

# SAMPLES

START DISSO, NO MINORS

Rev. 5/15/2024

**Use the samples to help you complete  
the packet of blank forms.**



# SUMMONS (Family Law)

# CITACIÓN (Derecho familiar)

**NOTICE TO RESPONDENT (Name):** Your Spouse or Registered Domestic Partner (DP)'s Name  
**AVISO AL DEMANDADO (Nombre):**

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

**SAMPLE ONLY**

**Do not write on this copy!**

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

**Petitioner's name is:** Your Name  
**Nombre del demandante:**

**CASE NUMBER (NÚMERO DE CASO):**  
Leave Blank

**Important:**  
You must write your name and the other party's name the EXACT same way throughout your forms.

*Tiene 30 días de calendario después de haber recibido la entrega legal de esta Citación y Petición para presentar una Respuesta (formulario FL-120) ante la corte y efectuar la entrega legal de una copia al demandante. Una carta o llamada telefónica o una audiencia de la corte no basta para protegerlo.*

*Si no presenta su Respuesta a tiempo, la corte puede dar órdenes que afecten su matrimonio o pareja de hecho, sus bienes y la custodia de sus hijos. La corte también le puede ordenar que pague manutención, y honorarios y costos legales.*

*Para asesoramiento legal, póngase en contacto de inmediato con un abogado. Puede obtener información para encontrar un abogado en el Centro de Ayuda de las Cortes de California (www.sucorte.ca.gov), en el sitio web de los Servicios Legales de California (www.lawhelpca.org) o poniéndose en contacto con el colegio de abogados de su condado.*

**NOTICE—RESTRAINING ORDERS ARE ON PAGE 2:**  
These restraining orders are effective against both spouses or domestic partners until the petition is dismissed, a judgment is entered, or the court makes further orders. They are enforceable anywhere in California by any law enforcement officer who has received or seen a copy of them.

**AVISO—LAS ÓRDENES DE RESTRICCIÓN SE ENCUENTRAN EN LA PÁGINA 2:** Las órdenes de restricción están en vigencia en cuanto a ambos cónyuges o miembros de la pareja de hecho hasta que se despidan la petición, se emita un fallo o la corte dé otras órdenes. Cualquier agencia del orden público que haya recibido o visto una copia de estas órdenes puede hacerlas acatar en cualquier lugar de California.

**FEE WAIVER:** If you cannot pay the filing fee, ask the clerk for a fee waiver form. The court may order you to pay back all or part of the fees and costs that the court waived for you or the other party.

**EXENCIÓN DE CUOTAS:** Si no puede pagar la cuota de presentación, pida al secretario un formulario de exención de cuotas. La corte puede ordenar que usted pague, ya sea en parte o por completo, las cuotas y costos de la corte previamente exentos a petición de usted o de la otra parte.

[SEAL]

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

Ask staff to stamp correct address here

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

Your name  
Your address  
Your phone number

Date (Fecha): Leave Blank Clerk, by (Secretario, por) Leave Blank, Deputy (Asistente)

**STANDARD FAMILY LAW RESTRAINING ORDERS**

**Starting immediately, you and your spouse or domestic partner are restrained from:**

1. removing the minor children of the parties from the state or applying for a new or replacement passport for those minor children without the prior written consent of the other party or an order of the court;
2. cashing, borrowing against, canceling, transferring, disposing of, or changing the beneficiaries of any insurance or other coverage, including life, health, automobile, and disability, held for the benefit of the parties and their minor children;
3. transferring, encumbering, hypothecating, concealing, or in any way disposing of any property, real or personal, whether community, quasi-community, or separate, without the written consent of the other party or an order of the court, except in the usual course of business or for the necessities of life; and
4. creating a nonprobate transfer or modifying a nonprobate transfer in a manner that affects the disposition of property subject to the transfer, without the written consent of the other party or an order of the court. Before revocation of a nonprobate transfer can take effect or a right of survivorship to property can be eliminated, notice of the change must be filed and served on the other party.

You must notify each other of any proposed extraordinary expenditures at least five business days prior to incurring these extraordinary expenditures and account to the court for all extraordinary expenditures made after these restraining orders are effective. However, you may use community property, quasi-community property, or your own separate property to pay an attorney to help you or to pay court costs.

**NOTICE—ACCESS TO AFFORDABLE HEALTH**

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

**WARNING—IMPORTANT INFORMATION**

California law provides that, for purposes of division of property upon dissolution of a marriage or domestic partnership or upon legal separation, property acquired by the parties during marriage or domestic partnership in joint form is presumed to be community property. If either party to this action should die before the jointly held community property is divided, the language in the deed that characterizes how title is held (i.e., joint tenancy, tenants in common, or community property) will be controlling, and not the community property presumption. You should consult your attorney if you want the community property presumption to be written into the recorded title to the property.

**ÓRDENES DE RESTRICCIÓN ESTÁNDAR DE DERECHO FAMILIAR**

**En forma inmediata, usted y su cónyuge o pareja de hecho tienen prohibido:**

1. *llevarse del estado de California a los hijos menores de las partes, o solicitar un pasaporte nuevo o de repuesto para los hijos menores, sin el consentimiento previo por escrito de la otra parte o sin una orden de la corte;*
2. *cobrar, pedir prestado, cancelar, transferir, deshacerse o cambiar el nombre de los beneficiarios de cualquier seguro u otro tipo de cobertura, como de vida, salud, vehículo y discapacidad, que tenga como beneficiario(s) a las partes y su(s) hijo(s) menor(es);*
3. *transferir, gravar, hipotecar, ocultar o deshacerse de cualquier manera de cualquier propiedad, inmueble o personal, ya sea comunitaria, cuasicomunitaria o separada, sin el consentimiento escrito de la otra parte o una orden de la corte, excepto en el curso habitual de actividades personales y comerciales o para satisfacer las necesidades de la vida; y*
4. *crear o modificar una transferencia no testamentaria de manera que afecte la asignación de una propiedad sujeta a transferencia, sin el consentimiento por escrito de la otra parte o una orden de la corte. Antes de que se pueda eliminar la revocación de una transferencia no testamentaria, se debe presentar ante la corte un aviso del cambio y hacer una entrega legal de dicho aviso a la otra parte.*

*Cada parte tiene que notificar a la otra sobre cualquier gasto extraordinario propuesto por lo menos cinco días hábiles antes de realizarlo, y rendir cuenta a la corte de todos los gastos extraordinarios realizados después de que estas órdenes de restricción hayan entrado en vigencia. No obstante, puede usar propiedad comunitaria, cuasicomunitaria o suya separada para pagar a un abogado que lo ayude o para pagar los costos de la corte.*

**AVISO—ACCESO A SEGURO DE SALUD MÁS ECONÓMICO:**

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

**ADVERTENCIA—INFORMACIÓN IMPORTANTE**

*De acuerdo a la ley de California, las propiedades adquiridas por las partes durante su matrimonio o pareja de hecho en forma conjunta se consideran propiedad comunitaria para fines de la división de bienes que ocurre cuando se produce una disolución o separación legal del matrimonio o pareja de hecho. Si cualquiera de las partes de este caso llega a fallecer antes de que se divida la propiedad comunitaria de tenencia conjunta, el destino de la misma quedará determinado por las cláusulas de la escritura correspondiente que describen su tenencia (por ej., tenencia conjunta, tenencia en común o propiedad comunitaria) y no por la presunción de propiedad comunitaria. Si quiere que la presunción comunitaria quede registrada en la escritura de la propiedad, debería consultar con un abogado.*

PARTY WITHOUT ATTORNEY OR ATTORNEY

STATE BAR NUMBER:

FOR COURT USE ONLY

NAME: Your Name
FIRM NAME:
STREET ADDRESS: Your Address
CITY:
TELEPHONE NO.:
E-MAIL ADDRESS:

Note: You must write your name and your spouse's or DP's name the exact same way throughout your forms.

SAMPLE ONLY
Do not write on this copy!

ATTORNEY FOR (name): Self-Represented

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: Your Name
RESPONDENT: Your Spouse or Registered Domestic Partner's Name

PETITION FOR Check the box that applies
[ ] AMENDED
[ ] Dissolution (Divorce) of: [ ] Marriage [ ] Domestic Partnership
[ ] Legal Separation of: [ ] Marriage [ ] Domestic Partnership
[ ] Nullity of: [ ] Marriage [ ] Domestic Partnership

CASE NUMBER:
Leave Blank

1. LEGAL RELATIONSHIP (check all that apply):

Check the boxes that apply.

- a. [ ] We are married
b. [ ] We are domestic partners and our domestic partnership was established in California.
c. [ ] We are domestic partners and our domestic partnership was NOT established in California.

2. RESIDENCE REQUIREMENTS (check all that apply):

Check the boxes that apply.

- a. [ ] Petitioner [ ] Respondent has been a resident of this state for at least six months and of this county for at least three months immediately preceding the filing of this Petition.
b. [ ] Our domestic partnership was established in California.
c. [ ] We are the spouses of each other and we are not currently married.

Check the boxes that apply and fill in the date of marriage and/or registration, the date of separation and the length of the relationship.

3. STATISTICAL FACTS

- a. [ ] (1) Date of marriage: \_\_\_\_\_
(3) Time from date of marriage to date of separation (specify): \_\_\_\_\_ Years \_\_\_\_\_ Months
b. [ ] (1) Registration date of domestic partnership with the California Secretary of State or other state equivalent (specify below): \_\_\_\_\_
(2) Date of separation (specify): \_\_\_\_\_
(3) Time from date of registration of domestic partnership to date of separation (specify): \_\_\_\_\_ Years \_\_\_\_\_ Months

4. MINOR CHILDREN

- a. [X] There are no minor children.
b. [ ] The minor children are:
Child's name Birthdate Age

- (1) [ ] continued on Attachment 4b. (2) [ ] a child who is not yet born.
c. If any children listed above were born before the marriage or domestic partnership, the court has the authority to determine those children to be children of the marriage or domestic partnership.
d. If there are minor children of Petitioner and Respondent, a completed Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) (form FL-105) must be attached.
e. [ ] Petitioner and Respondent signed a voluntary declaration of parentage or paternity. (Attach a copy if available.)

PETITIONER: <input style="width: 80%;" type="text" value="Your Name"/>	CASE NUMBER: <input style="width: 90%;" type="text"/>
RESPONDENT: <input style="width: 80%;" type="text" value="Your Spouse or Registered Domestic Partner's Name"/>	<input style="width: 90%; height: 30px;" type="text" value="Leave Blank"/>

**Petitioner requests that the court make the following orders:**

**5. LEGAL GROUNDS** (Family Code sections 2200–2210, 2310–2312)

- a.  Divorce or  Legal separation of the marriage or domestic partnership based on (*check one*):  
 (1)  irreconcilable differences. (2)  permanent legal incapacity to make decisions.
- b.  Nullity  
 (1)
- c.  Nullity  
 (1)
- d.  partnership or marriage. (5)  force.  
 (2)  prior existing marriage or domestic partnership. (6)  physical incapacity.  
 (3)  unsound mind.

Check the appropriate box labeled a through c and the appropriate inside box labeled (1) through (6). See item 5a. for an example.

**6. CHILD CUSTODY AND VISITATION (PARENTING TIME)**

- |   |   |                          |                          |              |              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |  |  |  |  |  |  |  |  |
|---|---|--------------------------|--------------------------|--------------|--------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--|--|--|--|--|--|--|--|
| <p>a. Legal custody of children to..... There are no minor children of the marriage.</p> <p>b. Physical custody of children to..... children of the marriage.</p> <p>c. Child visitation (parenting time) be granted to .....</p> <p>As requested in <input type="checkbox"/> form <u>FL-311</u> <input type="checkbox"/> form <u>FL-312</u><br/> <input type="checkbox"/> form <u>FL-341(D)</u> <input type="checkbox"/> form <u>FL-341(E)</u></p> | <table border="0" style="width:100%;"> <tr> <td><b>Petitioner</b></td> <td><b>Respondent</b></td> <td><b>Joint</b></td> <td><b>Other</b></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> form <u>FL-341(C)</u></td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Attachment <u>6c(1)</u></td> <td></td> <td></td> <td></td> </tr> </table> | <b>Petitioner</b>        | <b>Respondent</b>        | <b>Joint</b> | <b>Other</b> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> form <u>FL-341(C)</u> |  |  |  | <input type="checkbox"/> Attachment <u>6c(1)</u> |  |  |  |
| <b>Petitioner</b>   | <b>Respondent</b>   | <b>Joint</b>             | <b>Other</b>             |              |              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |  |  |  |  |  |  |  |  |
| <input type="checkbox"/>  | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |              |              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |  |  |  |  |  |  |  |  |
| <input type="checkbox"/>  | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |              |              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |  |  |  |  |  |  |  |  |
| <input type="checkbox"/>  | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |              |              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |  |  |  |  |  |  |  |  |
| <input type="checkbox"/> form <u>FL-341(C)</u>  |   |                          |                          |              |              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |  |  |  |  |  |  |  |  |
| <input type="checkbox"/> Attachment <u>6c(1)</u>  |   |                          |                          |              |              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |  |  |  |  |  |  |  |  |

**7. CHILD SUPPORT**

- a. If there are minor children born to or adopted by Petitioner and Respondent before or during this marriage or domestic partnership, the court will make orders for the support of the children upon request and submission of financial forms by the requesting party.
- b. An earnings assignment may be issued without further notice.
- c. Any party required to pay support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent.
- d.  Other (*specify*)

Check box 8a if you want a spousal support order.  
 Check box 8b if you do not want to pay spousal support to your spouse or DP or if you do not want spousal support paid to you.  
 Check box 8c if you want to reserve the issue of spousal support so that it may be addressed in the future.

**8. SPOUSAL OR DOMESTIC PARTNER SUPPORT**

- a.  Spousal or Domestic Partner Support
- b.  Terminate (or suspend) spousal or domestic partner support
- c.  Reserve for future determination the issue of support payable to  Petitioner  Respondent
- d.  Other (*specify*):

**9. SEPARATE PROPERTY**

Check the box that applies.

- a.  There are no such assets or debts that I know of to be committed by the court.
- b.  Confirm as separate property the assets and debts in  *Property Declaration* (form FL-160).  *Attachment 9b*.  
 the following list. Item Confirm to

List any things, money, other property or debts from before marriage or registration or after the date of separation.

Also list anything you or the other party inherited or received as a gift at any time.

Put the name of the person you want to get each of the items you listed.



PETITIONER: <input style="width: 90%;" type="text" value="Your Name"/>	CASE NUMBER: <input style="width: 95%;" type="text"/>
RESPONDENT: <input style="width: 95%;" type="text" value="Your Spouse or Registered Domestic Partner's Name"/>	<input style="width: 95%;" type="text" value="Leave Blank"/>

**10. COMMUNITY AND QUASI-COMMUNITY PROPERTY** Check the box that applies.

- a.  There are no such assets or debts that I know or to be divided by the court.
- b.  Determine rights to community and quasi-community assets and debts. All such assets and debts are listed
  - in *Property Declaration* (form FL-160)       in Attachment 10b.
  - as follows (*specify*):

List any things, money, other property or debts you and the other party accrued or earned during the marriage or domestic partnership (including house, car, 401(k), pension, debts, credit cards, loans, furniture) no matter whose name it is in!

**11. OTHER REQUESTS**

- a.  Attorney's fees and costs payable by  Petitioner  Respondent
- b.  Petitioner's former name be restored to (*specify*):
- c.  Other (*specify*):

Check box 11b and write your full maiden name here if you want it back.

Continued on Attachment 11c.

**12. I HAVE READ THE RESTRAINING ORDERS ON THE BACK OF THE SUMMONS, AND I UNDERSTAND THAT THEY APPLY TO ME WHEN THIS PETITION IS FILED.**

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

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF PETITIONER)

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

(SIGNATURE OF ATTORNEY FOR PETITIONER)

**FOR MORE INFORMATION:** Read *Legal Steps for a Divorce or Legal Separation (form FL-107-INFO)* and visit "Families Change" at [www.familieschange.ca.gov](http://www.familieschange.ca.gov) — an online guide for parents and children going through divorce or separation.

**NOTICE:** You may redact (black out) social security numbers from any written material filed with the court in this case other than a form used to collect child, spousal or partner support.

**NOTICE—CANCELLATION OF RIGHTS:** Dissolution or legal separation may automatically cancel the rights of a domestic partner or spouse under the other domestic partner's or spouse's will, trust, retirement plan, power of attorney, pay-on-death bank account, survivorship rights to any property owned in joint tenancy, and any other similar thing. It does not automatically cancel the right of a domestic partner or spouse as beneficiary of the other partner's or spouse's life insurance policy. You should review these matters, as well as any credit cards, other credit accounts, insurance policies, retirement plans, and credit reports, to determine whether they should be changed or whether you should take any other actions. Some changes may require the agreement of your partner or spouse or a court order.





<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA</b> STREET ADDRESS: 201 North First Street, San José, CA 95113 MAILING ADDRESS: 191 North First Street CITY AND ZIP CODE: San José, California 95113 BRANCH NAME: Family Justice Center	<i>FOR COURT USE ONLY</i>  <b>SAMPLE ONLY</b>  <b>Do not write on this copy!</b>
PETITIONER: <input type="text" value="Your Name"/>	CASE NUMBER: <input type="text" value="Leave Blank"/>
RESPONDENT: <input type="text" value="Other Party's Name"/>	
<b>FAMILY LAW NOTICE</b> <b>Dissolution/Legal Separation/Nullity/Parentage</b>	

**PLEASE READ THIS ENTIRE FORM**

Your case has been assigned to Judge  in Department  for all purposes at the Family Courthouse Located at: 201 North First Street, San José, CA 95113.

**TO THE PETITIONER** (the person who started the case): You must serve a copy of this notice on the other party. **YOU CANNOT SERVE THE OTHER PARTY YOURSELF.**

**TO THE RESPONDENT** (the person who did not start the case): If you want to protect your rights and participate in this case, you must file a Response with the Court within **30 days** of being served.

**RULES FOR THE STATUS CONFERENCE:**

You must follow the California Rules of Court, the Superior Court of California, County of Santa Clara Local Family Law Rules and you must use the correct forms. You can access the California Rules of Court and Judicial Council forms at [www.courts.ca.gov/rules.htm](http://www.courts.ca.gov/rules.htm) and the Local Family Law Rules and Local forms at [www.scscourt.org](http://www.scscourt.org).

**A final Judgment will NOT be entered in your case automatically. You must take further action to finish your case!**

**IF YOU NEED HELP:**

- Please visit the Self Help section on the Court's website at [www.scscourt.org](http://www.scscourt.org)
- For a low cost consultation with a private attorney contact the Santa Clara County Bar Association at (408) 971-6822 (or [www.sccbba.com](http://www.sccbba.com)).
- You can also email, call or Live Chat the Court's Self Help Center by going to [www.scscourt.org](http://www.scscourt.org), then click "Contact the Self Help Center".

If, after reviewing the Court's website or other information, you would like to schedule a Status Conference to review the status of your case and next steps to finish it, you may contact the Family Court Clerk's Office at (408) 534-5600 or visit them in person at one of the three courthouses listed above during regular Court business hours. **The purpose of the Status Conference is to review your case's progress; it is not the date when your case is actually finished.**



PARTY WITHOUT ATTORNEY or ATTORNEY NAME: <b>Your Legal Name</b> FIRM NAME: STREET: <b>Your Address</b> CITY: TELEPHONE NO.: E-MAIL ADDRESS: ATTORNEY FOR (name): <b>Self-Represented</b>	STATE BAR NO.: <div style="border: 1px solid black; padding: 5px;"> <p>Note: You must write your name and the other parent's name the exact same way throughout your forms.</p> </div>	FOR COURT USE ONLY  <h1 style="margin: 0;">SAMPLE ONLY</h1> <h2 style="margin: 0;">Do not write on this copy!</h2>
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: <b>Your Legal Name</b> RESPONDENT: <b>Other Parent's Legal Name</b>		
PROOF OF SERVICE OF SUMMONS		CASE NUMBER: <div style="border: 1px solid black; padding: 5px; text-align: center;">           Leave Blank         </div>

1. At the time of service I was at least 18 years of age and not a party to this action. I served the respondent with copies of:
- a.  Family Law: *Petition—Marriage/Domestic Partnership* (form [FL-100](#)), *Summons* (form [FL-110](#)), and blank *Response—Marriage/Domestic Partnership* (form [FL-120](#))
  - or—
  - b.  Uniform Parentage: *Petition to Determine Parental Relationship* (form [FL-200](#)), *Summons* (form [FL-210](#)), and blank *Response to Petition to Determine Parental Relationship* (form [FL-220](#))
  - or—
  - c.  Custody and Support: *Petition for Custody and Support of Minor Children* (form [FL-260](#)), *Summons* (form [FL-210](#)), and blank *Response to Petition for Custody and Support of Minor Children* (form [FL-270](#))
  - or—
  - d.  (1)  Completed and blank *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)* (form [FL-105](#))
  - (2)  Completed and blank *Declaration of Disclosure* (form [FL-140](#))
  - (3)  Completed and blank *Schedule of Assets and Debts* (form [FL-142](#))
  - (4)  Completed and blank *Income and Expense Declaration* (form [FL-150](#))
  - (5)  Completed and blank *Financial Statement (Simplified)* (form [FL-155](#))
  - (6)  Completed and blank *Property Declaration* (form [FL-160](#))
  - (7)  *Request for Order* (form [FL-300](#)), and blank *Responsive Declaration to Request for Order* (form [FL-320](#))
  - (8)  Other (specify):  
 ADR Options (Local form FM-1021);  
 Family Law Notice (Local form FM-1050)

Mark the boxes of any attached forms.

2. Address where respondent was served:

The server writes in the address where the other party was served (handed) a copy of the filed court papers.

3. I served the respondent by the following means (check proper boxes):

- a.  **Personal service.** I personally delivered the copies to the respondent (Code Civ. Proc., § 415.10) on (date): **Date of Service** at (time): **Time of Service (include AM or PM)**

- b.  **Substituted service.** I left the copies with or in the presence of (name):  
 who is (specify title or relationship to respondent):
  - (1)  **(Business)** a person at least 18 years of age who was apparently in charge at the office or usual place of business of the respondent. I informed the person of the general nature of the papers.
  - (2)  **(Home)** a competent member of the household (at least 18 years of age) at the home of the respondent. I informed the person of the general nature of the papers.
 on (date): \_\_\_\_\_ at (time): \_\_\_\_\_

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

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

PETITIONER: <span style="border: 1px solid black; padding: 2px;">Your Legal Name</span>	CASE NUMBER:
RESPONDENT: <span style="border: 1px solid black; padding: 2px;">Other Parent's Legal Name</span>	<span style="border: 1px solid black; padding: 2px;">Leave Blank</span>

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

4. **Person who served papers**

Name: Name of Server (Person who handed the papers to the other party)

Address:

Street Address: Server's Address \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone number: Server's Phone Number \_\_\_\_\_

This person is

- a.  exen Check one n under Business and Professions Code section 22350(b).
- b.  not a registered California process server.
- c.  a registered California process server:  an employee or  an independent contractor
- (1) Registration no.: \_\_\_\_\_
- (2) County: \_\_\_\_\_
- (3) **The fee** for service was (specify): \$ \_\_\_\_\_

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

—or—

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

Date: Date Server Signs \_\_\_\_\_

Server prints their name here  
(NAME OF PERSON WHO SERVED PAPERS)

Server signs here \_\_\_\_\_  
(SIGNATURE OF PERSON WHO SERVED PAPERS)