of Califo	ornia	tnat the fo	regoing	is true and co	rrect.		
_u	PRINT YOU		IERE	OCEANO COMPA		\	SIG	N YOUR N	AME	HERF	
_		F DECLARANT)		1	_	<u> </u>	J. U.	(SIGNATURE OF			
_	NOTICE TO DECLARA	NT: You have	2 000	tinuina duty to info	rm t	hie court i	f vou o	htain any inf	rmotio	a about	a quatadu

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

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

CASE NAME:

PETITIONER'S LAST NAME VS RESPONDENT'S LAST NAME

CASE NUMBER:

COURT CASE NUMBER

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

				ely, and attach all pages to form FL-105	
3. b	history for the p provide only the	ast five years. If state of residen	ce.)	(Provide the child's current address ar I under Family Code section 3429, chec	k the box and
		e information is th <i>e information bel</i>		d in item 2a on form FL-105/GC-120. (li	f not the same,
BOX IF THE	B	residence h/Year)	Residence (City, State)	Person child lived with (name and complete current address)	Relationship
CHILDREN HAVE BEEN LIVING AT	From:	To present	CURRENT ADDRESS FOR THE CHILD	NAME & CURRENT ADDRESS OF PERSON CHILD LIVES WITH	RELATIONSHIP OF PERSON TO CHILD
THE SAME ADDRESSES			Confidential (list state only)	Confidential (list state only)	TO OTHER
	From:	То:			
			IF THIS CHILD HAS NO		
	From:	То:	AS THE CHILD ABOVE, WHERE THE CHILD HA	FILL OUT AS BEEN	
	From:	То:	LIVING FOR THE PAST	5 YEARS	
	From:	То:			
3. b	history for the particle provide only the Residence	ast five years. If state of residence	ce.) ne same as given for the child liste	(Provide the child's current address ar I under Family Code section 3429, chec d in item 2a on form FL-105/GC-120. (In	k the box and
BOX IF THE		residence h/Year)	Residence (City, State)	Person child lived with (name and complete current address)	Relationship
CHILDREN HAVE BEEN	From:	To present	CURRENT ADDRESS	NAME & CURRENT ADDRESS OF PERSON CHILD LIVES WITH	RELATIONSHIP OF PERSON
LIVING AT THE SAME	MM/DD/YYYY	MM/DD/YYYY	FOR THE CHILD Confidential (list state only)	Confidential (list state only)	TO CHILD
ADDRESSES	From:	То:	IF THIS CHILD HAS NO	T BEEN	
	From:	То:	AS THE CHILD ABOVE, F WHERE THE CHILD HA LIVING FOR THE PAST 5	FILL OUT S BEEN	
	From:	То:			
	From:	То:			

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

CASE NAME:

PETITIONER'S LAST NAME VS RESPONDENT'S LAST NAME

CASE NUMBER:

COURT CASE NUMBER

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

				er for the last five years, use as many co ely, and attach all pages to form FL-105.	
	history for the pa provide only the	ast five years. If state of residend	ce.)	(Provide the child's current address an under Family Code section 3429, check in item 2a on form FL-105/GC-120. (If	k the box and
		e information bel			,
CHECK THIS BOX IF THE	Dates of	residence	Residence	Person child lived with (name and	Relationship
CHILDREN	(Month	n/Year)	(City, State)	complete current address)	
HAVE BEEN	From:	To present	CURRENT ADDRESS	NAME & CURRENT ADDRESS	RELATIONSHIP
LIVING AT	MM/DD/YYYY	MM/DD/YYYY	FOR THE CHILD	OF PERSON CHILD LIVES WITH	OF PERSON TO CHILD
THE SAME	<u> </u>		Confidential (list state only)	Confidential (list state only)	
ADDRESSES	From:	То:	Commentation (not state emy)	Commontain (not otate only)	
	1 10111.	10.			
			IF THIS CHILD HAS NO		
	From:	To:	LIVING AT THE SAME A	1	
			AS THE CHILD ABOVE, F		
			WHERE THE CHILD HA	1	
	From:	To:	LIVING FOR THE PAST :	TEARS	
	From:	To:	<u> </u>		
	FIOIII.	10.			
	history for the pa provide only the Residence	ast five years. If state of residend	ce.) ne same as given for the child listed	(Provide the child's current address an under Family Code section 3429, check	k the box and
CHECK THIS BOX IF THE CHILDREN		residence n/Year)	Residence (City, State)	Person child lived with (name and complete current address)	Relationship
HAVE BEEN	From:	To present	CURRENT ADDRESS	NAME & CURRENT ADDRESS OF PERSON CHILD LIVES WITH	RELATIONSHIP OF PERSON
LIVING AT	MM/DD/YYYY	MM/DD/YYYY	FOR THE CHILD	OF FERSON CHILD LIVES WITH	TO CHILD
THE SAME	L		Confidential (list state only)	Confidential (list state only)	
ADDRESSES	From:	To:			
			IF THIS CHILD HAS NOT	BEEN	
			LIVING AT THE SAME AD		
	From:	To:	AS THE CHILD ABOVE, F	1 1	
			WHERE THE CHILD HAS		
		To	LIVING FOR THE PAST 5	YEARS	
	From:	То:			
	From:	To:			
			1		
					Page of

Family Code, § 3400 et seq.; Probate Code, §§ 1510(f), 1512 www.courts.ca.gov

ATTORNEY OR PARTY WITHOUT ATTORNEY OR GOVERNMENTAL AGENCY (under Family Code, §§ 17400, 17406)	FOR COURT USE ONLY
(Name, State Bar number, and address): YOUR NAME	SAMPLE
YOUR ADDRESS	ONLY
CITY, STATE, ZIP CODE	DO NOT
YOUR TELEPHONE NUMBER	DONOI
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: Fresno County Superior Court	WRITE ON
MAILING ADDRESS: 1130 "O" Street	
CITY AND ZIP CODE:	THIS COPY!
PETITIONER/PLAINTIFF: PARTY WHO INITIALLY OPENED CASE	CASE NUMBER:
ARTI WIO INTIALLI OI LILL GAGE	CASE NUMBER
RESPONDENT/DEFENDANT: THE OTHER PARTY	(If applicable, provide):
OTHER PARENT/PARTY:	HEARING DATE:
PROOF OF PERSONAL SERVICE	HEARING TIME: DEPT.:
TROOF OF PERCONAL SERVICE	DEI I
c. Address: ADDRESS WHERE DOCUMENTS WERE SERVED CHECK ONE BOX 5. I am a. not a registered California process server. b. a registered California process server. Code section	CT TIME THE NERE HANDED TO ER PARTY (AM/PM) registration under Business & Profession
6. My name, address, and telephone number, and, if applicable, county of registration SERVER'S NAME SERVER'S STREET ADDRESS SERVER'S CITY, STATE, AND ZIP CODE CHECK EITHER BOX 7 OR 8 7. CHECK EITHER BOX 7 OR 8 I am a California sheriff or marshal and I certify that the foregoing is true and contains the contains of the State of California that the contains the	the foregoing is true and correct.
SERVER PRINTS THEIR NAME HERE	SERVER SIGNS HERE
	(SIGNATURE OF PERSON WHO SERVED THE PAPERS)

ATTORNEY O	R PARTY WITHOUT ATTORNEY:	STATE BAR NO.:	FOR COURT USE ONLY
NAME:			
FIRM NAME:			
STREET ADD	RESS:		
CITY:		STATE: ZIP CODE:	
TELEP	HONE NO.:	FAX NO.:	
E-MAIL	ADDRESS:		
ATTORNEY F	OR (name):		
SUPERIOR	COURT OF CALIFORNIA, COUNTY OF		
STREET	ADDRESS:		
MAILING	ADDRESS:		
CITY AND) ZIP CODE:		
BRAI	NCH NAME:		
	PETITIONER:		
F	RESPONDENT:		
OTHER P	ARENT/PARTY:		
	TEMPORARY EMERGENCY (F	EY DARTE) ORDERS	CASE NUMBER:
Chil			
	d Custody	ing fille) — Froperty Control	
U Our	ei (Specily).		
1. TO (na	nme(s)):		
	Petitioner Resp	ondent 🔲 Other Parent/Party 🔲	Other (specify):
A court	t hearing will be held on the Request	for Order (form FL-300) served with th	is order, as follows:
a. D	ate: Tii	me: Dept.:	Room:
	ddaes of sourt. 🗖 source on maked a		
b. A	ddress of court	above other (specify):	
h			
2. Findin	gs: Temporary emergency (ex pa	rte) orders are needed to: (a) help pre	event an immediate loss or irreparable harm to a
	party or to children in the case	e, (b) help prevent immediate loss or o	damage to property subject to disposition in the
	case, or (c) set or change pro	cedures for a hearing or trial.	
COURT OR	PDEPS: The following temperary em	argency orders expire on the date and	I time of the hearing scheduled in (1), unless
COUNTON	extended by court order:	signification of the date and	Time of the hearing sofication in (1), affects
	extended by court order.		
3. 🔲 CH	HILD CUSTODY	Temn	porary physical custody, care, and control to:
a. Cl	nild's name		ioner Respondent Other Party/Parent
a. <u>Oi</u>	ind 3 Harrie	<u>Bate of Biran</u>	
			i
			i
		_	i
	Continued on Attachment 3(a)	_	
_			
b			, care, and control of the minor children in
	(3) are subject to the other party's	or parties' rights of visitation (parentin	ng time) as follows (specify):

THIS IS A COURT ORDER.

Page 1 of 2

See Attachment 3(b)

				FL-305
PETITIONER:			CASE NUMBER:	
RESPONDENT: OTHER PARENT/PARTY:				
CHILD CUSTODY (continued c. Travel restrictions		ustady care and central of	minor children must not rome	to the miner
		the court allows it after a	minor children must not remove noticed hearing.	ve trie minior
(a) from the stat	e of California. wing counties (specify)	·	emove their minor children <i>(spe</i>	ecify):
d. Child abduction prev	vention orders are atta	ched (see form FL-341(B)).		
		•	nis case under the Uniform Chilommencing with section 3400).	d Custody
	ity to be heard: The re		otice and an opportunity to be h	eard as
(3) Country of habitual r The United States		of habitual residence of the ner (specify):	child or children is (specify):	
(4) If you violate this ord	der, you may be subjec	ct to civil or criminal penal	ties, or both.	
4. PROPERTY CONTROL				
control of the following pro	perty that the parties	own or are buying	lease or rent	
b. Petitioner R and encumbrances coming			o make the following payments	on the liens
Pay to:	For:	Amount: \$	Due date:	
Pay to:	For:	Amount: \$	Due date:	
Pay to: Pay to:	For: For:	Amount: \$ Amount: \$	Due date: Due date:	
5. All other existing orders, not in				
	r comilict with these tem			41
6. OTHER ORDERS (specify):			Additional orders are listed in A	ittachment 6.
Date:			JUDGE OF THE SUPERIOR COURT	

1	Name:	
2	Address:	
3		
4	Telephone:	
5		
6	SUPERIOR COURT OF CALIFOR	NIA, COUNTY OF FRESNO
7	FAMILY LAW I	DIVISION
8		
9	Petitioner) (Case No.:
10		REQUEST FOR EX PARTE ORDERS
11		ALGOLOT FOR EXTENSE ON ENDERS
12	Respondent	
13		
14	Other Parent	
15		
16	THIS IS A REQUEST FOR A CHANGE IN S	TATUS QUO.
17 18		
19	I,, decla	ıre:
20	1. I am the [] Petitioner [] Respon-	dent [] Other Parent in the above-
21	referenced action.	
22	2. I have information that a similar appl	
23	in Fresno County Superior Court or an	other court (specify):
24		
25	OR [] I have no information that a	similar application is being filed or has
26		to the same parties in this action and
27	involving the same issues.	
28		

COUNTY OF FRESNO Fresno, CA

1	d.	I propose the following plan for custody and visitation (specify):
2		
3		
4		
5	e.	I believe that if the current custody and visitation practices/orders are
6		not changed, the child(ren) may be in danger of immediate physical or
7		emotional harm (please explain):
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		
21	f.	I [] have [] have not contacted Child Protective Services (CPS) for an
22		investigation of the problem.
23		CPS [] has [] has not opened an investigation of the problem.
24		A Team Decision-Making Meeting (TDM) [] has [] has not occurred.
25		A copy of the TDM Summary Report [] is [] is not attached.
26		I did not attach a copy of the TDM Summary Report because (specify):
27		A TDM is scheduled for (date):
28		A IDM IS SCHOOLING (MAIC).

1	g. I [] have [] have not contacted the District Attorney's Office about the
2	problem. The District Attorney's Office [] has [] has not opened a
3	investigation.
4	h. I [] have [] have not contacted the Police or Sheriff's Departmen
5	about the problem. The following people were placed under arres
6	
7	An Emergency Protective Order (EPO) [] was [] was not issued.
8	The EPO protects the following people:
9	and expires on (date):
10	A copy of the EPO [] is [] is not attached. I did not attach a copy
11	because:
12	Law enforcement report number:
13	
14	Late atoms we down a mother of moritime, and don't be lower of the State of California
15	I declare under penalty of perjury under the laws of the State of California
16	that the information above is true and correct.
17	
18	Date:
19	
20	(TYPE OR PRINT NAME) (SIGNATURE)
21	(SICIATIONE)
22	
23	
24	
25	
- 1	

26

27

28



					MC-03
PLAINTIFF/PETIT	TONER:			CASE NUMBER:	
FENDANT/RESPO	DNDENT:				
	(T): 5		ARATION		
	(This form must be a	attached to another for	rm or court paper befo	ore it can be filed in court.)	

Date:	
(TYPE OR PRINT NAME)	(SIGNATURE OF DECLARANT)
	Attorney for Plaintiff Petitioner Defendant Respondent Other (Specify):

		MC-03
LAINTIFF/PETITIONER:	CASE NUMBER:	
ENDANT/RESPONDENT:		
DECLARATION		
(This form must be attached to another form or court paper)	er before it can be filed in court.)	

PARTY WITHOUT ATTORNEY OR ATTORNEY	STATE BAR NUMBER:	FOR COURT USE ONLY
NAME:		
FIRM NAME:		
STREET ADDRESS:	710 0005	
CITY: TELEPHONE NO.:	STATE: ZIP CODE: FAX NO.:	
EMAIL ADDRESS:	FAX NO	
ATTORNEY FOR (name):		
SUPERIOR COURT OF CALIFORNIA	A. COUNTY OF	
STREET ADDRESS:	,	
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME:		
PETITIONER:		
RESPONDENT:		
OTHER PARENT/PARTY:		
	CHANCE TEMPODADY EMEDICANCY ODDERS	CASE NUMBER:
REQUEST FOR ORDER	CHANGE TEMPORARY EMERGENCY ORDERS	o, loc Nombert
	Visitation (Parenting Time) Spousal or Partner Support	
Child Support	Property Control Attorney's Fees and Costs	
Other (specify):		
	<u>0-INFO</u> for information about how to complete this form. To ask to in a Restraining Order After Hearing (form DV-130 or JV-255), rea NOTICE OF HEARING	
	NOTICE OF HEARING	
1. TO (name(s)):		
Petitione	er Respondent Other Parent/Party Other ((specify):
2. A COURT HEARING WILL B	E HELD AS FOLLOWS:	
a. Date:	Time: Dept.:	Room.:
b. Address of court s	ame as noted above other (specify):	
not file a Responsive Declarat	rved with the <i>Request for Order:</i> The court may make the reque tion to Request for Order (form FL-320), serve a copy on the other court has ordered a shorter period of time), and appear at the head	r parties at least nine court days
It is ordered that:	COURT ORDER (FOR COURT USE ONLY)	•
4. Time for service	e until the hearing is shortened. Service must be on or b	before <i>(date):</i>
		,
5. A Responsive Declaration	on to Request for Order (form FL-320) must be served on or before	e (date):
5. A Responsive Declaration	on to Request for Order (form FL-320) must be served on or befor an appointment for child custody mediation or child custody recon	e (date):
 5. A Responsive Declaration 6. The parties must attend (specify date, time, and to the specify date) 7. The orders in Temporary 	on to Request for Order (form FL-320) must be served on or befor an appointment for child custody mediation or child custody recon	re (date): mmending counseling as follows
 5. A Responsive Declaration 6. The parties must attend (specify date, time, and to the specify date) 7. The orders in Temporary 	on to Request for Order (form FL-320) must be served on or before an appointment for child custody mediation or child custody reconlocation): y Emergency (Ex Parte) Orders (form FL-305) apply to this proceed	re (date): mmending counseling as follows
 5. A Responsive Declaration 6. The parties must attend (specify date, time, and an arrow of the content of	on to Request for Order (form FL-320) must be served on or before an appointment for child custody mediation or child custody reconlocation): y Emergency (Ex Parte) Orders (form FL-305) apply to this proceed	re (date): mmending counseling as follows
 5. A Responsive Declaration 6. The parties must attend (specify date, time, and in the specify date, time). 7. The orders in Temporary served with all documents. 	on to Request for Order (form FL-320) must be served on or before an appointment for child custody mediation or child custody reconlocation): y Emergency (Ex Parte) Orders (form FL-305) apply to this proceed	re (date): mmending counseling as follows

	CASE NUMBER:
RESPONDENT: OTHER PARENT/PARTY:	
REQUEST FOR ORDER	
Note : Place a mark X in front of the box that applies to your case or to your request. If yo "Attachment." For example, mark "Attachment 2a" to indicate that the list of children's name attached to this form. Then, on a sheet of paper, list each attachment number followed by your name, case number, and "FL-300" as a title. (You may use <i>Attached Declaration</i> (form	es and birth dates continues on a paper your request. At the top of the paper, write
1. RESTRAINING ORDER INFORMATION One or more domestic violence restraining/protective orders are now in effect betw Petitioner Respondent Other Parent/Party (Attach a copy The orders are from the following court or courts (specify county and state):	
	No. (if known):
Nonemonical V	lo. (if known):
	lo. (if known):
d. Other: County/state (specify): Case N	lo. (if known):
2. CHILD CUSTODY VISITATION (PARENTING TIME) a. I request that the court make orders about the following children (specify): Child's Name Date of Birth Legal Custody to (person decides: health, educated)	
b The orders I request for child custody visitation (parenting (1) Specified in the attached forms: Form FL-305 Form FL-311 Form FL-341(D) Form FL-341(E) Other (sp (2) As follows (specify):	312 Form FL-341(C) ecify): Attachment 2b.
c. The orders that I request are in the best interest of the children because (special	ify): Attachment 2c.

CASE NUMBER:
·
visitation (parenting time).
. The court ordered (specify):
. The court ordered (specify):
Attachment 2d. ort (form FL-195) a child Monthly amount (\$) requested rt guideline. (if not by guideline)
Attachment 3a.
xpense Declaration (form <u>FL-150</u>) or I filed equirements to file form FL-155.
Attachment 3d.
5) may be issued.) order filed on (date): of a judgment. Attachment (form FL-157) or a declaration L-150) in support of my request. pecify): Attachment 4e.

			FL-300
		PETITIONER:	CASE NUMBER:
OTH		ESPONDENT: RENT/PARTY:	
011	ILIXI	NEMIT ANTI.	
5.		ROPERTY CONTROL	I request temporary emergency orders
	a	The state of the s	n exclusive temporary use, possession, and
		control of the following property that we own or are buying leas	se or rent (specify):
	b.	The petitioner respondent other parent/party be order and liens coming due while the order is in effect:	ed to make the following payments on debts
		Pay to: Amount: S	\$Due date:
		Pay to: For: Amount: S	\$Due date:
		Pay to: Amount: S	
		Pay to: For: Amount: 9	
	C.	This is a change from the current order for property control filed on (date	, and the second
	d.	Specify in Attachment 5d the reasons why the court should make or change the	he property control orders.
6.	A	TTORNEY'S FEES AND COSTS	
	- 1	equest attorney's fees and costs, which total (specify amount): \$. I filed the following to support my request:
	a.	A current Income and Expense Declaration (form FL-150).	
	b.	A Request for Attorney's Fees and Costs Attachment (form <u>FL-319</u>) or a declain that form.	aration that addresses the factors covered
	C.	A Supporting Declaration for Attorney's Fees and Costs Attachment (form <u>FL-</u>	158) or a declaration that addresses the
		factors covered in that form.	<u></u>) or a accidiation that addresses the
7.		THER ORDERS REQUESTED (specify):	Attachment 7.
		· · · · //	
8. F	— т	ME FOR SERVICE / TIME UNTIL HEARING I urgently need:	
٠. ٢	· a.		ays before the hearing.
	b.	The hearing date and service of the the <i>Request for Order</i> to be soone	
	C.	I need the order because (specify):	Attachment 8.
0 [ACTO TO CURRORT #	
9.		ACTS TO SUPPORT the orders I request are listed below. The facts that I write annot be longer than 10 pages, unless the court gives me permission.	e in support and attach to this request Attachment 9.
		amor be longer than 10 pages, unless the court gives the permission.	
l dec	lare un	der penalty of perjury under the laws of the State of California that the informati	on provided in this form and all attachments
	e and		
Date	:		
		(TYPE OR PRINT NAME)	(SIGNATURE OF APPLICANT)



Requests for Accommodations

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

ATTORI	NEY OR PARTY WITHO	UT ATTORNEY	STATE BAI	R NUMBER:		FOR COU	RT USE ONLY
NAME:							
FIRM N	AME:						
STREET	ADDRESS:						
CITY:			STATE:	ZIP CODE:	ř		
TELEPH	IONE NO.:		FAX NO.:				
	ADDRESS:						
	NEY FOR (name):						
	RIOR COURT OF	CALIFORNIA, CO	DUNTY OF				
	ET ADDRESS:						
	G ADDRESS:						
1	ID ZIP CODE:						
ВК	ANCH NAME:	tian annlina ta ac	and other than proba	to guardianah	ina l		
_	(<i>I nis sec</i> i ETITIONER:	tion applies to ca	ases other than proba	te guardiarism	ips.)		
	SPONDENT:						
	0, 0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
ОТІ	HER PARTY:						
CHILE	D'S NAME (Juvenil						
	•		only to probate guardi	anship cases.,)	CASE NUMBER:	
GUAR	DIANSHIP OF (na	nme):			Mina		
					Mino)	
			ER UNIFORM CHI				
	JURISE	DICTION AND	ENFORCEMENT A	CT (UCCJE	A)		
1. la	ım (check one):	a party to	o this proceeding to de			the authorized report this proceeding to dete	epresentative of the rmine custody of a child.
2. Th	ere are (specify	number):	minor children v	vho are subje	ct to this proce	eeding, as follows <i>(list ol</i>	dest child first):
		Full Name		Date o	f birth	Place of birth (city and state)
а							
-							
b							
c.							
d							
Ľ		: :	list as a shildren (O	on forms MC OC	20 05 0 000050	to piece of paper write !	IEL 105 Attachment 2
						te piece of paper, write ' tional child, and attach to	
			•				
3. a.						2 have lived together fo	
	(Provide the cu	ırrent address of	the child listed in iten	n 2a and their	residence his	tory for the past five yea	ars. If the current
	address is con	fidential under F	amily Code section 34	129, check the	box and prov	vide only the state of resi	dence.)
	l l	residence	Resider		1	child lived with and	Relationship
	(Mon	th/Year)	(City, Sta	ate)	comple	ete current address	•
	From:	To present					
				() () ()			
			Confidential (lis	st state only)	Confid	ential (list state only)	
	From:	To:					
	From:	To:					
	From:	То:					
	F	 					
	From:	То:					
		l addrag	listed on Attachmant	20 /Form M/C	1 020 may ba	used for this nurness 1	
					-	used for this purpose.)	at five years (Attack
b.	Check th	IS DOX IT THERE IS	more than one child a	ind all the chil	uren nave not Faddress and	lived together for the pa their residence history for	or the past five years)
	IUIIII FL-	100(17)100-120(1	y and not cault other	orma o carrerri	. addi 000 aiid	anon rodiactico filatory it	Page 1 of 2

				******		FL	-105/GC-120	
CAS	SE NAME:				CASE NUMBER:			
4. Do you have information about, or have you or custody or visitation proceeding, in Califo				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		and the second of the second o					
	c. Other							
	Proceeding	(Case Number		Court (name, state	or tribe, location	1)	
	d. Juvenile							
	e. Adoption							
5. One or more domestic violence restr			training/protective order	s are now in eff	ect. (Attach a copy of	the orders if you	ı have one	
	Court	County	State or Tribe	Case I	Number (if known)	Orders exp	oire <i>(date)</i>	
	a. Criminal							
	b. Family				-			
	c. Juvenile							
	d. Other							
(or visitation with any ch	ild in this case?	party to this proceeding Yes No	(If yes, provi	ide the following inform	nation):		
	a. Name and address o	f person:	b. Name and addres	s of person:	c. Name and	address of pers	on:	
Has physical custody Claims custody rights Claims visitation rights Name of each child:		Claims custody	Has physical custody Claims custody rights Claims visitation rights		Has physical custody Claims custody rights Claims visitation rights Name of each child:			
						Tarrio di oddi dilidi		
7. [Number of pages	attached:	-					
de	clare under penalty of p	erjury under the	aws of the State of Calif	ornia that the fo	regoing is true and co	rrect.		
Date	9 :			•				
	(NAME C	DF DECLARANT)		<u> </u>	(SIGNATURE OF	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.

FL-105(A)/GC-120(A)	FI	L-1	05	(A)/G	C-1	20	(A)
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				[L-]	03(A)/00-120(A)
CASE NAM	ME:			CASE NUMBER:	
Instruction	ns: If all the o	children subject to th	e proceeding have not lived togeth	CTION AND ENFORCEMENT ACTION AND ENFORCEMENT ACTION AND ENFORCEMENT ACTION TO THE PROPERTY OF	copies of this form
3. b	_ Name of chi history for the provide only Reside	ild: he past five years. I v the state of resider	of the current address is confidentiance.) The same as given for the child liste	(Provide the child's current address and under Family Code section 3429, che	and their residence ck the box and
		s of residence lonth/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:	То:			
3. b	provide only Reside	he past five years. I v 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, che ed in item 2a on form FL-105/GC-120.	ck the box and
		s of residence lonth/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:	To:			
	From:	To:			

FL-10	5(A)/GC-	120	(A)
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CASE NAI	ME:			CASE NUMBER:				
Instruction	ons: If all the o	children subject to the	e proceeding have not lived togeth	CTION AND ENFORCEMENT ACT er for the last five years, use as many or rely, and attach all pages to form FL-10	copies of this form			
3. b	history for the provide only	Name of child: (Provide the child's current address and their residence history for the past five years. If the current address is confidential under Family Code section 3429, check the box and provide only the state of residence.) Residence information is the same as given for the child listed in item 2a on form FL-105/GC-120. (If not the same, provide the information below.)						
	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:	To:						
	From:	То:						
	From:	То:						
	From:	То:						
3. b	Name of child: (Provide the child's current address and their residence history for the past five years. If the current address is confidential under Family Code section 3429, check the box and provide only the state of residence.) Residence information is the same as given for the child listed in item 2a on form FL-105/GC-120. (If not the same, provide the information below.)							
	Dates of residence (Month/Year)		Residence (City, State)	Person child lived with (name and complete current address)	Relationship			
	From:	To present						
	From:	To:	Confidential (list state only)	Confidential (list state only)				
	From:	То:						
	From:	То:						
	From:	То:						

of_

ATTORNEY OR PARTY WITHOUT ATTORNEY OR GOVERNMENTAL AGENCY (under Family Code, §§ 17400, 17406) (Name, State Bar number, and address).	FOR COURT USE ONLY
(Name, State Dal Humber, and address).	
TELEPHONE NO.: FAX NO.:	
ATTORNEY FOR (Name): SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
STREET ADDRESS:	
MAILING ADDRESS:	
CITY AND ZIP CODE:	
BRANCH NAME:	
PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	(If applicable, provide):
OTHER PARENT/PARTY:	HEARING DATE:
	HEARING TIME:
PROOF OF PERSONAL SERVICE	DEPT.:
 I am at least 18 years old, not a party to this action, and not a protected person listed in a Person served (name): I served copies of the following documents (specify): 	ny of the orders.
 4. By personally delivering copies to the person served, as follows: a. Date: b. Time: c. Address: 	
 5. I am a. not a registered California process server. b. a registered California process server. c. an employee or independent contractor of a registered California process server. d. exempt from registromal condense contractor of a registered California process server. d. exempt from registromal condense contractor of a registered California process server. 	
6. My name, address, and telephone number, and, if applicable, county of registration and n	number (specify):
7. I declare under penalty of perjury under the laws of the State of California that the for 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) (SIGNAT	TURE OF PERSON WHO SERVED THE PAPERS)

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