

# How to File a Response to a Parentage Case

(File a Response within 30 days of being served)

<b>Step 1</b>	<p><b>Complete the following forms</b> in blue or black ink:</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> FL-220 Response to Petition to Determine Parental Relationship</li> <li><input checked="" type="checkbox"/> FL-105 Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)</li> <li><input type="checkbox"/> FL-311 Child Custody and Visitation Application Attachment</li> </ul>
<b>Step 2</b>	<b>Copies:</b> Make <b>2 copies</b> , in addition to the original.
<p><b>Step 3</b></p> <p>There is a filing fee unless the fee is waived.</p>	<p><b>File:</b> File the original and copies in the <b>Clerk's Office</b> of the courthouse located at: 201 North First Street, San Jose, CA 95113</p> <p>The Clerk's Office opens at 8:30am Monday-Friday, closing times are subject to change, visit <a href="http://www.scscourt.org">www.scscourt.org</a> or call <b>408-534-5600</b> for current office hours.</p> <p><input type="checkbox"/> If you <u>are not</u> asking for a fee waiver, you will pay the filing fee and get copies back with a file-stamp.</p> <p><input type="checkbox"/> If you <u>are</u> asking for a fee waiver, your file-stamped copies may be returned immediately, OR you may be asked to return in up to 24 hours, OR your file stamped forms may be mailed to you. Please check with the clerk who takes your forms.</p>
<b>Step 4</b>	<p><b>Service:</b> After the filed copies are returned to you:</p> <ul style="list-style-type: none"> <li>• <b>Keep</b> for your records—1 filed copy</li> <li>• <b>Serve</b> 1 filed copy on the other party by mail. "Serve by mail" means <b>someone, NOT YOU</b>, who is at least 18 years old, must <b>mail</b> the filed copies to the other party.</li> </ul> <p>Whoever does the service must complete the attached <i>Proof of Service by Mail</i> form (FL-335) and give it back to you. You must file the original and a copy of this form at the Clerk's Office, the clerk will file stamp the copy and give it back to you. Keep this copy for your records.</p>
<b>Step 5</b>	<p><b>Next:</b> Now that you have filed and served your Response, please visit our website at <a href="http://www.scscourt.org">www.scscourt.org</a> for information regarding how to move forward with your case or get temporary support and/or custody orders.</p>

***Please turn over for important information***



## WHY WAS THIS CASE OPENED?

If you have a minor child/ren with a person you are not married to, that other parent has opened this case to establish parentage (that you are both the parents of your child/ren) and possibly to get orders for custody, parenting timeshare (“visitation”) and child support.

## WHAT IF I’M NOT SURE I AM THE CHILD’S PARENT?

**This is a very important issue to resolve as quickly as possible.**

If you have questions, get legal advice immediately! You may contact the Lawyer Referral Service at (408) 971-6822 for referral to a private attorney.

## WHY SHOULD I FILE A RESPONSE?

You should fill out and file the *Response* form if you want to participate in the case and have the Judge hear your side. Filing a *Response* will allow you to ask for DNA-type genetic testing or admit parentage, get a custody order and set up parenting timeshare or establish a monthly child support amount and other orders.

## WHY IS ESTABLISHING PARENTAGE IMPORTANT FOR MY CHILD?

A parentage action establishes who the parents are, rights to child support and legal claims to inheritance or Social Security benefits. However, you must be sure you get your actual parentage *Judgment*, not just orders for custody and support. Opening a case also establishes which county’s court will make decisions about your child.

## WHAT IF THE FATHER SIGNED A VOLUNTARY DECLARATION OF PATERNITY AT THE HOSPITAL?

The *Voluntary Declaration of Paternity* becomes a parentage judgment 60 days after it is signed and cannot be cancelled after the child turns two years of age. If you want custody, parenting timeshare or child support orders, you still need to open a court case and attach a copy of the *Voluntary Declaration of Paternity*, if you have it.

## HOW CAN I GET HELP?

Here are some ways to get help:

- Go to <http://www.calbar.ca.gov/Public>, then click on “Lawyer Referral services” to hire or consult with a private attorney.
- For free legal advice and information, see our “Do-It-Yourself Resources” flyer. Go to [www.scscourt.org](http://www.scscourt.org), click on “Self-Help” then “Self-Help Flyers”.
- The Self Help Center/Family Law Facilitator – See our information flyer:
  - Contact us: Go to [www.scscourt.org](http://www.scscourt.org) then click “**Contact the Self Help Center**”. Walk-in assistance is limited to emergencies so contact us remotely first.
  - Obtain Forms: Go to [www.scscourt.org](http://www.scscourt.org) then click “**Complete Forms at Home**”
  - Form Review: Email your forms as a PDF file to [SHCDocReview@scscourt.org](mailto:SHCDocReview@scscourt.org).
  - Note: We cannot help people who have attorneys.

Superior Court, County of Santa Clara  
**Self Help Center/Family Law Facilitator’s Office**  
 201 N. First Street, San Jose, CA 95113  
 408-882-2926

**THESE ARE THE DOCUMENTS  
YOU HAVE TO COMPLETE,  
COPY, FILE AND SERVE.**



1. The petitioner
  - a. ☐ is a parent of the children in item 2.
  - b. ☐ is not a parent of the children in item 2.
  - c. ☐ is the child or the child's personal representative (*specify court and date of appointment*):
  - d. ☐ Other (*specify*):
2. The children are
  - a. 

<u>Child's name</u>	<u>Birthdate</u>	<u>Age</u>
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  - b. ☐ a child who is not yet born
3. The respondent
  - a. ☐ lives in the state of California.
  - b. ☐ was in California when the children listed in item 2 were conceived.
  - c. ☐ does not live in the state of California.
  - d. ☐ was not in California when the children listed in item 2 were conceived.
  - e. ☐ Other (*specify*):
4. The children
  - a. ☐ live or are found in this county.
  - b. ☐ are children of a parent who is deceased, and proceedings for administration of the estate have been or could be started in this county.
5. The respondent is
  - a. ☐ the parent of the children listed in item 2 above.
  - b. ☐ not certain if the respondent is the parent of the children listed in item 2 above.
  - c. ☐ not the parent of the children listed in item 2 above.
  - d. ☐ Other (*specify*):
6. Additional statements
  - a. ☐ Parentage has been determined by a voluntary declaration of parentage or paternity. (*Attach a copy if available.*)
  - b. ☐ Parentage has been established in another case ☐ governmental child support ☐ Other (*specify*):
  - c. ☐ Public assistance is being provided to the children.
7. A completed *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)* (form FL-105) is attached.

PETITIONER:	CASE NUMBER:
RESPONDENT:	

The respondent asks that the court make the determinations listed below.

8. PARENT-CHILD RELATIONSHIP *(check all that apply)*:

- a. ☐ Respondent ☐ Petitioner is the parent of the children listed in item 2.
- b. ☐ Respondent ☐ Petitioner is not the parent of the children listed in item 2.
- c. ☐ Respondent requests genetic testing to determine whether the ☐ Petitioner ☐ Respondent is the parent of the children listed in item 2.

9. CHILD CUSTODY AND VISITATION (PARENTING TIME)

- |  | Petitioner               | Respondent               | Joint                    | Other                    |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Legal custody of children to .....                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Physical custody of children to .....                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Child visitation (parenting time) be granted to ..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

As requested in ☒ form FL-311 ☐ form FL-312 ☐ form FL-341(C) ☐ form FL-341(D) ☐ form FL-341(E) ☐ Attachment 6c(1)

- d. The facts in support of the requested custody and visitation (parenting time) orders are *(specify)*:
- ☐ Contained in the attached declaration.

10. REASONABLE EXPENSES OF PREGNANCY AND BIRTH:

	Petitioner	Respondent	Joint
Reasonable expenses of pregnancy and birth to be paid by as follows:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. FEES AND COSTS OF LITIGATION

	Petitioner	Respondent	Joint
a. Attorney fees to be paid by	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Expert fees, guardian ad litem fees, and other costs of the action or pretrial proceedings to be paid by	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. NAME CHANGE

☐ Children's names be changed, according to Family Code section 7638, as follows *(specify old and new names)*:

13. OTHER ORDERS REQUESTED *(specify)*:

14. CHILD SUPPORT

The court may make orders for support of the children and issue an earnings assignment without further notice to either party.

I have read the restraining order on the back of the *Summons* (FL-210) and I understand it applies to me.

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

Date:

(TYPE OR PRINT NAME)	(SIGNATURE OF RESPONDENT)
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**NOTICE:** If you have a child from this relationship, the court is required to order child support based upon the income of both parents. Support normally continues until the child is 18. You should supply the court with information about your finances. Otherwise, the child support order will be based upon information supplied by the other parent. Any party required to pay child support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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### 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.** Custody of the minor children of the parties is requested as follows: ☐ [Attachment 1a.](#)

<u>Child's Name</u>	<u>Date of Birth</u>	<u>Legal Custody to</u> <i>(person who decides about the child's health, education, and welfare)</i>	<u>Physical Custody to</u> <i>(person the child regularly lives with)</i>
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b. ☐ **Custody with allegations of a history of abuse or substance abuse**

- (1) ☐ Petitioner ☐ Respondent ☐ Other parent/party is (or are) alleged to have a history of abuse against any of the following persons: a child, the other parent, their current spouse, or the person they live with or are dating or engaged to.
- (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: Unless specifically ordered, a child's holiday schedule order has priority over the regular parenting time.**

- a. ☐ Reasonable right of parenting time (visitation) to the party without physical custody (**not appropriate in cases involving domestic violence**).
- 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 location):  

Family Court Services  
 www.scscourt.org  
 201 N. First Street  
 San Jose, CA 95113
- d. ☐ No visitation (parenting time).

- ☐
- Below
- ☐
- [in Attachment 3a\(2\)](#)
- ☐
- Other (specify):



PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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(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)**

*(Complete 3b only if you want the court to order unsupervised visitation to a person alleged to have a history of abuse or substance abuse.)*

- (1) ☐ Petitioner ☐ Respondent ☐ Other parent/party is (or are) alleged to have a history of abuse against any of the following persons: a child, the other parent, their current spouse, or the person they live with or are dating or engaged to.
- (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, place, and manner of transfer (exchange) of the child for custody and visitation under Family Code section 6323(c).*

- a. The children must be driven only by a licensed and insured driver. The vehicle must be legally registered with the Department of Motor Vehicles and must have child restraint devices properly installed, as required by law.
- 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: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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5. ☐ **Travel with children** The ☐ Petitioner ☐ Respondent ☐ Other parent/party **must** have written permission from the other parent or party, or a court order, to take the children out of the following places:
- a. ☐ the state of California.
  - b. ☐ the following counties (*specify*):
  - 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 party's permission. I request the orders set out on attached [form FL-312](#).
7. ☐ **Children's holiday schedule.** I request the holiday and vacation schedule set out ☐ below ☐ [on form FL-341\(C\)](#)
8. ☐ **Additional custody provisions.** I request the additional orders for custody set out ☐ below ☐ [on 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\(E\)](#)
10. ☐ **Other.** I request the following additional orders (*specify*):

<p>ATTORNEY OR PARTY WITHOUT ATTORNEY</p> <p>NAME:</p> <p>FIRM NAME:</p> <p>STREET ADDRESS:</p> <p>CITY:</p> <p>STATE:</p> <p>ZIP CODE:</p> <p>TELEPHONE NO.:</p> <p>FAX NO.:</p> <p>EMAIL ADDRESS:</p> <p>ATTORNEY FOR (name): <b>Self-Represented</b></p>	<p>STATE BAR NUMBER:</p>	<p><b>FOR COURT USE ONLY</b></p>
<p><b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF Santa Clara</b></p> <p>STREET ADDRESS: 201 N. First Street, San Jose, CA 95113</p> <p>MAILING ADDRESS: 191 N. First Street, San Jose, CA 95113</p> <p>CITY AND ZIP CODE:</p> <p>BRANCH NAME: Family Justice Center Courthouse</p>		
<p><i>(This section applies to cases other than probate guardianships.)</i></p> <p>PETITIONER:</p> <p>RESPONDENT:</p> <p>OTHER PARTY:</p> <p>CHILD'S NAME (Juvenile cases only):</p>		
<p><i>(This section applies only to probate guardianship cases.)</i></p> <p>GUARDIANSHIP OF (name):</p> <p style="text-align: right;">Minor</p>		
<p><b>DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)</b></p>		

1. I am (check one): ☒ a party to this proceeding to determine custody of a child ☐ the authorized representative of the agency, which is a party to this proceeding to determine custody of a child.

2. There are (specify number): minor children who are subject to this proceeding, as follows (list oldest child first):

Full Name	Date of birth	Place of birth (city and state)
a.		
b.		
c.		
d.		

☐ Check this box if you need to list more children. (On form [MC-020](#) or a separate piece of paper, write "FL-105, Attachment 2, Additional Children" at the top, provide all requested information for each additional child, and attach to this form.)

3. a. ☐ Check this box if there is only one child or if all of the children listed in item 2 have lived together for the past five years. (Provide the current address of the child listed in item 2a and their residence history for the past five years. If the current address is confidential under Family Code section 3429, check the box and provide only the state of residence.)

Dates of residence (Month/Year)		Residence (City, State)	Person child lived with and complete current address	Relationship
From:	To present			
		<input type="checkbox"/> Confidential (list state only)	<input type="checkbox"/> Confidential (list state only)	
From:	To:			
From:	To:			
From:	To:			
From:	To:			

☐ Additional addresses are listed on Attachment 3a. (Form [MC-020](#) may be used for this purpose.)

b. ☐ Check this box if there is more than one child and all the children have not lived together for the past five years. (Attach form FL-105(A)/GC-120(A) and list each other child's current address and their residence history for the past five years.)

CASE NAME:

CASE NUMBER:

4. Do you have information about, or have you participated as a party or as a witness or in some other capacity in, another court case or custody or visitation proceeding, in California or elsewhere, concerning a child subject to this proceeding?

☐ Yes ☐ No (If yes, attach a copy of the orders if you have one and provide the following information):

Proceeding	Case number	Court (name, state or tribe, location)	Court order or judgment (date)	Name of each child	Your connection to the case	Case status
a. <input type="checkbox"/> Family						
b. <input type="checkbox"/> Probate Guardianship						
c. <input type="checkbox"/> Other						

Proceeding	Case Number	Court (name, state or tribe, location)
d. <input type="checkbox"/> Juvenile		
e. <input type="checkbox"/> Adoption		

5. ☐ One or more domestic violence restraining/protective orders are now in effect. (Attach a copy of the orders if you have one and provide the following information):

Court	County	State or Tribe	Case Number (if known)	Orders expire (date)
a. <input type="checkbox"/> Criminal				
b. <input type="checkbox"/> Family				
c. <input type="checkbox"/> Juvenile				
d. <input type="checkbox"/> Other				

6. Do you know of any person who is not a party to this proceeding who has physical custody of or claims to have rights to custody of or visitation with any child in this case? ☐ Yes ☐ No (If yes, provide the following information):

a. Name and address of person:

b. Name and address of person:

c. Name and address of person:

☐ Has physical custody☐ Claims custody rights☐ Claims visitation rights

Name of each child:

☐ Has physical custody☐ Claims custody rights☐ Claims visitation rights

Name of each child:

☐ Has physical custody☐ Claims custody rights☐ Claims visitation rights

Name of each child:

7. ☐ 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:

(NAME OF DECLARANT)

(SIGNATURE OF DECLARANT)

**NOTICE TO DECLARANT: You have a continuing duty to inform this court if you obtain any information about a custody proceeding in a California court or any other court concerning a child subject to this proceeding.**

# **PROOF OF SERVICE**

**TO BE COMPLETED BY THE SERVER  
(SEE INSTRUCTIONS FOR DETAILS)**



ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):		<b>FOR COURT USE ONLY</b>
Your Name: _____		
Street Address: _____		
City, State, Zip Code: _____		
TELEPHONE NO.: _____ FAX NO. (Optional): _____		
E-MAIL ADDRESS (Optional): _____		
ATTORNEY FOR (Name): <b>Self-Represented</b>		
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF Santa Clara</b> STREET ADDRESS: <b>201 N. First Street, San Jose, CA 95113</b> MAILING ADDRESS: <b>191 N. First Street, San Jose, CA 95113</b> CITY AND ZIP CODE: _____ BRANCH NAME: <b>Family Justice Center Courthouse</b>		
PETITIONER/PLAINTIFF: _____		CASE NUMBER: _____
RESPONDENT/DEFENDANT: _____		(If applicable, provide):
OTHER PARENT/PARTY: _____		
<b>PROOF OF SERVICE BY MAIL</b>		HEARING DATE: _____
		HEARING TIME: _____
		DEPT.: _____

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

- 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.
- My residence or business address is:

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

**Filed copies of Response to Petition to Determine Parental Relationship (FL-220),  
UCCJEA (FL-105) and Child Custody and Visitation Application Attachment (FL-311)**

by enclosing them in an envelope AND

- ☒ **depositing** the sealed envelope with the United States Postal Service with the postage fully prepaid.
  - ☐ **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.
- The envelope was addressed and mailed as follows:
    - Name of person served:
    - Address:
    - Date mailed:
    - Place of mailing (*city and state*):
  - ☐ 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.)
  - I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

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

(TYPE OR PRINT NAME)

(SIGNATURE OF PERSON COMPLETING THIS FORM)

Page 1 of 1