

## REQUEST FOR ORDER: ACCOUNTING

### SELF-HELP FORM PACKET



SHC-RFO-07 (Rev. 07/01/2025)

Self-Help Services can review your completed forms before you file them with the Court. To request review of your completed forms:

1. Complete the attached forms in black ink.
2. Scan your completed forms and save as a single PDF file.
3. Go to **[www.occourts.org/self-help](http://www.occourts.org/self-help)** (click the button labeled *Contact Self-Help Services*), attach the PDF, and complete the online request form. For cases involving the Dept. of Child Support Services, Make sure to select CHILD SUPPORT CASES INVOLVING THE DEPARTMENT OF CHILD SUPPORT SERVICES as the case type on the form. For all other cases, select FAMILY LAW as the case type.

**1 USE Request for Order (form FL-300):**

- To schedule a court hearing and ask the court to make new orders or to change orders in your case.
- When *Restraining Order After Hearing* (form [DV-130](#)) has expired, and you want to change the orders that are still in effect (examples: child custody, visitation (parenting time), child support, and other orders).
- To change or end *Juvenile Restraining Order After Hearing* (form [JV-255](#)) when the case is closed (dismissed) and the order was granted under the Code of Civil Procedure.

**2 DO NOT USE Request for Order (form FL-300):**

- To ask for a restraining order against your spouse or domestic partner, a former spouse or domestic partner, or someone you have a child with. Read *How to Ask for a Temporary Restraining Order* (form [DV-505-INFO](#)).
- To ask to change or end a *Restraining Order After Hearing* granted under the Domestic Violence Prevention Act, including form DV-130 and form JV-255 in a juvenile case. For more information, read *How Do I Ask to Change or End a Domestic Violence Restraining Order?* (form [DV-300-INFO](#)).
- Before you have filed a Petition to start your family law case (form FL-300 may be filed with the Petition).
- If you and the other party have an agreement. For information about how to write up your agreement, get it approved by the court, and filed in your case, see [www.courts.ca.gov/selfhelp-agreeFL](http://www.courts.ca.gov/selfhelp-agreeFL), speak with an attorney, or get help at your court's Self-Help Center or Family Law Facilitator's Office.
- When specific Judicial Council forms must be used to ask the court for other orders. For example, to ask:
  - For an order for contempt, use form [FL-410](#).
  - To set aside a child support order, use form [FL-360](#) or form [FL-640](#).
  - To set aside a voluntary declaration of paternity, use form [FL-280](#).

**3 Forms checklist**

- a. Form [FL-300](#), *Request for Order*, is the basic form you need to file with the court. Depending on your request, you may need these additional forms:
- b. To request child custody or visitation (parenting time) orders, you may need to complete some of these forms:
  - ☐ [FL-105](#), *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act*
  - ☐ [FL-311](#), *Child Custody and Visitation (Parenting Time) Application Attachment*
  - ☐ [FL-312](#), *Request for Child Abduction Prevention Orders*
  - ☐ [FL-341\(C\)](#), *Children's Holiday Schedule Attachment*
  - ☐ [FL-341\(D\)](#), *Additional Provisions—Physical Custody Attachment*
  - ☐ [FL-341\(E\)](#), *Joint Legal Custody Attachment*
- c. If you want child support, you need this form:
  - ☐ A current [FL-150](#), *Income and Expense Declaration*. You may use form [FL-155](#), *Financial Statement (Simplified)* instead of form FL-150 if you meet the requirements listed on page 2 of form FL-155.
- d. If you want spousal or partner support or orders about your finances, you need these forms:
  - ☐ A current [FL-150](#), *Income and Expense Declaration*
  - ☐ [FL-157](#), *Spousal or Partner Support Declaration Attachment* (if the request is to change a support judgment)
- e. If you want attorney's fees and costs, you need these forms:\*
  - ☐ A current [FL-150](#), *Income and Expense Declaration*
  - ☐ [FL-319](#), *Request for Attorney's Fees and Costs Attachment* (or provide the information in a declaration)
  - ☐ [FL-158](#), *Supporting Declaration for Attorney's Fees and Costs* (or provide the information in a declaration)(\*The above forms are not required when asking for attorney's fees and costs under the Domestic Violence Prevention Act.)
- f. To request temporary emergency (ex parte) orders, you need these forms:
  - ☐ [FL-305](#), *Temporary Emergency Orders* to serve as the proposed temporary emergency orders.
  - ☐ Your declaration describing how and when you gave notice about the request for temporary emergency orders. You may use form [FL-303](#), *Declaration Regarding Notice and Service of Request for Temporary Emergency (Ex Parte) Orders*.
  - ☐ Other forms required by local courts. See item 9 on page 3 of this form for more information.
- g. If you plan to have witnesses testify at the hearing, you need form:
  - ☐ [FL-321](#), *Witness List*
- h. If you want to request a separate trial (bifurcation) on an issue, you need form:
  - ☐ [FL-315](#), *Request or Response to Request for Separate Trial*

## 4 Complete form FL-300 (Page 1)

**Caption:** Complete the top part with your name, address, and telephone number. Below that, fill in the court's address.

Write the name of the Petitioner, Respondent, or Other Parent/Party. (You must use the party names as they appear in the petition.)

In the next section, check “CHANGE” if you want to change an existing order. Check “TEMPORARY EMERGENCY (EX PARTE) ORDER” if you are asking that the court make emergency orders that will be effective until the hearing date.

Then, check the boxes that apply to the orders you are requesting. Finally, in the box on the right, write your case number.

**Item 1:** List the name(s) of the other person(s) in your case who will receive your request. In some cases, this might include a grandparent who is joined as a party in the case, a local child support agency, or a lawyer who represents a child in the case.

**Item 2:** Leave this blank. The court clerk will fill in the date, time, and location of the hearing.

**Item 3:** This is a notice to all other parties.

**Items 4–5:** Leave these blank. The court will complete them if the orders are granted.

**Item 6:** In some counties, the court clerk will check item 6 and provide the details for your required child custody mediation or recommending counseling appointment. Other courts require the party or the party's lawyer to make the appointment and then complete item 6 before filing form FL-300.

Ask your court's Family Law Facilitator or Self-Help Center to find out what your court requires.

**Items 7–8:** Leave these blank. The court will complete them, if needed.

## 5 Complete form FL-300 (pages 2–4)

## 6 Complete additional forms and make copies

Complete any additional forms that you need to file with the *Request for Order*. Make at least two copies of your full packet.

FL-300	
<div> <div> PARTY WITHOUT ATTORNEY OR ATTORNEY  NAME:  FIRM NAME:  STREET ADDRESS:  CITY:  TELEPHONE NO.:  FAX NO.:  EMAIL ADDRESS:  ATTORNEY FOR (name): </div> <div> STATE/BAR NUMBER:  STATE:  ZIP CODE:  FAX NO.: </div> </div> <div> FOR COURT USE ONLY  CASE NUMBER: </div>	
<div> <div> SUPERIOR COURT OF CALIFORNIA, COUNTY OF  STREET ADDRESS:  MAILING ADDRESS:  CITY AND ZIP CODE:  BRANCH NAME: </div> <div> PETITIONER:  RESPONDENT:  OTHER PARENT/PARTY: </div> </div>	
<div> <div> REQUEST FOR ORDER  <input type="checkbox"/> Child Custody  <input type="checkbox"/> Child Support  <input type="checkbox"/> Other (specify): </div> <div> CHANGE  <input type="checkbox"/> Visitation (Parenting Time)  <input type="checkbox"/> Property Control </div> <div> TEMPORARY EMERGENCY ORDERS  <input type="checkbox"/> Spousal or Partner Support  <input type="checkbox"/> Attorney's Fees and Costs </div> </div>	
<p><small>Note: Read form FL-300-INFO for information about how to complete this form. To ask to change or end an order that was granted in a Restraining Order After Hearing (form DV-130 or JV-255), read form FL-300-INFO and form DV-300-INFO.</small></p> <p><b>NOTICE OF HEARING</b></p> <p>1. TO (name(s)):</p> <p><input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Other Parent/Party <input type="checkbox"/> Other (specify):</p> <p>2. A COURT HEARING WILL BE HELD AS FOLLOWS:</p> <p>a. Date: Time: Dept.: Room:</p> <p>b. Address of court <input type="checkbox"/> same as noted above <input type="checkbox"/> other (specify):</p> <p>3. <b>WARNING to the person served with the Request for Order:</b> The court may make the requested orders without you if you do not file a Responsive Declaration to Request for Order (form FL-320), serve a copy on the other parties at least nine court days before the hearing (unless the court has ordered a shorter period of time), and appear at the hearing. (See form FL-320-INFO for more information.)</p> <p><b>COURT ORDER</b> (FOR COURT USE ONLY)</p> <p>It is ordered that:</p> <p>4. <input type="checkbox"/> Time <input type="checkbox"/> for service <input type="checkbox"/> until the hearing is shortened. Service must be on or before (date):</p> <p>5. <input type="checkbox"/> A Responsive Declaration to Request for Order (form FL-320) must be served on or before (date):</p> <p>6. <input type="checkbox"/> The parties must attend an appointment for child custody mediation or child custody recommending counseling as follows (specify date, time, and location):</p> <p>7. <input type="checkbox"/> The orders in Temporary Emergency (Ex Parte) Orders (form FL-305) apply to this proceeding and must be personally served with all documents filed with this Request for Order.</p> <p>8. <input type="checkbox"/> Other (specify):</p> <p>Date: JUDICIAL OFFICER</p> <p><b>REQUEST FOR ORDER</b></p> <p><small>Form Adopted for Mandatory Use Judicial Council of California FL-300 (Rev. January 1, 2025)</small></p> <p><small>Family Code, §§ 3045, 3107, 3224, 6220, 6221-6226, 6300-6303 Government Code, § 26500 Cal. Rules of Court, rules 5.92 www.courts.ca.gov</small></p> <p>Page 1 of 4</p>	

*Note: You may file one form FL-150 to respond to items 3, 4, and 6.*

## 7 File your documents

Give your paperwork and the copies you made to the court clerk to process. You may take them to the clerk's office in person, mail them, or, in some counties, you can e-file them.

The clerk will keep the original and give you back the copies you made with a court date and time stamped on the first page of the *Request for Order*. The procedure may be different in some courts if you are requesting temporary emergency orders.

## 8 Pay filing fees

A fee is due at the time of filing.

If you cannot afford to pay the filing fee, and you do not already have a valid fee waiver order in this case, you can ask the court to waive the fee by completing and filing form [FW-001](#), *Request to Waive Court Fees* and form [FW-003](#), *Order on Court Fee Waiver*.



**9 Temporary Emergency (Ex Parte) Orders**  
(nondomestic violence restraining orders)

Courts can make temporary orders in your family law case to respond to emergencies that cannot wait to be heard on the court's regular hearing calendar.

*The emergency must involve an immediate danger or irreparable harm to a party or children in the case, or an immediate loss or damage to property.*

To request these orders:

- Complete form FL-300. Describe the emergency and explain why you need the temporary emergency orders before the hearing.
- Complete form FL-305 to serve as your proposed temporary orders.
- Include a declaration describing how and when you notified the other parties (or why you could not give notice) about your request and the hearing (see form FL-303).
- Complete other forms if required by your local court rules.
- Follow your court's local procedures for reserving the day for the hearing, submitting your paperwork, and paying filing fees.

**10 General information about "service"**

"Service" is the act of giving your legal papers to all persons named as parties in the case so that they know what orders you are asking for and have information about the hearing.

If the other parties are NOT properly served, the judge cannot make the orders you requested on the date of the hearing.

**11 Serve the Request for Order and blank forms**

The other party must be "served" with a:

- Copy of the *Request for Order* and all the other forms and attachments filed with the court clerk.
- Copy of any temporary emergency orders granted.
- Blank form [FL-320](#), *Responsive Declaration to Request for Order*.
- Blank form [FL-150](#), *Income and Expense Declaration* (if you served form FL-150 or FL-155).

**12 Who can be a "server"**

You cannot serve the papers. Have someone else (who is at least 18 years old) do it. The server can be a friend, a relative who is not involved in your case, a sheriff, or a professional process server.

**13 "Personal Service"**

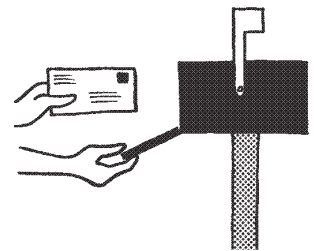
Personal service means that your server walks up to each person to be served, makes sure the right person is served, and then hand-delivers a copy of all the papers (and the blank forms). If the person served does not take the papers, the server may leave the papers near the person.



Note: Sometimes the papers may be personally served on the other party's lawyer (if the other party has one) in the family law case.

**14 "Service by mail"**

Service by mail means that your server places copies of all the documents (and blank forms) in a sealed envelope and mails them to the address of each party being served (or to the party's lawyer, if the party has one).



The server must be 18 years of age or over and live or work in the county where the mailing took place.

**Important!** For questions about personal service or service by mail, talk with a lawyer or check with your court's Family Law Facilitator or Self-Help Center at [www.courts.ca.gov/1083.htm](http://www.courts.ca.gov/1083.htm).



**15 When to use personal service or service by mail**
**Personal Service**

Personal service is the best way to make sure the other adults in your case are correctly served. Sometimes you **must** use personal service.

You **must** use personal service when the court:

- ☒ Ordered personal service;
  - ☒ Granted temporary emergency orders;
  - ☒ Does not yet have the power to make orders that apply to the other party because the person has either NOT previously:
    - Been served with a *Summons* and *Petition*; \*
- OR
- Appeared in the case by filing a:
    - a. *Response* to a *Petition*;
    - b. *Appearance, Stipulations, and Waivers*;
    - c. Written notice of appearance;
    - d. Request to strike all or part of the *Petition*; or
    - e. Request to transfer the case.

\*Note: A *Request for Order* may be served at the same time as the family law *Summons* and *Petition*.

1. After serving, the server must fill out a *Proof of Personal Service* (form [FL-330](#)) and give it to you. If the server needs instructions, give them form [FL-330-INFO](#), *Information Sheet for Proof of Personal Service*.
2. Take the completed *Proof of Personal Service* form to the clerk's office (or e-file it, if available in your court) at least 5 court days before your hearing.

**Deadline:** The deadline for personal service is **16 court days** before the hearing date, unless the court orders a different deadline.

**Service by Mail**

If you are not required to use personal service, you may use service by mail.

**Important!** Check with your court's Family Law Facilitator's Office or Self-Help Center, or ask a lawyer to be sure you are allowed to use service by mail in your case.

A *Request for Order* to change a judgment or final order on the issue of child custody, visitation (parenting time), or child support may be served by mail if:

- ☒ The documents do not include temporary emergency orders;
- ☒ The court did not order personal service; and
- ☒ You have verified the other party's current residence or office address. (You may use *Address Verification* (form [FL-334](#)).)

To change a judgment or final order on any other issue, including spousal or domestic partner support, the *Request for Order* may need to be personally served on the other party.

1. After serving, the server must fill out a *Proof of Service by Mail* (form [FL-335](#)) and give it to you. If the server needs instructions, give them *Information Sheet for Proof of Service by Mail* (form [FL-335-INFO](#)).
2. Take the completed *Proof of Personal Service* form to the clerk's office (or e-file it, if available in your court) at least 5 court days before your hearing.

**Deadline:** Unless the court orders a different time, service by mail must be completed at least **16 court days PLUS 5 calendar days** before the hearing date (if service is in California). Other time lines apply for service outside of California.

**16 Get ready for your hearing**

- Take at least two copies of your documents and filed forms to the hearing. Include a filed *Proof of Service* form.
- Find more information about preparing for your hearing at [www.courts.ca.gov/1094.htm](http://www.courts.ca.gov/1094.htm).
- For information about having the other party testify in court, go to [www.courts.ca.gov/29283.htm](http://www.courts.ca.gov/29283.htm).

**17 After the hearing**, the order made on form [FL-340](#) *Findings and Order After Hearing*, must be filed and served.

**18 Do you have questions or need help?**

- Find a lawyer through your local bar association, the State Bar of California at [calbar.ca.gov](http://calbar.ca.gov), or the Lawyer Referral Service at 1-866-442-2529.
- For free and low-cost legal help (if you qualify), go to [www.lawhelpca.org](http://www.lawhelpca.org).
- Contact the Family Law Facilitator or Self-Help Center for information and assistance, and referrals to local legal services providers. Go to [www.courts.ca.gov/selfhelp-courtresources.htm](http://www.courts.ca.gov/selfhelp-courtresources.htm).

## NOTICE OF HEARING

**2. A COURT HEARING WILL BE HELD AS FOLLOWS:**

a. Date: \_\_\_\_\_ Time: \_\_\_\_\_ ☐ Dept.: \_\_\_\_\_ ☐ Room.: \_\_\_\_\_

b. Address of court ☐ same as noted above ☐ other (*specify*): \_\_\_\_\_

3. **WARNING to the person served with the Request for Order:** The court may make the requested orders without you if you do not file a *Responsive Declaration to Request for Order* (form FL-320), serve a copy on the other parties at least nine court days before the hearing (unless the court has ordered a shorter period of time), and appear at the hearing. (See *form FL-320-INFO* for more information.)

***It is ordered that:***

4. ☐ Time ☐ for service ☐ until the hearing is shortened. Service must be on or before *(date)*:
5. ☐ A *Responsive Declaration to Request for Order* (form FL-320) must be served on or before *(date)*:
6. ☐ The parties must attend an appointment for child custody mediation or child custody recommending counseling as follows *(specify date, time, and location)*:
7. ☐ The orders in *Temporary Emergency (Ex Parte) Orders* (form FL-305) apply to this proceeding and must be personally served with all documents filed with this *Request for Order*.
8. ☐ Other *(specify)*:

Form Adopted for Mandatory Use  
Judicial Council of California  
FL-300 [Rev. July 1, 2025]

## REQUEST FOR ORDER

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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### 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.)

1. ☐ **RESTRAINING ORDER INFORMATION**

One or more domestic violence restraining/protective orders are now in effect between *(specify)*:

☐ Petitioner ☐ Respondent ☐ Other Parent/Party *(Attach a copy of the orders if you have one.)*

The orders are from the following court or courts *(specify county and state)*:

- |   |                              |
|---|------------------------------|
| a. <input type="checkbox"/> Criminal: County/state <i>(specify)</i> : | Case No. <i>(if known)</i> : |
| b. <input type="checkbox"/> Family: County/state <i>(specify)</i> :   | Case No. <i>(if known)</i> : |
| c. <input type="checkbox"/> Juvenile: County/state <i>(specify)</i> : | Case No. <i>(if known)</i> : |
| d. <input type="checkbox"/> Other: County/state <i>(specify)</i> :    | Case No. <i>(if known)</i> : |

2. ☐ **CHILD CUSTODY**

☐ I request temporary emergency orders

☐ **VISITATION (PARENTING TIME)**

a. I request that the court make orders about the following children *(specify)*:

<u>Child's Name</u>	<u>Date of Birth</u>	<input type="checkbox"/> <u>Legal Custody to (person who</u>	<input type="checkbox"/> <u>Physical Custody to (person</u>
		<u>decides: health, education, etc):</u>	<u>with whom child lives):</u>

b. ☐ The orders I request for ☐ child custody ☐ visitation (parenting time) are:

☐ [Attachment 2a.](#)

(1) ☐ Specified in the attached forms:

<input type="checkbox"/> Form <a href="#">FL-305</a>	<input type="checkbox"/> Form <a href="#">FL-311</a>	<input type="checkbox"/> Form <a href="#">FL-312</a>	<input type="checkbox"/> Form <a href="#">FL-341(C)</a>
<input type="checkbox"/> Form <a href="#">FL-341(D)</a>	<input type="checkbox"/> Form <a href="#">FL-341(E)</a>	<input type="checkbox"/> Other <i>(specify)</i> :	

(2) ☐ As follows *(specify)*:

☐ [Attachment 2b.](#)

c. The orders that I request are in the best interest of the children because *(specify)*:

☐ [Attachment 2c.](#)

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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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 (date): . The court ordered (specify):
- (2) ☐ The visitation (parenting time) order was filed on (date): . The court ordered (specify):

☐ [Attachment 2d.](#)

3. ☐ CHILD SUPPORT

(Note: An earnings assignment may be issued. See *Income Withholding for Support* (form [FL-195](#))

- a. I request that the court order child support as follows:

Child's name and age

☐ I request support for each child Monthly amount (\$) requested  
based on the child support guideline. (if not by guideline)

☐ [Attachment 3a.](#)

- b. ☐ I want to change a current court order for child support filed on (date):  
The court ordered child support as follows (specify):

- c. I have completed and filed with this *Request for Order* a current *Income and Expense Declaration* (form [FL-150](#)) or I filed a current *Financial Statement (Simplified)* (form [FL-155](#)) because I meet the requirements to file form FL-155.

- d. The court should make or change the support orders because (specify): ☐ [Attachment 3d.](#)

4. ☐ SPOUSAL OR DOMESTIC PARTNER SUPPORT

(Note: An *Earnings Assignment Order for Spousal or Partner Support* (form [FL-435](#)) may be issued.)

- a. ☐ Amount requested (monthly): \$

- b. ☐ I want the court to ☐ change ☐ end the current support order filed on (date):  
The court ordered \$ per month for support.

- c. ☐ This request is to modify (change) spousal or partner support after entry of a judgment.  
I have completed and attached *Spousal or Partner Support Declaration Attachment* (form [FL-157](#)) or a declaration that addresses the same factors covered in form FL-157.

- d. I have completed and filed a current *Income and Expense Declaration* (form [FL-150](#)) in support of my request.

- e. The court should make, change, or end the support orders because (specify): ☐ [Attachment 4e.](#)



PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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5. ☐ **PROPERTY CONTROL** ☐ I request temporary emergency orders
- a. The ☐ petitioner ☐ respondent ☐ other parent/party be given exclusive temporary use, possession, and control of the following property that we ☐ own or are buying ☐ lease or rent (*specify*):
- b. The ☐ petitioner ☐ respondent ☐ other parent/party be ordered to make the following payments on debts and liens coming due while the order is in effect:
- |               |            |                  |                 |
|---------------|------------|------------------|-----------------|
| Pay to: _____ | For: _____ | Amount: \$ _____ | Due date: _____ |
| Pay to: _____ | For: _____ | Amount: \$ _____ | Due date: _____ |
| Pay to: _____ | For: _____ | Amount: \$ _____ | Due date: _____ |
| Pay to: _____ | For: _____ | Amount: \$ _____ | Due date: _____ |
- c. ☐ This is a change from the current order for property control filed on (*date*):
- d. Specify in [Attachment 5d](#) the reasons why the court should make or change the property control orders.
6. ☐ **ATTORNEY'S FEES AND COSTS**
- I request 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 [FL-319](#)) or a declaration that addresses the factors covered in that form.
- c. A *Supporting Declaration for Attorney's Fees and Costs Attachment* (form [FL-158](#)) or a declaration that addresses the factors covered in that form.
7. ☒ **OTHER ORDERS REQUESTED** (*specify*): Accounting re: ☐ [Attachment 7.](#)
8. ☐ **TIME FOR SERVICE / TIME UNTIL HEARING** I urgently need:
- a. ☐ To serve the *Request for Order* no less than (*number*): \_\_\_\_\_ court days before the hearing.
- b. ☐ The hearing date and service of the *Request for Order* to be sooner.
- c. I need the order because (*specify*): ☐ [Attachment 8.](#)
9. ☒ **FACTS TO SUPPORT** the orders I request are listed below. The facts that I write in support and attach to this request cannot be longer than 10 pages, unless the court gives me permission. ☒ [Attachment 9.](#)

I declare under penalty of perjury under the laws of the State of California that the information provided in this form and all attachments is true and correct.

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 [courts.ca.gov/forms](https://courts.ca.gov/forms) for *Disability Accommodations Request* (form [MC-410](#)). (Civ. Code, § 54.8.)

PETITIONER: RESPONDENT: OTHER PARTY:	CASE NUMBER:
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**APPLICATION TO DETERMINE ARREARS**Attachment to *Request for Order* ([form FL-300](#))

- ☐ **Child support**
☐ **Spousal or partner support**
☐ **Family support**
☐ **Medical support**  
☐ **Unreimbursed expenses**
☐ **Unreimbursed medical expenses**
☐ **Other (specify):**

1. I ask that the amount of past due support payments (arrears) be decided in this case because (*check all that apply*):
  - a. ☐ I have already paid ☐ some ☐ all of the support ordered. Proof of payment is attached.
  - b. ☐ The children for whom support is to be paid were living with me full time for the period from:  
to: . I provided all of their support during that period. I am attaching a detailed declaration explaining these facts and supporting documentation, including any proof that the children were living with me.
  - c. ☐ I could not pay child support because on or after **September 27, 2022**, I was confined against my will for more than 90 days in a row in jail, prison, juvenile detention, a mental health facility, or other institution (*attach proof*).
    - (1) I was confined during the following dates:  
 (a) Start date: (b) Release date:  
☐ Additional dates of confinement are listed on an attached page. (*Form MC-025 may be used for this purpose.*)
    - (2) I had no ability to pay child support while I was confined.
    - d. ☐ I could not pay child support because from **October 8, 2015**, through **December 31, 2019**, or **January 1, 2021**, through **September 26, 2022**, my child support order was entered or modified, and I was confined against my will for more than 90 days in a row in jail, prison, juvenile detention, a mental health facility, or other institution (*attach proof*).
      - (1) I was confined during the following dates:  
 (a) Start date: (b) Release date:  
☐ Additional dates of confinement are listed on an attached page. (*Form MC-025 may be used for this purpose.*)
      - (2) I had no ability to pay child support while I was confined.
      - (3) I was *not* confined for
        - (a) Domestic violence against the other parent or our child; or
        - (b) Failing to pay a child support order.
    - e. ☐ Other (*specify*):
  2. ☐ I have previously asked the other parent for payment and provided the other parent with an itemized statement of the unreimbursed ☐ childcare expense ☐ medical expense. (*Attach copies of all bills being claimed and proof of any payments that you have made on these bills.*)
  3. ☐ I request the other person pay my attorney's fees and costs. My *Income and Expense Declaration* ([form FL-150](#)) is attached.
  4. I have attached (*check all that apply*):
    - a. ☐ a *Declaration of Payment History* ([form FL-420](#)).
    - b. ☐ a *Payment History Attachment* ([form FL-421](#)).
    - c. ☐ Other (*specify*):
  5. Facts in support of the relief requested are (*specify*):  
☐ contained in the attached declaration.

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

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF DECLARANT)

**NOTICE: This form must be attached to *Request for Order* ([form FL-300](#)).**  
**For help completing this form, talk to the [family law facilitator](#) or [self-help center](#) in your county.**

**NOT A COURT ORDER**

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

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state Bar number, and address) or GOVERNMENTAL AGENCY (under Family Code, §§ 17400, 17406):       TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): <b>Self-Represented</b>	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE</b> STREET ADDRESS: <b>341 The City Drive</b> MAILING ADDRESS: <b>P.O. Box 14170</b> CITY AND ZIP CODE: <b>Orange, CA 92863-1570</b> BRANCH NAME: <b>LAMOREAUX JUSTICE CENTER</b>	
PETITIONER/PLAINTIFF:  RESPONDENT/DEFENDANT:  OTHER PARENT:	
<b>DECLARATION OF PAYMENT HISTORY</b>	

1. Declaration of (name):
2. Based on my records or my recollection, I declare that the information on the attached pages showing the amounts ordered and the amounts paid are true and correct for the following obligations (check all that apply):

- |   |  |  |
|---|--|--|
| a. <input type="checkbox"/> Child support   | d. <input type="checkbox"/> Medical support                  | g. <input type="checkbox"/> Other (specify): |
| b. <input type="checkbox"/> Spousal support | e. <input type="checkbox"/> Unreimbursed medical expenses    |  |
| c. <input type="checkbox"/> Family support  | f. <input type="checkbox"/> Unreimbursed child care expenses |  |

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

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

Date: \_\_\_\_\_

_____ (TYPE OR PRINT NAME)		_____ (SIGNATURE OF DECLARANT)
-------------------------------	--	-----------------------------------

### SUPPORT ARREARAGE SUMMARY

This summary is for arrearage for the periods specified in the attached pages.  
 Interest is calculated through (specify date):

	<u>Principal:</u>	<u>Interest (optional):</u>	<u>Total Arrearage:</u>
CHILD SUPPORT:	\$ _____	\$ _____	\$ _____
SPOUSAL SUPPORT:	\$ _____	\$ _____	\$ _____
FAMILY SUPPORT:	\$ _____	\$ _____	\$ _____
MEDICAL SUPPORT:	\$ _____	\$ _____	\$ _____
UNREIMBURSED MEDICAL EXPENSES:	\$ _____	\$ _____	\$ _____
UNREIMBURSED CHILD CARE EXPENSES:	\$ _____	\$ _____	\$ _____
OTHER (specify):	\$ _____	\$ _____	\$ _____

**NOTICE: Interest that is not calculated is not waived**

Date: \_\_\_\_\_

Submitted by: \_\_\_\_\_

_____ (TYPE OR PRINT NAME)		_____ (SIGNATURE)
-------------------------------	--	----------------------

Details of the arrearage statement, consisting of (specify number) \_\_\_\_\_ pages, are attached.

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

PAYMENT HISTORY FOR *(check one)*:

- ☐ Child   
 ☐ Spousal   
 ☐ Family   
 ☐ Medical   
 ☐ Unreimbursed child care  
☐ Unreimbursed medical   
☐ Other *(specify)*:

	Year _____	Year _____	Year _____
	AMOUNT ORDERED	AMOUNT PAID	AMOUNT ORDERED
January			
February			
March			
April			
May			
June			
July			
August			
September			
October			
November			
December			
TOTAL			

	Year _____	Year _____	Year _____
	AMOUNT ORDERED	AMOUNT PAID	AMOUNT ORDERED
January			
February			
March			
April			
May			
June			
July			
August			
September			
October			
November			
December			
TOTAL			

## INSTRUCTIONS FOR COMPLETING PAYMENT RECORD

**You must complete a separate *Payment History Attachment* form for each type of support paid.** Enter the year, list the amount ordered, and the amount paid for each month during that year. If the amounts repeat in a column, you can use an arrow as shown in the example below. Add the amounts in each column to get the yearly totals. Enter the totals at the bottom.

Attach additional sheets and supporting documents (bills, receipts, and other proof of expense) as necessary.

☒ Child

Year 2000

Year 2001

	AMOUNT ORDERED	AMOUNT PAID	AMOUNT ORDERED	AMOUNT PAID
January	100	0	100	100
February		↓		0
March		↓		↓
April		100		100
May		100		0
June		100		↓
July		0		↓
August		↓		100
September		↓		100
October		100		0
November	↓	↓	↓	↓
December	↓	↓	↓	↓
<b>TOTAL</b>	<b>1,200</b>	<b>600</b>	<b>1,200</b>	<b>400</b>

☒ Spousal

	AMOUNT ORDERED	AMOUNT PAID
January	100	0
February		↓
March		↓
April		100
May		100
June		100
July		0
August		↓
September		↓
October		100
November	↓	↓
December	↓	↓
<b>TOTAL</b>	<b>1,200</b>	<b>600</b>

### UNREIMBURSED CHILD CARE, MEDICAL, OR OTHER EXPENSES:

You must complete a separate *Payment History Attachment* form for each type of unreimbursed expense. If you have more than one bill, receipt, and other proof of expense per month use an additional declaration page (form MC-031) or separate page. **1.)** Itemize each expense; **2.)** attach proof of bill or payment; **3.)** mark each bill or payment with an Exhibit # \_\_\_\_\_; **4.)** group the bills, receipts, and other proof of expense in chronological order for each month; and **5.)** enter the total bills, receipts, and other proof of expense for each month. If your court order did not state a specific due date for reimbursement, then include that amount in the month that the expense was incurred.

☒ Unreimbursed child care expenses

Year 2001

	AMOUNT ORDERED	AMOUNT PAID
January	50% (\$200)	0
February	50% (\$200)	100
March	50% (\$200)	0
April	50% (\$200)	50
May		
June		
July		
August		
September		
October		
November		
December		
<b>TOTAL</b>	<b>\$400</b>	<b>150</b>

☒ Unreimbursed medical expenses

Year 2001

	AMOUNT ORDERED	AMOUNT PAID
January	50% (\$200)	0
February		
March	50% (\$200)	0
April	50% (\$75)	0
May		
June		
July		
August		
September		
October		
November		
December		
<b>TOTAL</b>	<b>\$237.50</b>	<b>0</b>

#### Form MC-031

Petitioner/Plaintiff Defendant/Respondent	CASE NUMBER																
I request reimbursement for 50% of these expenses, which are supported by copies of bills, receipts, and other proof of expense.																	
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">01/04/01</td> <td style="width: 40%;">Dr. Adams</td> <td style="width: 20%;">\$45.00</td> <td style="width: 20%;">Exhibit A</td> </tr> <tr> <td>01/08/01</td> <td>Dr. Lee, D.D.S.</td> <td>\$155.00</td> <td>Exhibit B</td> </tr> <tr> <td>02/15/01</td> <td>AB X-ray Inc.</td> <td>\$200.00</td> <td>Exhibit C</td> </tr> <tr> <td>04/26/01</td> <td>Kids Therapy</td> <td>\$75.00</td> <td>Exhibit D</td> </tr> </table>		01/04/01	Dr. Adams	\$45.00	Exhibit A	01/08/01	Dr. Lee, D.D.S.	\$155.00	Exhibit B	02/15/01	AB X-ray Inc.	\$200.00	Exhibit C	04/26/01	Kids Therapy	\$75.00	Exhibit D
01/04/01	Dr. Adams	\$45.00	Exhibit A														
01/08/01	Dr. Lee, D.D.S.	\$155.00	Exhibit B														
02/15/01	AB X-ray Inc.	\$200.00	Exhibit C														
04/26/01	Kids Therapy	\$75.00	Exhibit D														
Child care expenses: <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">01/02</td> <td style="width: 40%;">ABC School</td> <td style="width: 20%;">50% (\$200)</td> <td rowspan="4" style="width: 20%; vertical-align: middle; padding-left: 10px;"> <div style="border-left: 1px solid black; padding-left: 5px;">Exhibit E</div> </td> </tr> <tr> <td>02/02</td> <td>ABC School</td> <td>50% (\$200)</td> </tr> <tr> <td>03/02</td> <td>ABC School</td> <td>50% (\$200)</td> </tr> <tr> <td>04/02</td> <td>ABC School</td> <td>50% (\$200)</td> </tr> </table>		01/02	ABC School	50% (\$200)	<div style="border-left: 1px solid black; padding-left: 5px;">Exhibit E</div>	02/02	ABC School	50% (\$200)	03/02	ABC School	50% (\$200)	04/02	ABC School	50% (\$200)			
01/02	ABC School	50% (\$200)	<div style="border-left: 1px solid black; padding-left: 5px;">Exhibit E</div>														
02/02	ABC School	50% (\$200)															
03/02	ABC School	50% (\$200)															
04/02	ABC School	50% (\$200)															
I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.																	
<div style="display: flex; justify-content: space-between;"> <span>..... (TYPE OR PRINT NAME)</span> <span>..... (SIGNATURE OF DECLARANT)</span> </div>																	
Form MC-031 <b>ATTACHED DECLARATION</b>																	

PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	CASE NUMBER:
--	--------------

**Attachment 9: DECLARATION**

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

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

Date:

\_\_\_\_\_  
(TYPE OR PRINT NAME)

\_\_\_\_\_  
(SIGNATURE OF DECLARANT)

☐ Attorney for   ☐ Plaintiff   ☐ Petitioner   ☐ Defendant  
☐ Respondent   ☐ Other (*Specify*):



ATTORNEY OR PARTY WITHOUT ATTORNEY OR GOVERNMENTAL AGENCY (under Family Code, §§ 17400, 17406 (Name, State Bar number, and address):          TELEPHONE NO.: _____ FAX NO.: _____ ATTORNEY FOR (Name): <b>Self-Represented</b>	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE</b> STREET ADDRESS: <b>341 The City Drive</b> MAILING ADDRESS: <b>P.O. Box 14170</b> CITY AND ZIP CODE: <b>Orange, CA 92863-1570</b> BRANCH NAME: <b>LAMOREAUX JUSTICE CENTER</b>	
PETITIONER/PLAINTIFF:   RESPONDENT/DEFENDANT:   OTHER PARENT/PARTY:	CASE NUMBER:   <div style="text-align: center;">(If applicable, provide):</div> HEARING DATE: HEARING TIME: DEPT.:
<b>PROOF OF PERSONAL SERVICE</b>	

1. I am at least 18 years old, not a party to this action, and not a protected person listed in any of the orders.
2. Person served (*name*):
3. I served copies of the following documents (*specify*):  
 Request for Order (FL-300), Application to Determine Arrears (FL-490), Declaration of Payment History (FL-420), Payment History Attachment (FL-421), Attached Declaration (MC-031)
4. By personally delivering copies to the person served, as follows:
 

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

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

Date:

(TYPE OR PRINT NAME OF PERSON WHO SERVED THE PAPERS)	 (SIGNATURE OF PERSON WHO SERVED THE PAPERS)
--	---

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):  <hr style="width: 10%; margin-left: 0;"/>  <div style="display: flex; justify-content: space-between;"> <div>TELEPHONE NO.: E-MAIL ADDRESS (Optional):</div> <div>FAX NO. (Optional):</div> </div> ATTORNEY FOR (Name): <b>Self-Represented</b>	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE</b> STREET ADDRESS: <b>341 The City Drive</b> MAILING ADDRESS: <b>P.O. Box 14170</b> CITY AND ZIP CODE: <b>Orange, CA 92863-1570</b> BRANCH NAME: <b>LAMOREAUX JUSTICE CENTER</b>	
PETITIONER/PLAINTIFF:  RESPONDENT/DEFENDANT:  OTHER PARENT/PARTY:	CASE NUMBER:  <div style="text-align: center; font-size: small;">(If applicable, provide):</div> HEARING DATE:  HEARING TIME:  DEPT.:
<b>PROOF OF SERVICE BY MAIL</b>	

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

1. I am at least 18 years of age, not a party to this action, and I am a resident of or employed in the county where the mailing took place.
2. My residence or business address is:
  
3. I served a copy of the following documents (*specify*):  
 Request for Order (FL-300), Application to Determine Arrears (FL-490), Declaration of Payment History (FL-420), Payment History Attachment (FL-421), Attached Declaration (MC-031)  
  
 by enclosing them in an envelope AND
  - a. ☐ **depositing** the sealed envelope with the United States Postal Service with the postage fully prepaid.
  - b. ☐ **placing** the envelope for collection and mailing on the date and at the place shown in item 4 following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service in a sealed envelope with postage fully prepaid.
4. The envelope was addressed and mailed as follows:
  - a. Name of person served:
  - b. Address:
  
  - c. Date mailed:
  - d. Place of mailing (*city and state*):
5. ☐ I served a request to modify a child custody, visitation, or child support judgment or permanent order which included an address verification declaration. (*Declaration Regarding Address Verification—Postjudgment Request to Modify a Child Custody, Visitation, or Child Support Order* (form FL-334) may be used for this purpose.)
6. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:



(TYPE OR PRINT NAME)

(SIGNATURE OF PERSON COMPLETING THIS FORM)



## **DO NOT write on the following blank forms!**

These blank forms must be served on the Other Party so that the Other Party may respond to this action. These blank forms must accompany a conformed (stamped) copy of all the forms that you prepared and filed today.

\*\*\*\*\*

## **NO escriba en los siguientes formularios en blanco!**

Estos formularios en blanco deben ser entregadas a la Otra Parte para que la Otra Parte podrá responder a esta acción. Estos formularios en blanco deberán acompañar una copia conforme (sellada) de todas las formas que ha preparado y archivado hoy.



**1 If you received a *Request for Order* (form FL-300):**

- Carefully read the papers you received to make sure you understand what orders are being requested.
- Note the date, time, and location of the court hearing.
- Check to see if the court ordered a specific date for filing and serving your *Responsive Declaration to Request for Order* (form FL-320).
- If you need more time before the hearing to prepare a responsive declaration or talk with a lawyer, you may ask the court to continue the hearing date. For more information, consult with a lawyer or contact the the Family Law Facilitator or Self-Help Center in your court (see item **16**).

**2 USE *Responsive Declaration to Request for Order* (form FL-320)**

Use form FL-320 to let the court and the other party know that you agree or disagree with each of the requests made in the *Request for Order* (form FL-300).

- If you disagree, use form FL-320 to describe the orders you would like the court to make.
- If you do not file and serve form FL-320, the court can still make orders without your input.

**3 DO NOT USE *Responsive Declaration to Request for Order* (form FL-320) to:**

- Ask for court orders that were not requested in the *Request for Order* (form FL-300). Instead, file and serve your own *Request for Order* (form [FL-300](#)) to ask for orders about other issues.
- Respond to *Request for Domestic Violence Restraining Order* (form [DV-100](#)). Instead, you must use *Response to Request for Domestic Restraining Order* (form [DV-120](#)).
- Respond to *Request to Change or End Restraining Order* (form [DV-300](#) or form [JV-255](#) when the juvenile case is closed and the order was granted under the Domestic Violence Prevention Act). Instead, you must use *Response to Request to End or Change Restraining Order* (form [DV-320](#)).

**4 Forms checklist**

- Form [FL-320](#), *Responsive Declaration to Request for Order*, is the basic form you need. Depending on the requests made in the *Request for Order* (form FL-300), you may need other forms.
- For child custody or visitation (parenting time) orders, you may need to complete some of these forms:
  - ☐ [FL-105](#), *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act*
  - ☐ [FL-311](#), *Child Custody and Visitation (Parenting Time) Application Attachment*
  - ☐ [FL-312](#), *Request for Child Abduction Prevention Orders*
  - ☐ [FL-341\(C\)](#), *Children's Holiday Schedule Attachment*
  - ☐ [FL-341\(D\)](#), *Additional Provisions—Physical Custody Attachment*
  - ☐ [FL-341\(E\)](#), *Joint Legal Custody Attachment*
- For child support, you need:
  - ☐ A current form [FL-150](#), *Income and Expense Declaration*. You may use form [FL-155](#), *Financial Statement (Simplified)*, instead of form FL-150 if you meet the requirements listed on page 2 of form FL-155.

**Notice:**

  - The court will order child support based on the income of the parents.
  - Child support normally continues until the child is 18 years and has graduated from high school.
  - You must give the court information about your finances. If you do not, the child support order will be based on information about your income that the court receives from other sources.
- For spousal or domestic partner support or orders about your finances, you need these forms:
  - ☐ [FL-150](#), *Income and Expense Declaration*
  - ☐ [FL-157](#), *Spousal or Partner Support Declaration Attachment* (if the request is to change a support judgment)
- For attorney's fees and costs, you need these forms (except in Domestic Violence Prevention Act cases):
  - ☐ [FL-150](#), *Income and Expense Declaration*
  - ☐ [FL-158](#), *Supporting Declaration for Attorney's Fees and Costs* (or provide the information in a declaration)
  - ☐ [FL-319](#), *Request for Attorney's Fees and Costs Attachment* (or provide the information in a declaration)
- If you plan on having witnesses testify at the hearing, you need this form:
  - ☐ [FL-321](#), *Witness List*



**To respond to a *Request for Order*, you must:**
**5 Complete the top part (caption) of the form**

Complete the top portion including your name, address, and telephone number, the court address, the names of all the parties in the case, and the case number. Also, print or type the same hearing date, time, and department that appears on the *Request for Order* (form FL-300).

**6 Specify a response to orders requested**

**Items 1–8:** Each item on the form matches the item numbers on the *Request for Order* (form FL-300). Complete item 1. Next, mark the same box that is marked on form FL-300. Then, specify if you consent (agree) or do not consent to (disagree with) the orders requested. If you disagree, describe the order you would like the court to make. *Note: You may file one form FL-150 to respond to items 3, 4, and 6.*

**Item 9:** Use the space to explain your responses to items 1–8. Include the reasons why you do not agree with the orders requested by the other party and why the court should make the orders you described. If you need more space, write your responses on a separate sheet of paper and attach it to the form (*Attached Declaration* (form MC-031) may be used for this purpose).

**Sign and date:** Print your name, sign, and write the date you signed form FL-320.

**7 Next steps: file or serve your paperwork**

You must file your paperwork with the court clerk at least 9 court days before the hearing. If the court orders a shorter time to file your papers, file them by the date specified in the order.

Make 2 copies of your original paperwork. Then, do one of the following before the filing deadline:

- Take your paperwork and copies to the court clerk to process (or e-file them, if available in your county). The clerk will keep the original and give you back copies with a court stamp on them. Have a stamped copy served; or
- Have an unstamped copy of your paperwork served *before* you take (or e-file) the originals and copies to the court clerk to file. Be sure the original documents are not served.

PARTY WITHOUT ATTORNEY OR ATTORNEY		STATE BAR NUMBER:	FOR COURT USE ONLY
NAME:			
FIRM NAME:			
STREET ADDRESS:			
CITY:	STATE:	ZIP CODE:	
TELEPHONE NO.:		FAX NO.:	
EMAIL ADDRESS:			
ATTORNEY FOR (name):			
SUPERIOR COURT OF CALIFORNIA, COUNTY OF			
STREET ADDRESS:			
MAILING ADDRESS:			
CITY AND ZIP CODE:			
BRANCH NAME:			
PETITIONER:			
RESPONDENT:			
OTHER PARTY/PARTY:			
RESPONSIVE DECLARATION TO REQUEST FOR ORDER			CASE NUMBER:
HEARING DATE:	TIME:	DEPARTMENT OR ROOM:	

Read Information Sheet: Responsive Declaration to Request for Order (form FL-320-INFO) for more information about this form.

- ☐ **RESTRAINING ORDER INFORMATION**
  - ☐ No domestic violence restraining/protective orders are now in effect between the parties in this case.
  - ☐ I agree that one or more domestic violence restraining/protective orders are now in effect between the parties in this case.
- ☐ **CHILD CUSTODY**
  - ☐ VISITATION (PARENTING TIME)
    - ☐ I consent to the order requested for child custody (legal and physical custody).
    - ☐ I consent to the order requested for visitation (parenting time).
    - ☐ I do not consent to the order requested for: ☐ child custody ☐ visitation (parenting time)
   
☐ but I consent to the following order:
- ☐ **CHILD SUPPORT**
  - I have completed and filed a current *Income and Expense Declaration* (form FL-150) or, if eligible, a current *Financial Statement (Simplified)* (form FL-155) to support my responsive declaration.
  - ☐ I consent to the order requested.
  - ☐ I consent to guideline support.
  - ☐ I do not consent to the order requested ☐ but I consent to the following order:
- ☐ **SPOUSAL OR DOMESTIC PARTNER SUPPORT**
  - I have completed and filed a current *Income and Expense Declaration* (form FL-150) to support my responsive declaration.
  - ☐ I consent to the order requested.
  - ☐ I do not consent to the order requested ☐ but I consent to the following order:

**8 Pay filing fees**

Generally, you do not have to pay a fee to file the *Responsive Declaration*. However, if you have never filed any papers in the case, you may have to pay a “first appearance fee,” which, in general, everyone has to pay when filing court papers in a case for the first time.

If you cannot afford to pay the filing fee, you can ask the court to waive the fees. To do so, complete and file form [FW-001](#), *Request to Waive Court Fees*, and form [FW-003](#), *Order on Court Fee Waiver*.

**9 Serve your papers on the other party**

“Service” is the act of giving your legal papers to all persons named as parties in the case so that they know what orders you want the court to make. *Note:* If a party has a lawyer in the case, the papers should be served on that party’s lawyer.

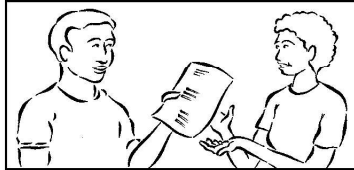


**10 How to “serve”**

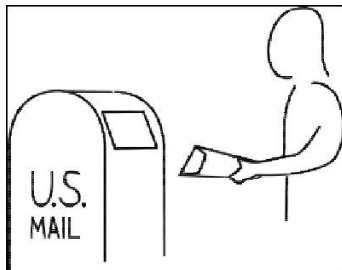
**Server.** You cannot serve the papers. Have someone else (who is at least 18 years old) do it. The “server” can be a friend, a relative who is not involved in your case, a county sheriff, or a professional process server.

**Personal service.**

Your papers may be served by “personal service.” Personal service means that your server walks up to each person to be served, makes sure they are the right person, and then gives a copy of all the papers to each person.

**Service by mail.**

“Service by mail” means that your server places copies of all the documents in a sealed envelope and mails them to the address of each party being served (or to the party’s lawyer, if applicable.) The server must be 18 years of age or over and must live or work in the county where the mailing took place.

**11 Deadline for service**

Personal service or service by mail on the other party must be completed at least *9 court days* before the court hearing. If the court has ordered a shorter time to serve your responsive papers, be sure to have them served by the date specified in the court order.

**12 Server must complete a *Proof of Service***

After personal service, the server should complete a form [FL-330](#), *Proof of Personal Service*. Form [FL-330-INFO](#), *Information Sheet for Proof of Personal Service*, has instructions to help the person complete the form.

After service by mail, the server should complete form [FL-335](#), *Proof of Service by Mail*. Form [FL-335-INFO](#), *Information Sheet for Proof of Service by Mail*, has instructions to help the person complete the form.

**13 File the *Proof of Service* before your hearing date**

The *Proof of Service* shows the judge that the person received a copy of your *Responsive Declaration to Request for Order*. Make three copies of the completed *Proof of Service*. Take the original and copies to the court clerk as soon as possible **before your hearing**.

The clerk will keep the original and give you back the copies stamped “Filed.” Bring a copy stamped “Filed” to your hearing. (If unstamped copies of your paperwork were served, you can file the completed *Proof of Service* when you file the original *Responsive Declaration*.)

**14 Participate in child custody mediation or child custody recommending counseling**

If the *Request for Order* includes a court order for you to attend mediation or child custody recommending counseling, the date, time, and location is found on page 1 of the *Request for Order*. For more information, read *Child Custody Information Sheet* (form [FL-313-INFO](#) or form [FL-314-INFO](#)).

**15 Get ready for your hearing**

- Take at least two copies of your documents and filed forms to the hearing. Include a filed *Proof of Service* form.
- Find more information about preparing for the hearing at the following web link: [selfhelp.courts.ca.gov/tips-your-day-court](http://selfhelp.courts.ca.gov/tips-your-day-court).

**16 Still have questions or need help?**

- Contact the Family Law Facilitator or Self-Help Center for information, local rules, and referrals to local legal services providers. Go to [selfhelp.courts.ca.gov/court-based-self-help-services](http://selfhelp.courts.ca.gov/court-based-self-help-services).
- Talk to a lawyer if you want legal advice, someone to go to court with you, or other legal help. Find an attorney through your local bar association, the State Bar of California at [www.calbar.ca.gov](http://www.calbar.ca.gov), or the Lawyer Referral Service at 1-866-442-2529.
- For free and low-cost legal help (if you qualify), go to [www.lawhelpcalifornia.org](http://www.lawhelpcalifornia.org).



1. ☐ RESTRAINING ORDER INFORMATION

a. ☐ No domestic violence restraining/protective orders are now in effect between the parties in this case.

b. ☐ I agree that one or more domestic violence restraining/protective orders are now in effect between the parties in this case.

2. ☐ CHILD CUSTODY

☐ VISITATION (PARENTING TIME)

a. ☐ I consent to the order requested for child custody (legal and physical custody).

b. ☐ I consent to the order requested for visitation (parenting time).

c. ☐ I do not consent to the order requested for ☐ child custody ☐ visitation (parenting time)  
☐ but I consent to the following order:

3. ☐ CHILD SUPPORT

a. I have completed and filed a current *Income and Expense Declaration* (form [FL-150](#)) or, if eligible, a current *Financial Statement (Simplified)* (form FL-155) to support my responsive declaration.

b. ☐ I consent to the order requested.

c. ☐ I consent to guideline support.

d. ☐ I do not consent to the order requested ☐ but I consent to the following order:

4. ☐ SPOUSAL OR DOMESTIC PARTNER SUPPORT

a. I have completed and filed a current *Income and Expense Declaration* (form [FL-150](#)) to support my responsive declaration.

b. ☐ I consent to the order requested.

c. ☐ I do not consent to the order requested ☐ but I consent to the following order:

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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5. ☐ PROPERTY CONTROL
- a. ☐ I consent to the order requested.
- b. ☐ I do not consent to the order requested ☐ but I consent to the following order:
- 
6. ☐ ATTORNEY'S FEES AND COSTS
- a. I have completed and filed a current *Income and Expense Declaration* (form [FL-150](#)) to support my responsive declaration.
- b. I have completed and filed with this form a *Supporting Declaration for Attorney's Fees and Costs Attachment* (form [FL-158](#)) or a declaration that addresses the factors covered in that form.
- c. ☐ I consent to the order requested.
- d. ☐ I do not consent to the order requested ☐ but I consent to the following order:
- 
7. ☐ OTHER ORDERS REQUESTED
- a. ☐ I consent to the order requested.
- b. ☐ I do not consent to the order requested ☐ but I consent to the following order:
- 
8. ☐ TIME FOR SERVICE / TIME UNTIL HEARING
- a. ☐ I consent to the order requested.
- b. ☐ I do not consent to the order requested ☐ but I consent to the following order:
- 
9. ☒ FACTS TO SUPPORT my responsive declaration are listed below. The facts that I write and attach to this form cannot be longer than 10 pages, unless the court gives me permission. ☐ [Attachment 9.](#)

I declare under penalty of perjury under the laws of the State of California that the information provided in this form and all attachments is true and correct.

Date: \_\_\_\_\_

\_\_\_\_\_  
 (TYPE OR PRINT NAME)

  
 \_\_\_\_\_  
 (SIGNATURE OF DECLARANT)

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):  <hr style="width: 10%; margin-left: 0;"/>  <div style="display: flex; justify-content: space-between;"> <div>TELEPHONE NO.:</div> <div>FAX NO. (Optional):</div> </div> <div>E-MAIL ADDRESS (Optional):</div> <div>ATTORNEY FOR (Name): Self-Represented</div>	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE</b> STREET ADDRESS: 341 The City Drive South MAILING ADDRESS: CITY AND ZIP CODE: Orange, CA 92868 BRANCH NAME: Lamoreaux Justice Center	
PETITIONER/PLAINTIFF:  RESPONDENT/DEFENDANT:  OTHER PARENT/PARTY:	CASE NUMBER:  <div style="text-align: center; font-size: small;">(If applicable, provide):</div> HEARING DATE:  HEARING TIME:  DEPT.:
<b>PROOF OF SERVICE BY MAIL</b>	

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

1. I am at least 18 years of age, not a party to this action, and I am a resident of or employed in the county where the mailing took place.
2. My residence or business address is:

3. I served a copy of the following documents (specify):  
**RESPONSIVE DECLARATION TO REQUEST FOR ORDER (FL-320)**

by enclosing them in an envelope AND

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

4. The envelope was addressed and mailed as follows:

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

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

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

Date:



(TYPE OR PRINT NAME)

(SIGNATURE OF PERSON COMPLETING THIS FORM)