SAMPLE

RESPONSE TO REQUEST FOR
CUSTODY AND/OR VISITATION ORDERS

Rev. 1/1/2025

Use this sample to help you complete the packet of blank forms.

PARTY WITHOUT ATTORNEY OR ATTORNEY	STATE BAR NUMBER:	FOR COURT USE ONLY
NAME: Your name FIRM NAME: STREET ADDRE Your address CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: EMAIL ADDRESS: ATTORNEY FOR (*name*): Self-Represented		SAMPLE ONLY Do not write on this copy!
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Santa Clara STREET ADDRESS: MAILING ADDRESS: Family Division CITY AND ZIP CODE: BRANCH NAME:		
PETITIONER: Petitioner's name (person who started the case) RESPONDENT: OTHER PARENT/PAR Respondent's name		
RESPONSIVE DECLARATION TO REQUEST FOR ORDER HEARING DATE: TIME: DEPARTMENT OR ROOM:		CASE NUMBER: Court Case Number

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

1. ☐ RESTRAINING ORDER INFORMATION
   a. ☐ No domestic v
   b. ☐ I agree that on arties in this case.

Complete this section to let the court know if there are an restraining orders in place between you and the other party.

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:

If the papers you received ask for custody and/or visitation orders, check box 2 and choose a , b or c. If c, describe the custody and/or visitation orders YOU want on attached form FL-311.

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.

If the papers you received ask for child support orders, check box 3 and choose a, b, c or d. If d, you may write out the order YOU want.

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:

If the papers you received ask for spousal or partner support orders, check box 4 and choose a, b or c. If c, write out the order YOU want.

PETITIONER / RESPONDENT / OTHER PARENT/PARTY	CASE NUMBER:
Petitioner's name (person who started the case) Respondent's name	Court Case Number

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:

If the papers you received ask for property control orders, check box 5 and choose a or b. If b, write out the order YOU want.

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:

If the papers you received ask for attorney's fees and costs, check box 6 and choose c or d. If d, write out the order YOU want. You must also complete forms FL-150 and FL-158.

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:

If the papers you received asked for other orders, check box 8 and choose a or b. If b, write out the order YOU want.

If you received a DV-300 asking to modify or change a domestic violence restraining order, use form DV-320 instead.

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:

If the papers you received asked to shorten the time for service and/or hearing, check box 9 and choose a or b. If b, write of the order YOU want.

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 10.

Use this space to explain why you agree or disagree with the other party's request. You may attach additional pages however you are limited to 10 pages.

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: Today's date

Print you name
(TYPE OR PRINT NAME)

Sign your name
(SIGNATURE OF DECLARANT)

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
Petitioner's name (person who started this case) **Respondent's name**	**Your court case number**

CHILD CUSTODY AND VISITATION (PARENTING TIME) APPLICATION ATTACHMENT

—This is not a court order—

TO ☐ **Petition** ☐ **Response** ☐ **Request for Order** ☒ **Responsive Declaration to Request for Order**
☐ **Other** *(specify):*

1. a. ☒ **Custody.** **Complete this section if the other party asked for custody orders and you want to let the court know what order you want.** ☐ Attachment 1a.

Child's Name	Date of Birth	(person who decides about the child's health, education, and welfare)	Custody to (person the child regularly lives with)

List all of the minor children you have with the other party (oldest to youngest):
Child #1's name and date of birth
Child #2's name and date of birth
Child #3's name and date of birth

Who should have legal custody and who should have physical custody? You have three choices: your name, the other parent's name or joint

b. ☐ **Custody with allegations of a history of abuse or substance abuse**

(1) **Complete this section if there is a history of abuse as described in 1.b.(1) or if there is a history of substance abuse as described in 1.b.(2).** to have rent spouse, or the

(2) ☐ Petitioner ☐ Respondent ☐ Other parent/party is (or are) alleged to have the habitual or continual illegal use of controlled substances, or the habitual or continual abuse of alcohol, or the habitual or continual abuse of prescribed controlled substances.

(3) ☐ I ask that the court NOT order sole or joint custody of the minor child to the person(s) alleged to have a history of abuse or substance abuse.

(4) ☐ Even though there are allegations, I ask that the court make the child custody orders in item 1a.
(Write the reasons why you think it would be good for the children that the person(s) be granted custody, even though there are allegations against them of a history of abuse or substance abuse.)
☐ Below: ☐ Attachment 1b. ☐ Other *(specify):*

2. ☒ **Visitation (Parenting Time).**
Note: Un
Complete this section if the other party asked for visitation orders and you want to let the court know what orders you want for the parent that does not have the child most of the time.
a. ☐ s
b. ☐ See the attached _____ -page document dated *(specify date):*
c. ☐ The parties will go to child custody mediation or child custody recommending counseling at *(specify date, time, and loca*
Check here if you want the court to order you and the other party to go to mediation to work out a parenting plan.
d. ☐ No visitation (parenting time).

Form Approved for Optional Use
Judicial Council of California
FL-311 [Rev. January 1, 2023]

Family Code, §§ 3000 et seq., 6200 et seq.
www.courts.ca.gov

PETITIONER: **Petitioner's name** (person who started this case)
RESPONDENT: **Respondent's name**
OTHER PARENT/PARTY:

CASE NUMBER: **Your court case number**

e. ☐ Visitation (parenting time). *(Specify start and ending date and time. If a ... ol.")*

Check one to indicate who will have the parenting schedule listed below.

☐ **Petitioner's** ☐ **Respondent's** ☐ **Other Parent's/Party's** pare...

(1) ☐ **Weekends starting** *(date):*

(Note: The first weekend of the month is the first weekend with a Saturday.)

☐ ...nth

from ... ...fy: ☐ start of school ☐ after school

Complete this section to request weekend parenting time.

to _____ *(day of week)* at _____ *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school

(a) ☐ The parties will alternate the fifth weekends, with the ☐ petitioner ☐ respondent ☐ other parent/party having the initial fifth weekend, which starts *(date):*

(b) ☐ The ☐ petitioner ☐ respondent ☐ other parent/party will have the fifth weekend in ☐ odd ☐ even numbered months.

(2) ☐ **Alternate weekends starting** *(date):*

from _____ *(day of week)* at _____ *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school

to _____ *(day of week)* at _____ *(time)* ☐ a.m. ☐ p.m./ if applicable, specify: ☐ start of school ☐ after school

(3) ☐ **Weekdays starting** *(date):*

fr... ...cify: ☐ start of school ☐ after school

Complete this section to request weekday parenting time.

to ... ...cify: ☐ start of school ☐ after school

(4) ☐ Other visitation (parenting time) days and restrictions are: ☐ listed in Attachment 2e(4)
☐ as follows:

3. ☐ **Visitation (parenting time) with allegations of a history of abuse, substance abuse, or other parenting concerns**

a. ☐ **Super...**

(1) I ... have supervised visitation w... ...):

Complete this section to ask for supervised parenting time.

(a) ☐ ~~Domestic violence, child abuse, or neglect.~~

(b) ☐ Substance abuse: the habitual or continual illegal use of controlled substances, or the habitual or continual abuse of alcohol, or the habitual or continual abuse of prescribed controlled substances.

(c) ☐ Other parenting concerns *(specify below):*

(2) The reasons why the court should make the orders are *(specify)*:

(Write the reasons why you think unsupervised visitation (parenting time) would be bad for the children.)

☐ Below ☐ in Attachment 3a(2) ☐ Other *(specify):*

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	Petitioner's name (person who started this case) Respondent's name	CASE NUMBER: Your court case number

(3) I ask for the following orders about the supervised visitation provider:

(a) Visitation (parenting time) be monitored by *(name, if known):*

(i) ☐ The person or agency is a professional provider. A professional provider must meet the requirements listed in *Declaration of Supervised Visitation Provider (Professional)* (form FL-324(P)) and sign the declaration.

(ii) ☐ The person is a nonprofessional provider. That person must meet the requirements listed in *Declaration of Supervised Visitation Provider (Nonprofessional)* (form FL-324(NP)) and sign a declaration.

(iii) The provider's phone number is *(specify):*

(b) Any costs of supervision be paid as follows: petitioner: percent; respondent: percent. other parent/party: percent.

b. ☐ **Unsupervised visitation (parenting time)**

(Con *d to have a history of abus*

Only complete this section if you completed item 1.b. AND are asking for the visitation to be unsupervised. You must explain why this is in the child's best interests despite the allegations of abuse or substance abuse.

(1) ☐ ed to have current spouse, or

(2) ☐ Petitioner ☐ Respondent ☐ Other parent/party is (or are) alleged to have the habitual or continual illegal use of controlled substances, or the habitual or continual abuse of alcohol, or the habitual or continual abuse of prescribed controlled substances.

(3) Even though there are allegations of a history of abuse or substance abuse, I request that the court order unsupervised visitation to *(specify):* ☐ Petitioner ☐ Respondent ☐ Other parent/party

(4) The reasons why the court should make the orders are *(specify)*:
(Write the reasons why you think it would be good for the children that the person(s) be granted unsupervised visitation (parenting time) even though there are allegations against them of a history of abuse or substance abuse.)
☐ Below: ☐ in Attachment 3b. ☐ Other *(specify):*

(5) *The orders for visitation (parenting time) that you request must be specific as to time, day, place, and manner of transfer of the child, as Family Code section 6323(c) requires.*

4. ☐ **Transportation for visitation (parenting time) and place of exchange**

Note: In cases of domestic violence, the court must have enough information to make orders that are specific as to the time, 6323(c).

Complete this section to indicate how the child will be transported for the parenting time.

a. the

b. ☐ Transportation **to** begin the visits will be provided by *(name):*

c. ☐ Transportation **from** the visits will be provided by *(name):*

d. ☐ The exchange point at the beginning of the visit will be *(address):*

e. ☐ The exchange point at the end of the visit will be *(address):*

f. ☐ During the exchanges, the party driving the children will wait in the car and the other party will wait in the home (or exchange location) while the children go between the car and the home (or exchange location).

g. ☐ Other *(specify):*

PETITIONER: **Petitioner's name** (person who started this case) RESPONDENT: **Respondent's name** OTHER PARENT/PARTY:	CASE NUMBER: **Your court case number**

5. ☐ **Travel with children** The ☐ Petitioner ☐ Respondent ☐ Other parent/party
owing places:

Complete this section if you are asking to restrict travel with the minor child(ren).

c. ☐ other places *(specify):*

6. ☐ **Child abduction prevention.** There is a risk that one of the parties will take the children out of California without the other

If there is a risk of child abduction, you will check the box and complete form FL-312.

7. ☐ **Children's holiday schedule.** I request the holiday and vacation schedule set out ☐ below ☐ on form FL-341(C)

Complete this section if you are asking for specific parenting time orders during the holidays or for vacations. You may write in your request here or complete form FL-341(C).

8. ☐ **Additional custody provisions.** I request the additional orders for custody set out ☐ below ☐ on form FL-341(D)

Complete this section if you are asking for additional orders regarding custody. You may write in your request here or complete form FL-341(D).

9. ☐ **Joint legal custody provisions.** I request joint legal custody and want the additional orders set out ☐ below ☐ on form FL-341(E)

Complete this section if you are asking for additional orders regarding joint legal custody. You may write in your request here or complete form FL-341(E).

10. ☐ **Other.** I request the following additional orders *(specify):*

Complete this section if you are asking for other orders about the minor child(ren) that are not addressed anywhere else on this form.

SHORT TITLE:	CASE NUMBER:
Petitioner's last name and Respondent's last name	YOUR CASE NUMBER

ATTACHMENT *(Number)* : 10

(This Attachment may be used with any Judicial Council form.)

Use this page to explain why you agree or disagree with the other party's request.

(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)

Form Approved for Optional Use
Judicial Council of California
MC-025 [Rev. July 1, 2009]
Martin Dean's ESSENTIAL FORMS™

ATTACHMENT
to Judicial Council Form

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address):*	*FOR COURT USE ONLY*
Your name **Your address** TELEPHONE NO.: FAX NO. *(Optional):* E-MAIL ADDRESS *(Optional):* ATTORNEY FOR *(Name):*	**SAMPLE ONLY Do not write on this copy!**
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Santa Clara STREET ADDRESS: **201 N. First Street, San Jose, CA 95113** MAILING ADDRESS: **191 N. First Street, San Jose, CA 95113** CITY AND ZIP CODE: BRANCH NAME: **Family Justice Center Courthouse**	
PETITIONER/PLAINTIFF: **Petitioner's name (person who started the case)** RESPONDENT/DEFENDANT: **Respondent's name** OTHER PARENT/PARTY:	CASE NUMBER: **Your court case number** *(If applicable, provide):* HEARING DATE: HEARING TIME: DEPT.:
PROOF OF SERVICE BY MAIL	

NOT **This form will be completed by your server. (The server is the person who mailed a filed copy of the forms listed in item 3 to the person listed in item 4. Note: The server must be an adult who is not part of the case.)**

1. place.

2. My residence or business address is:

   Address of server

3. I served a copy of the following documents *(specify)* :

   Filed copy of: Responsive Declaration to Request for Order
   If you complete form FL-311, write "FL-311" here

   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: **Name of person who was served**
   b. Address: **Address where the forms were mailed**
   c. Date mailed: **Date server mailed the forms**
   d. Place of mailing *(city and state)*: **What city was the server in when they mailed out the forms?**

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: **Date server signs this form**

Server's name (TYPE OR PRINT NAME)

Server's signature (SIGNATURE OF PERSON COMPLETING THIS FORM)