

Superior Court of California
County of San Luis Obispo

DISSOLUTION OF MARRIAGE Uncontested Judgment

This instruction sheet will review the procedure and forms necessary to obtain an uncontested judgment without a hearing in front of a judge. If you and the other party are in agreement on all the issues, together you may prepare a Stipulated Judgment or Marital Settlement Agreement to finalize your case.

Before following these instructions you must satisfy the following:

- A divorce or legal separation case was properly filed with the Court;
- The Respondent was properly given a copy of the legal papers and an FL-115 Proof of Service of Summons was completed and filed with the Court;
- Both parties completed and exchanged financial disclosure information including FL-140 Declaration of Disclosure, FL-150 Income and Expense Declaration and FL-142 Schedule of Assets and Debts or FL-160 Property Declarations;
- Both parties completed the Online Parenting Class, if you have minor children of the marriage - <http://parenting.familieschange.ca.gov/> or call (805) 706-3608 for more information about the class;
- The Respondent filed an FL-120 Response or 30 days have passed from the date of service.

1	<p>REVIEW FL-115, FL-100 & FL-120</p>	<ul style="list-style-type: none"> • Review the FL-115 Proof of Service and make sure it was completed correctly. If the Respondent did not file an FL-120 Response then the FL-115 must be filed. • Review the filed copy of the FL-100 Petition and if filed the FL-120 Response. All the assets and debts listed on these forms must be mentioned in your FL-180 Stipulated Judgment or Marital Settlement Agreement. 										
2	<p>FILE FL-144 TO WAIVE FINAL DISCLOSURE</p>	<p>If there are no changes to the previously completed Preliminary Declaration of Disclosure forms FL-150 and FL-142 or FL-160 of both parties, then the following form may be completed and filed with the Court to waive the Final Declaration of Disclosure: <input type="checkbox"/> FL-144 Stipulation and Waiver of Final Declaration of Disclosure</p>										
3	<p>MAIL FINAL DISCLOSURE AND FILE FL-335</p>	<p>If there are changes to the previously completed Preliminary Declaration of Disclosure forms FL-150 and FL-142 or FL-160 of either party, then both parties must complete their own set of the following forms and someone other than the party who is 18 years or older must mail to the other party a copy of the updated forms. Then file completed FL-335 forms.</p> <table style="width: 100%; border: none;"> <tr> <td style="text-align: center; border: none;"><u>Petitioner's Set</u></td> <td style="text-align: center; border: none;"><u>Respondent's Set</u></td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> FL-140 Declaration of Disclosure</td> <td style="border: none;"><input type="checkbox"/> FL-140 Declaration of Disclosure</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> FL-142 or FL-160 Property Decl</td> <td style="border: none;"><input type="checkbox"/> FL-142 or FL-160 Property Decl</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> FL-150 Income and Expense Decl</td> <td style="border: none;"><input type="checkbox"/> FL-150 Income and Expense Decl</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> FL-335 Proof of Service by Mail</td> <td style="border: none;"><input type="checkbox"/> FL-335 Proof of Service by Mail</td> </tr> </table>	<u>Petitioner's Set</u>	<u>Respondent's Set</u>	<input type="checkbox"/> FL-140 Declaration of Disclosure	<input type="checkbox"/> FL-140 Declaration of Disclosure	<input type="checkbox"/> FL-142 or FL-160 Property Decl	<input type="checkbox"/> FL-142 or FL-160 Property Decl	<input type="checkbox"/> FL-150 Income and Expense Decl	<input type="checkbox"/> FL-150 Income and Expense Decl	<input type="checkbox"/> FL-335 Proof of Service by Mail	<input type="checkbox"/> FL-335 Proof of Service by Mail
<u>Petitioner's Set</u>	<u>Respondent's Set</u>											
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<input type="checkbox"/> FL-142 or FL-160 Property Decl	<input type="checkbox"/> FL-142 or FL-160 Property Decl											
<input type="checkbox"/> FL-150 Income and Expense Decl	<input type="checkbox"/> FL-150 Income and Expense Decl											
<input type="checkbox"/> FL-335 Proof of Service by Mail	<input type="checkbox"/> FL-335 Proof of Service by Mail											
4	<p>COMPLETE FORMS</p>	<p>Complete the following. If you want the Self-Help Center to review your forms, visit their office before you make copies.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;">Originals Needed</th> <th style="width: 20%;">Copies Needed</th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;"> <input checked="" type="checkbox"/> FL-141 Declaration Regarding Service of Declaration of Disclosure (Petitioner's) <input checked="" type="checkbox"/> FL-141 Declaration Regarding Service of Declaration of Disclosure (Respondent's) Each party must complete their own FL-141 and fill in Item 1; Item 2 (insert date Preliminary Declaration of Disclosure served); Item 3 (insert date Final Declaration of Disclosure served OR Item 4a (check that the FL-144 Stipulation and Waiver is being filed)). </td> <td style="vertical-align: top;"></td> </tr> </tbody> </table>	Originals Needed	Copies Needed	<input checked="" type="checkbox"/> FL-141 Declaration Regarding Service of Declaration of Disclosure (Petitioner's) <input checked="" type="checkbox"/> FL-141 Declaration Regarding Service of Declaration of Disclosure (Respondent's) Each party must complete their own FL-141 and fill in Item 1; Item 2 (insert date Preliminary Declaration of Disclosure served); Item 3 (insert date Final Declaration of Disclosure served OR Item 4a (check that the FL-144 Stipulation and Waiver is being filed)).							
Originals Needed	Copies Needed											
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4 Cont.	COMPLETE FORMS	Originals Needed (continued) www.courts.ca.gov	Copies Needed
		<input checked="" type="checkbox"/> FL-190 Notice of Entry of Judgment	2 copies for Court
		<input checked="" type="checkbox"/> FL-180 Judgment (staple the following that apply to reflect your agreement) <input type="checkbox"/> Marital Settlement Agreement (self-drafted) OR <input type="checkbox"/> Stipulated Judgment (form attachments below) <input type="checkbox"/> FL-355 Stipulation and Order for Custody and/or Visitation <input type="checkbox"/> FL-341 Child Custody & Visitation Attachment <input type="checkbox"/> FL-341(C) Children’s Holiday Schedule Attachment <input type="checkbox"/> FL-341(E) Joint Legal Custody Attachment <input type="checkbox"/> FL-350 Stipulation to Establish or Modify Child Support Order <input type="checkbox"/> Child Support Guideline Computer Printout <input type="checkbox"/> FL-192 Notices Re: Child Support <input type="checkbox"/> Copy of Existing DCSS Child Support Order <input type="checkbox"/> FL-343 Spousal, Partner, or Family Support Order Attachment <input type="checkbox"/> FL-345 Property Orders Attachment <input type="checkbox"/> FL-348 Pension Benefits <input checked="" type="checkbox"/> Signature & Notary Page for MSA or Stipulated Judgment <input type="checkbox"/> DCSS signature needed if DCSS case is filed (go to 1200 Monterey St., San Luis Obispo before filing Judgment with the court)	3 copies for Court
		<input checked="" type="checkbox"/> FL-170 Declaration for Default or Uncontested Dissolution	
		<input checked="" type="checkbox"/> 1 manila envelope addressed to you with postage	
		<input checked="" type="checkbox"/> <input type="checkbox"/> 1 <input type="checkbox"/> 2 legal-sized envelope(s) addressed to the other party with postage	
		<input type="checkbox"/> FL-165 Request to Enter Default (only if <u>No</u> FL-120 Response was filed)	1 copy for Court
		<input type="checkbox"/> FL-130 Appearance, Stipulations and Waivers (only if FL-120 Response was filed)	
		<input type="checkbox"/> FL-191 Child Support Case Registry (only if there are minor children) (Petitioner’s)	
		<input type="checkbox"/> FL-191 Child Support Case Registry (only if there are minor children) (Respondent’s)	
		<input type="checkbox"/> FL-195 Income Withholding for Support (for child support only OR for child support and spousal support)	3 copies for Court
		<input type="checkbox"/> FL-435 Earnings Assignment Order for Spousal or Partner Support (for spousal support only)	3 copies for Court
5	GIVE COURT PAPERS & ENVELOPES	Give the Court Clerk all documents listed above in Step 4 including originals, copies for Court and self-addressed stamped envelopes.	
6	WAIT FOR JUDGMENT IN THE MAIL	Within 8 weeks of filing the above documents with the Court Clerk, you should receive your final Judgment documents in the mail. You may contact the Court Clerk’s office to obtain the status of your case by calling (805) 706-3600.	
7	MAIL PAPERS TO OTHER PARTY & EMPLOYER	Once you receive your signed FL-180 Judgment, someone other than you who is 18 years or older should mail a copy to the other party. Also, if child support was ordered and you want the other party’s employer to garnish wages to enforce the child support order, you must have someone other than you who is 18 years or older mail to the employer a copy of the FL-195 Income Withholding for Support. The person who mails the copy of the FL-180 and/or FL-195 must complete the FL-335 Proof of Service by Mail and you must file the original with the Court.	

ATTORNEY, OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Pat Sample 1234 Main Street San Luis Obispo, CA 93401 TELEPHONE NO.: (805) 555-1234 FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): Petitioner in Pro Per	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF San Luis Obispo STREET ADDRESS: 1035 Palm Street, Room 385 MAILING ADDRESS: CITY AND ZIP CODE: San Luis Obispo, CA 93408 BRANCH NAME:	
PLAINTIFF/PETITIONER: Pat Sample DEFENDANT/RESPONDENT: Sam Sample OTHER:	
STIPULATION AND WAIVER OF FINAL DECLARATION OF DISCLOSURE	CASE NUMBER: FL110572

1. Under Family Code section 2105(d), the parties agree to waive the requirements of Family Code section 2105(a) concerning the final declaration of disclosure.
2. The parties agree as follows:
 - a. We have complied with Family Code section 2104, and the preliminary declarations of disclosure have been completed and exchanged.
 - b. We have completed and exchanged a current *Income and Expense Declaration* (form FL-150) that includes all material facts and information on each party's earnings, accumulations, and expenses.
 - c. We have fully complied with Family Law section 2102 and have fully augmented the preliminary declarations of disclosure, including disclosure of all material facts and information on
 - (1) the characterization of all assets and liabilities,
 - (2) the valuation of all assets that are community property or in which the community has an interest, and
 - (3) the amounts of all community debts and obligations.
 - d. Each of the parties enters into this waiver knowingly, intelligently, and voluntarily.
 - e. Each party understands that this waiver does not limit the legal disclosure obligations of the parties but rather is a statement under penalty of perjury that those obligations have been fulfilled.
 - f. The parties also understand that if they do not comply with these obligations, the court will set aside the judgment.

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

Date: **7/18/11**

Pat Sample _____
 (TYPE OR PRINT NAME)

Pat Sample _____
 (SIGNATURE OF PETITIONER)

Sam Sample _____
 (TYPE OR PRINT NAME)

Sam Sample _____
 (SIGNATURE OF RESPONDENT)

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Pat Sample 1234 Main Street San Luis Obispo, CA 93401		
TELEPHONE NO.: (805) 555-1234 FAX NO.: E-MAIL ADDRESS:		
ATTORNEY FOR (Name): Petitioner in Pro Per		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF San Luis Obispo STREET ADDRESS: 1035 Palm Street, Room 385 MAILING ADDRESS: CITY AND ZIP CODE: San Luis Obispo, CA 93408 BRANCH NAME:		
PETITIONER: Pat Sample RESPONDENT: Sam Sample OTHER PARENT/PARTY:		
DECLARATION REGARDING SERVICE OF DECLARATION OF DISCLOSURE AND INCOME AND EXPENSE DECLARATION <input checked="" type="checkbox"/> Petitioner's <input checked="" type="checkbox"/> Preliminary <input type="checkbox"/> Respondent's <input checked="" type="checkbox"/> Final		CASE NUMBER: FL110572

1. I am the attorney for petitioner respondent in this matter.
2. Petitioner's Respondent's Preliminary Declaration of Disclosure (form FL-140), current* Income and Expense Declaration (form FL-150), completed Schedule of Assets and Debts (form FL-142) or Community and Separate Property Declarations (form FL-160) with appropriate attachments, all tax returns filed by the party in the two years before service of the preliminary disclosures, and all other required information under Family Code section 2104 were served on:
 - the other party the other party's attorney by personal service mail
 - Other (specify):
on (date): **4/4/2011**
3. Petitioner's Respondent's Final Declaration of Disclosure (form FL-140), current* Income and Expense Declaration (form FL-150), completed Schedule of Assets and Debts (form FL-142) or Community or Separate Property Declarations (form FL-160) with attachments, and the material facts and information required by Family Code section 2105 were served on:
 - the other party other party's attorney by personal service mail
 - Other (specify):
on (date):
4. Service of Petitioner's Respondent's preliminary final declaration of disclosure
 current income and expense declaration has been waived as follows:
 - a. The parties agreed to waive final declaration of disclosure requirements under Family Code section 2105(d) (Form FL-144 may be used for this purpose.) The waiver was filed on (date):
 is being filed at the same time as this form.
 - b. The party has failed to comply with disclosure requirements, and the court has granted the request for voluntary waiver of receipt under Family Code section 2107 on (date):
 - c. This is a default proceeding that does not include a stipulated judgment or settlement agreement. Petitioner waives final disclosure requirements under Family Code section 2110.

*Current is defined as completed within the past three months providing no facts have changed. (Cal. Rules of Court, rule 5.260.)

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

Date: **7/18/2011**

Pat Sample

Pat Sample

(TYPE OR PRINT NAME)

SIGNATURE

NOTE: File this document with the court.
Do not file a copy of the Preliminary or Final Declaration of Disclosure or any attachments to either declaration of disclosure with this document.

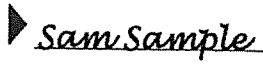
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Sam Sample		
333 Oak Street San Luis Obispo, CA 93401		
TELEPHONE NO.: (805) 239-9999	FAX NO.:	
E-MAIL ADDRESS:		
ATTORNEY FOR (Name): Respondent in Pro Per		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF San Luis Obispo		CASE NUMBER: FL110572
STREET ADDRESS:	1035 Palm Street, Room 385	
MAILING ADDRESS:		
CITY AND ZIP CODE:	San Luis Obispo, CA 93408	
BRANCH NAME:		
PETITIONER: Pat Sample		
RESPONDENT: Sam Sample		
OTHER PARENT/PARTY:		
DECLARATION REGARDING SERVICE OF DECLARATION OF DISCLOSURE AND INCOME AND EXPENSE DECLARATION <input type="checkbox"/> Petitioner's <input checked="" type="checkbox"/> Preliminary <input checked="" type="checkbox"/> Respondent's <input checked="" type="checkbox"/> Final		

- I am the attorney for petitioner respondent in this matter.
- Petitioner's Respondent's Preliminary Declaration of Disclosure (form FL-140), current* Income and Expense Declaration (form FL-150), completed Schedule of Assets and Debts (form FL-142) or Community and Separate Property Declarations (form FL-160) with appropriate attachments, all tax returns filed by the party in the two years before service of the preliminary disclosures, and all other required information under Family Code section 2104 were served on:
 the other party the other party's attorney by personal service mail
 Other (specify):
on (date): **6/4/2011**
- Petitioner's Respondent's Final Declaration of Disclosure (form FL-140), current* Income and Expense Declaration (form FL-150), completed Schedule of Assets and Debts (form FL-142) or Community or Separate Property Declarations (form FL-160) with attachments, and the material facts and information required by Family Code section 2105 were served on:
 the other party other party's attorney by personal service mail
 Other (specify):
on (date):
- Service of Petitioner's Respondent's preliminary final declaration of disclosure
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 is being filed at the same time as this form.
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*Current is defined as completed within the past three months providing no facts have changed. (Cal. Rules of Court, rule 5.260.)

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

Date: **7/18/2011**

Sam Sample _____  _____
(TYPE OR PRINT NAME) SIGNATURE

NOTE: File this document with the court.
Do not file a copy of the Preliminary or Final Declaration of Disclosure or any attachments to either declaration of disclosure with this document.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Pat Sample 1234 Main Street San Luis Obispo, CA 93401 TELEPHONE NO.: (805) 555-1234 FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): Petitioner in Pro Per	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF San Luis Obispo STREET ADDRESS: 1035 Palm Street, Room 385 MAILING ADDRESS: CITY AND ZIP CODE: San Luis Obispo, CA 93408 BRANCH NAME:	
PETITIONER: Pat Sample RESPONDENT: Sam Sample	
NOTICE OF ENTRY OF JUDGMENT	CASE NUMBER: FL110572

You are notified that the following judgment was entered on (date) :

1. Dissolution
2. Dissolution - status only
3. Dissolution - reserving jurisdiction over termination of marital status or domestic partnership
4. Legal separation
5. Nullity
6. Parent-child relationship
7. Judgment on reserved issues
8. Other (specify) :

Date:

Clerk, by _____, Deputy

-NOTICE TO ATTORNEY OF RECORD OR PARTY WITHOUT ATTORNEY-

Under the provisions of Code of Civil Procedure section 1952, if no appeal is filed the court may order the exhibits destroyed or otherwise disposed of after 60 days from the expiration of the appeal time.

STATEMENT IN THIS BOX APPLIES ONLY TO JUDGMENT OF DISSOLUTION

Effective date of termination of marital or domestic partnership status (specify) : **10/5/11**

WARNING: Neither party may remarry or enter into a new domestic partnership until the effective date of the termination of marital or domestic partnership status, as shown in this box.

CLERK'S CERTIFICATE OF MAILING

I certify that I am not a party to this cause and that a true copy of the *Notice of Entry of Judgment* was mailed first class, postage fully prepaid, in a sealed envelope addressed as shown below, and that the notice was mailed

at (place) : _____, California, on (date) :

Date: _____ Clerk, by _____, Deputy

Name and address of petitioner or petitioner's attorney <div style="border: 1px solid black; padding: 5px; min-height: 40px;"> Pat Sample 1234 Main Street San Luis Obispo, CA 93401 </div>	Name and address of respondent or respondent's attorney <div style="border: 1px solid black; padding: 5px; min-height: 40px;"> Sam Sample 333 Oak Street San Luis Obispo, CA 93401 </div>
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<p>ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Pat Sample</p> <p>1234 Main Street San Luis Obispo, CA 93401</p> <p>TELEPHONE NO.: (805) 555-1234 FAX NO. (Optional):</p> <p>E-MAIL ADDRESS (Optional):</p> <p>ATTORNEY FOR (Name): Petitioner in Pro Per</p>	<p style="text-align: center;">FOR COURT USE ONLY</p> <p style="text-align: center;">SAMPLE</p> <p style="text-align: center;">STIPULATED JUDGMENT</p>
<p>SUPERIOR COURT OF CALIFORNIA, COUNTY OF San Luis Obispo</p> <p>STREET ADDRESS: 1035 Palm Street, Room 385</p> <p>MAILING ADDRESS:</p> <p>CITY AND ZIP CODE: San Luis Obispo, CA 93408</p> <p>BRANCH NAME:</p>	
<p>MARRIAGE OR PARTNERSHIP OF</p> <p>PETITIONER: Pat Sample</p> <p>RESPONDENT: Sam Sample</p>	
<p style="text-align: center;">STIPULATED JUDGMENT</p> <p><input checked="" type="checkbox"/> DISSOLUTION <input type="checkbox"/> LEGAL SEPARATION <input type="checkbox"/> NULLITY</p> <p><input type="checkbox"/> Status only</p> <p><input type="checkbox"/> Reserving jurisdiction over termination of marital or domestic partnership status</p> <p><input type="checkbox"/> Judgment on reserved issues</p> <p>Date marital or domestic partnership status ends: 10/5/2011</p> <p>CASE NUMBER: FL110572</p>	

- This judgment contains personal conduct restraining orders modifies existing restraining orders. The restraining orders are contained on page(s) _____ of the attachment. They expire on (date): _____
- This proceeding was heard as follows: Default or uncontested By declaration under Family Code section 2336
 Contested Agreement in court
 - Date: _____ Dept.: _____ Room: _____
 - Judicial officer (name): _____ Temporary judge
 - Petitioner present in court Attorney present in court (name): _____
 - Respondent present in court Attorney present in court (name): _____
 - Claimant present in court (name): _____ Attorney present in court (name): _____
 - Other (specify name): _____
- The court acquired jurisdiction of the respondent on (date): **4/4/2011**
 - The respondent was served with process.
 - The respondent appeared.

THE COURT ORDERS, GOOD CAUSE APPEARING

- Judgment of dissolution is entered. Marital or domestic partnership status is terminated and the parties are restored to the status of single persons
 - on (specify date): **10/5/2011**
 - on a date to be determined on noticed motion of either party or on stipulation.
 - Judgment of legal separation is entered.
 - Judgment of nullity is entered. The parties are declared to be single persons on the ground of (specify): _____
 - This judgment will be entered nunc pro tunc as of (date): _____
 - Judgment on reserved issues.
 - The petitioner's respondent's former name is restored to (specify): **Pat Midel Smith**
 - Jurisdiction is reserved over all other issues, and all present orders remain in effect except as provided below.
 - This judgment contains provisions for child support or family support. Each party must complete and file with the court a *Child Support Case Registry Form* (form FL-191) within 10 days of the date of this judgment. The parents must notify the court of any change in the information submitted within 10 days of the change, by filing an updated form. The *Notice of Rights and Responsibilities—Health-Care Costs and Reimbursement Procedures and Information Sheet on Changing a Child Support Order* (form FL-192) is attached.



Initials _____

CASE NAME (Last name, first name of each party): Sample, Pat and Sam	CASE NUMBER: FL110572
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4. i. The children of this marriage or domestic partnership are:
- | | | |
|---|---|---|
| (1) <input checked="" type="checkbox"/> | Name
Chad Sample
Cindy Sample | Birthdate
1/2/05
5/2/10 |
|---|---|---|
- (2) Parentage is established for children of this relationship born prior to the marriage or domestic partnership
- j. Child custody and visitation (parenting time) are ordered as set forth in the attached
- (1) Settlement agreement, stipulation for judgment, or other written agreement which contains the information required by Family Code section 3048(a).
- (2) *Child Custody and Visitation Order Attachment* (form FL-341).
- (3) *Stipulation and Order for Custody and/or Visitation of Children* (form FL-355).
- (4) Previously established in another case. Case number: _____ Court: _____
- k. Child support is ordered as set forth in the attached
- (1) Settlement agreement, stipulation for judgment, or other written agreement which contains the declarations required by Family Code section 4065(a).
- (2) *Child Support Information and Order Attachment* (form FL-342).
- (3) *Stipulation to Establish or Modify Child Support and Order* (form FL-350).
- (4) Previously established in another case. Case number: _____ Court: _____
- l. Spousal, domestic partner, or family support is ordered:
- (1) Reserved for future determination as relates to petitioner respondent
- (2) Jurisdiction terminated to order spousal or partner support to petitioner respondent
- (3) As set forth in the attached *Spousal, Partner, or Family Support Order Attachment* (form FL-343).
- (4) As set forth in the attached settlement agreement, stipulation for judgment, or other written agreement.
- (5) Other (specify): _____
- m. Property division is ordered as set forth in the attached
- (1) Settlement agreement, stipulation for judgment, or other written agreement.
- (2) *Property Order Attachment to Judgment* (form FL-345).
- (3) Other (specify): _____
- n. Attorney fees and costs are ordered as set forth in the attached
- (1) Settlement agreement, stipulation for judgment, or other written agreement.
- (2) *Attorney Fees and Costs Order* (form FL-346).
- (3) Other (specify): _____
- o. Other (specify): **Attachment 4o.**

Each attachment to this judgment is incorporated into this judgment, and the parties are ordered to comply with each attachment's provisions. Jurisdiction is reserved to make other orders necessary to carry out this judgment.

Date: _____

5. Number of pages attached: **18** _____

JUDICIAL OFFICER
 SIGNATURE FOLLOWS LAST ATTACHMENT

NOTICE

Dissolution or legal separation may automatically cancel the rights of a spouse or domestic partner under the other spouse's or domestic partner's will, trust, retirement plan, power of attorney, pay-on-death bank account, transfer-on-death vehicle registration, survivorship rights to any property owned in joint tenancy, and any other similar property interest. It does not automatically cancel the rights of a spouse or domestic partner as beneficiary of the other spouse's or domestic partner'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.

A debt or obligation may be assigned to one party as part of the dissolution of property and debts, but if that party does not pay the debt or obligation, the creditor may be able to collect from the other party.

An earnings assignment may be issued without additional proof if child, family, partner, or spousal support is ordered.

Any party required to pay support must pay interest on overdue amounts at the "legal rate," which is currently 10 percent.

Initials

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Pat Sample		TELEPHONE NO.:	FOR COURT USE ONLY
1234 Main Street San Luis Obispo, CA 93401			
TELEPHONE NO.: (805) 555-1234	FAX NO. (Optional):		
E-MAIL ADDRESS (Optional):			
ATTORNEY FOR (Name): Petitioner in Pro Per			
SUPERIOR COURT OF CALIFORNIA, COUNTY OF San Luis Obispo			
STREET ADDRESS: 1035 Palm Street, Room 385			
MAILING ADDRESS:			
CITY AND ZIP CODE: San Luis Obispo, CA 93408			
BRANCH NAME:			
PETITIONER: Pat Sample			
RESPONDENT: Sam Sample			
OTHER:			
STIPULATION AND ORDER FOR CUSTODY AND/OR VISITATION OF CHILDREN			CASE NUMBER: FL110572
<input type="checkbox"/> MODIFICATION			

The parties signing this stipulation agree that:

- This court has jurisdiction over the minor children because California is the children's home state.
- The habitual residence of the children is the United States of America.
- The parties acknowledge they were advised that any violation of this order may result in civil or criminal penalties, or both.
- The parties stipulate that the attached document, dated (specify): _____ and consisting of (number): _____ pages is their custody and visitation agreement and request that it be made an order of the court, or
 - The parties stipulate that the attached forms
 FL-341 FL-341(A) FL-341(B) FL-341(C) FL-341(D) FL-341(E)
are their agreement regarding custody and/or visitation of their children and request that they be made an order of the court.

Each party declares under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: **7/18/11**

Pat Sample

Date: **7/18/11** (TYPE OR PRINT NAME)

Sam Sample

Date: _____ (TYPE OR PRINT NAME)

Date: _____ (TYPE OR PRINT NAME)

Date: _____ (TYPE OR PRINT NAME)

Date: _____ (TYPE OR PRINT NAME)

Date: _____ (TYPE OR PRINT NAME)

▶ Pat Sample (SIGNATURE OF PETITIONER)

▶ Sam Sample (SIGNATURE OF RESPONDENT)

▶ _____ (SIGNATURE OF ATTORNEY FOR PETITIONER)

▶ _____ (SIGNATURE OF ATTORNEY FOR RESPONDENT)

▶ _____ (SIGNATURE OF OTHER)

▶ _____ (SIGNATURE OF ATTORNEY FOR OTHER)

FINDINGS AND ORDER

THE COURT FINDS:

- This court has jurisdiction over the minor children because California is the children's home state.
- The habitual residence of the children is the United States of America.
- Both parties have been advised that any violation of this order may result in civil or criminal penalties, or both.

THE COURT ORDERS:

- The agreement of the parties regarding custody and visitation as set forth in the attached document dated (specify): _____ and consisting of (number): _____ pages or set forth in the attached forms:
 FL-341 FL-341(A) FL-341(B) FL-341(C) FL-341(D) FL-341(E)
is adopted as the order of the court and fully incorporated by reference herein.

Date: _____

JUDICIAL OFFICER

Page 1 of 1

Initials _____

PETITIONER/PLAINTIFF: Pat Sample	CASE NUMBER: FL110572
RESPONDENT/DEFENDANT: Sam Sample	

7. e. (2) **Alternate weekends starting (date):**
 The petitioner respondent other (name): _____ will have the children
 with him or her during the period

from _____ at _____ a.m. p.m.
 (day of week) (time)

to _____ at _____ a.m. p.m.
 (day of week) (time)

(3) **Weekdays starting (date): 8/1/2011**
 The petitioner respondent other (name): _____ will have the children
 with him or her during the period

from **Wednesday** at **3:00** a.m. p.m.
 (day of week) (time)

to **Wednesday** at **8:00** a.m. p.m.
 (day of week) (time)

(4) **Other (specify days and times as well as any additional restrictions):**

See Attachment 7e(4).

8. **The court acknowledges** that criminal protective orders in case number (specify): _____
 in (specify court): _____ relating to the parties in this case are in effect
 under Penal Code section 136.2, are current, and have priority of enforcement.

9. **Supervised visitation.** Until further order of the court other (specify): _____
 the petitioner respondent other (name): _____ will have supervised visitation with
 the minor children according to the schedule

set forth on page 1. (You must attach **Supervised Visitation Order (form FL-341(A).)**)

10. **Transportation for visitation**
- a. The children must be driven only by a licensed and insured driver. The car or truck must have legal child restraint devices.
 - b. Transportation to the visits will be provided by the petitioner respondent
 other (specify): _____
 - c. Transportation from the visits will be provided by the petitioner respondent
 other (specify): _____
 - d. The exchange point at the beginning of the visit will be at (address): **1234 Main St. San Luis Obispo, CA 93401**
 - e. The exchange point at the end of the visit will be at (address): **1234 Main St. San Luis Obispo, CA 93401**
 - f. During the exchanges, the parent driving the children will wait in the car and the other parent will wait in his or
her home while the children go between the car and the home.
 - g. Other (specify): _____

11. **Travel with children.** The petitioner respondent other (name): _____
must have written permission from the other parent or a court order to take the children out of
- a. the state of California.
 - b. the following counties (specify): _____
 - c. other places (specify): _____

THIS IS A COURT ORDER.

CHILD CUSTODY AND VISITATION (PARENTING TIME)
 ORDER ATTACHMENT

initials — —

PETITIONER/PLAINTIFF: Pat Sample	CASE NUMBER: FL110572
RESPONDENT/DEFENDANT: Sam Sample	

12. **Holiday schedule.** The children will spend holiday time as listed below in the attached schedule.
(Children's Holiday Schedule Attachment (form FL-341(C)) may be used for this purpose.)

13. **Additional custody provisions.** The parents will follow the additional custody provisions listed below in the attached schedule. *(Additional Provisions—Physical Custody Attachment (form FL-341(D)) may be used for this purpose.)*

14. **Joint legal custody.** The parents will share joint legal custody as listed below in the attached schedule.
(Joint Legal Custody Attachment (form FL-341(E)) may be used for this purpose.)

15. **Other (specify):**

THIS IS A COURT ORDER.

initials — —

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Pat Sample 1234 Main Street San Luis Obispo, CA 93401 TELEPHONE NO.: (805) 555-1234 FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): Petitioner in Pro Per	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF San Luis Obispo STREET ADDRESS: 1035 Palm Street, Room 385 MAILING ADDRESS: CITY AND ZIP CODE: San Luis Obispo, CA 93408 BRANCH NAME:	
PETITIONER/PLAINTIFF: Pat Sample RESPONDENT/DEFENDANT: Sam Sample OTHER PARENT:	
STIPULATION TO ESTABLISH OR MODIFY CHILD SUPPORT AND ORDER	CASE NUMBER: FL110572

1. a. Mother's net monthly disposable income: \$ **2,754.00**
 Father's net monthly disposable income: \$ **4,879.00**
 -OR-
 b. A printout of a computer calculation of the parents' financial circumstances is attached.
2. Percentage of time each parent has primary responsibility for the children: Mother: **90** % Father: **10** %
3. a. A hardship is being experienced by the mother \$ _____ per month because of (specify):
 The hardship will last until (date): _____
 b. A hardship is being experienced by the father \$ _____ per month because of (specify):
 The hardship will last until (date): _____

4. The amount of child support payable by (name): **Sam Sample**, referred to as "the parent ordered to pay support," as calculated under the guideline is: \$ **1,617.00** per month.

5. We agree to guideline support.
6. The guideline amount should be rebutted because of the following:
 - a. We agree to child support in the amount of \$ _____ per month; the agreement is in the best interest of the children; the needs of the children will be adequately met by the agreed amount; and application of the guideline would be unjust or inappropriate in this case.
 - b. Other rebutting factors (specify): _____

7. The parent ordered to pay support must pay child support as follows beginning (date): **8/1/2011**

	<u>Monthly amount</u>	<u>Payable to (name):</u>
a. BASIC CHILD SUPPORT		
Chad Sample	584.00	Pat Sample
Cindy Sample	1,033.00	Pat Sample

- Total: \$ **1,617.00** payable on the first of the month other (specify): _____
- b. In addition, the parent ordered to pay support must pay the following:
 - (1) \$ _____ per month for child care costs to (name): _____ on (date): _____
 - (2) \$ _____ per month for health-care costs not deducted from gross income to (name): _____ on (date): _____
 - (3) \$ _____ per month for special educational or other needs of the children to (name): _____ on (date): _____
 - (4) other (specify): _____

c. Total monthly child support payable by the parent ordered to pay support will be: \$ **1,617.00** payable on the first of the month other (specify): _____



initials _____

PETITIONER/PLAINTIFF: Pat Sample	CASE NUMBER: FL110572
RESPONDENT/DEFENDANT: Sam Sample	

8. a. Health insurance will be maintained by (specify name): **Sam Sample**
 The parent ordered to provide health insurance must seek continuation of coverage for the child after the child attains the age when the child is no longer considered eligible for coverage as a dependent under the insurance contract, if the child is incapable of self-sustaining employment because of a physically or mentally disabling injury, illness, or condition and is chiefly dependent upon the parent providing health insurance for support and maintenance.
- b. A health insurance coverage assignment will issue if health insurance is available through employment or other group plan or otherwise is available at reasonable cost. Both parents are ordered to cooperate in the presentation, collection, and reimbursement of any medical claims.
- c. Any health expenses not paid by insurance will be shared: Mother: **50** % Father: **50** %
9. a. An earnings assignment order is issued.
- b. We agree that service of the earnings assignment be stayed because we have made the following alternative arrangements to ensure payment (specify):
10. In the event that there is a contract between a party receiving support and a private child support collector, the party ordered to pay support must pay the fee charged by the private child support collector. This fee must not exceed 33 1/3 percent of the total amount in arrears nor may it exceed 50 percent of any fee charged by the private child support collector. The money judgment created by this provision is in favor of the private child support collector and the party receiving support, jointly.
11. Travel expenses for visitation will be shared: Mother: % Father: %
12. We agree that we will promptly inform each other of any change of residence or employment, including the employer's name, address, and telephone number.
13. Other (specify):
14. We agree that we are fully informed of our rights under the California child support guidelines.
15. We make this agreement freely without coercion or duress.
16. The right to support
- a. has not been assigned to any county, and no application for public assistance is pending.
- b. has been assigned or an application for public assistance is pending in (county name):
- If you checked b., an attorney for the local child support agency must sign below, joining in this agreement.*

Date: _____

 (TYPE OR PRINT NAME)

 (SIGNATURE OF ATTORNEY FOR LOCAL CHILD SUPPORT AGENCY)

Notice: If the amount agreed to is less than the guideline amount, no change of circumstances need be shown to obtain a change in the support order to a higher amount. If the order is above the guideline, a change of circumstances will be required to modify this order. This form must be signed by the court to be effective.

Date: **7/18/2011**
Pat Sample

 (TYPE OR PRINT NAME)

 (SIGNATURE OF PETITIONER)

Date: **7/18/2011**
Sam Sample

 (TYPE OR PRINT NAME)

 (SIGNATURE OF RESPONDENT)

Date: _____

 (TYPE OR PRINT NAME)

 (SIGNATURE OF ATTORNEY FOR PETITIONER)

Date: _____

 (TYPE OR PRINT NAME)

 (SIGNATURE OF ATTORNEY FOR RESPONDENT)

THE COURT ORDERS

17. a. The guideline child support amount in item 4 is rebutted by the factors stated in item 6.
- b. Items 7 through 13 are ordered. All child support payments must continue until further order of the court, or until the child marries, dies, is emancipated, or reaches age 18. The duty of support continues as to an unmarried child who has attained the age of 18 years, is a full-time high school student, and resides with a parent, until the time the child completes the 12th grade or attains the age of 19 years, whichever first occurs. Except as modified by this stipulation, all provisions of any previous orders made in this action will remain in effect.

Date: _____

 JUDGE OF THE SUPERIOR COURT

NOTICE: Any party required to pay child support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent per year. This can be a large added amount.

initials _____

DissoMaster Data Screen Monthly Figures

Input Data	Father	Mother	Guideline (2011)	Cash Flow Analysis	Gdin.	Prop.
Party Info	Father	Mother	Nets (adjusted)	Comb. net spendable	7633	7748
Number of children	0	2	Father	4879	Percent change	0%
% time with NCP	10.00	0.00	Mother	2754	Father, payor of SS, CS, Prop. SS, Prop. CS	
Filing Status	Single	HH/MLA	Total	7633	Payment cost	1890
# federal exemptions	1*	3*	Support		Net spendable income	2855
Wages + salary	7000	3010	Presumed CS	1617	Change from guideline	0
Self-employment income	0	0	Basic CS	1617	% of combined spendable	37.4%
Other taxable income	0	0	Add-ons	0	% of saving over guideline	0%
TANF plus CS received	0	0	Per Kid		Total Taxes	1991
Other nontaxable income	0	0	Child 1	584	Dep. exemptions value	0
New-spouse income	0	0	Child 2	1033	# withholding allowances	3
Wages + Salary	0	0	S. Clara SS	407	Net wage paycheck	4964
Self-employment income	0	0	Total	2024	Mother	
SS paid other marriage	0	0	Proposed, Tactic 9		Payment benefit	1878
Retirement contrib. if ATI	0	0	Presumed CS	1741	Net spendable income	4778
Required union dues	0	0	S. Clara SS	649	Change from guideline	0
Nec. Job-related exp.	0	0	Total	2391	% of combined spendable	62.6%
Adj. income (ATI)	0	0	Comb. Savings	115	% of saving over guideline	0%
SS paid other marriage	0	0	Total releases	2	Total Taxes	256
CS paid other relationship	0	0	to Father		Dep. exemptions value	0
Health insurance	120	0	Default Case Settings		# withholding allowances	7
Itemized deductions	0	0	Default Tax Settings		Net wage paycheck	2736
Other medical expenses	0	0				2378
Property tax expenses	0	0				
Ded. interest expense	0	0				
Charitable contribution	0	0				
Miscellaneous itemized	0	0				
Required union dues	10	0				
Mandatory retirement	0	0				
Hardship deduction	0*	0*				
Other guideline deductions	0	0				
AMT Info (IRS Form 6251)	0	0				
Child support add-ons	0	0				

initials: _____

NOTICE OF RIGHTS AND RESPONSIBILITIES
Health-Care Costs and Reimbursement Procedures

IF YOU HAVE A CHILD SUPPORT ORDER THAT INCLUDES A PROVISION FOR THE REIMBURSEMENT OF A PORTION OF THE CHILD'S OR CHILDREN'S HEALTH-CARE COSTS AND THOSE COSTS ARE NOT PAID BY INSURANCE, THE LAW SAYS:

1. **Notice.** You must give the other parent an itemized statement of the charges that have been billed for any health-care costs not paid by insurance. You must give this statement to the other parent within a reasonable time, but no more than 30 days after those costs were given to you.
2. **Proof of full payment.** If you have already paid all of the uninsured costs, you must (1) give the other parent proof that you paid them and (2) ask for reimbursement for the other parent's court-ordered share of those costs.
3. **Proof of partial payment.** If you have paid only your share of the uninsured costs, you must (1) give the other parent proof that you paid your share, (2) ask that the other parent pay his or her share of the costs directly to the health-care provider, and (3) give the other parent the information necessary for that parent to be able to pay the bill.
4. **Payment by notified parent.** If you receive notice from a parent that an uninsured health-care cost has been incurred, you must pay your share of that cost within the time the court orders; or if the court has not specified a period of time, you must make payment (1) within 30 days from the time you were given notice of the amount due, (2) according to any payment schedule set by the health-care provider, (3) according to a schedule agreed to in writing by you and the other parent, or (4) according to a schedule adopted by the court.
5. **Disputed charges.** If you dispute a charge, you may file a motion in court to resolve the dispute, but only if you pay that charge before filing your motion.

If you claim that the other party has failed to reimburse you for a payment, or the other party has failed to make a payment to the provider after proper notice has been given, you may file a motion in court to resolve the dispute. The court will presume that if uninsured costs have been paid, those costs were reasonable. The court may award attorney fees and costs against a party who has been unreasonable.

6. **Court-ordered insurance coverage.** If a parent provides health-care insurance as ordered by the court, that insurance must be used at all times to the extent that it is available for health-care costs.
 - a. **Burden to prove.** The party claiming that the coverage is inadequate to meet the child's needs has the burden of proving that to the court.
 - b. **Cost of additional coverage.** If a parent purchases health-care insurance in addition to that ordered by the court, that parent must pay all the costs of the additional coverage. In addition, if a parent uses alternative coverage that costs more than the coverage provided by court order, that parent must pay the difference.
7. **Preferred health providers.** If the court-ordered coverage designates a preferred health-care provider, that provider must be used at all times consistent with the terms of the health insurance policy. When any party uses a health-care provider other than the preferred provider, any health-care costs that would have been paid by the preferred health provider if that provider had been used must be the sole responsibility of the party incurring those costs.

initials — —

INFORMATION SHEET ON CHANGING A CHILD SUPPORT ORDER

FL-192

General Information

The court has just made a child support order in your case. This order will remain the same unless a party to the action requests that the support be changed (modified). An order for child support can be modified only by filing a motion to change child support and serving each party involved in your case. If both parents and the local child support agency (if it is involved) agree on a new child support amount, you can complete, have all parties sign, and file with the court a *Stipulation to Establish or Modify Child Support and Order* (form FL-350) or *Stipulation and Order (Governmental)* (form FL-625).

When a Child Support Order May Be Modified

The court takes several things into account when ordering the payment of child support. First, the number of children is considered. Next, the net incomes of both parents are determined, along with the percentage of time each parent has physical custody of the children. The court considers both parties' tax filing status and may consider hardships, such as a child of another relationship. An existing order for child support may be modified when the net income of one of the parents changes significantly, the parenting schedule changes significantly, or a new child is born.

Examples

- You have been ordered to pay \$500 per month in child support. You lose your job. You will continue to owe \$500 per month, plus 10 percent interest on any unpaid support, unless you file a motion to modify your child support to a lower amount and the court orders a reduction.
- You are currently receiving \$300 per month in child support from the other parent, whose net income has just increased substantially. You will continue to receive \$300 per month unless you file a motion to modify your child support to a higher amount and the court orders an increase.
- You are paying child support based upon having physical custody of your children 30 percent of the time. After several months it turns out that you actually have physical custody of the children 50 percent of the time. You may file a motion to modify child support to a lower amount.

How to Change a Child Support Order

To change a child support order, you must file papers with the court. *Remember:* You must follow the order you have now.

What forms do I need?

If you are asking to change a child support order open with the local child support agency, you must fill out one of these forms:

- FL-680, *Notice of Motion (Governmental)* or FL-683 *Order to Show Cause (Governmental)* and
- FL-684, *Request for Order and Supporting Declaration (Governmental)*

If you are asking to change a child support order that is **not** open with the local child support agency, you must fill out one of these forms:

- FL-300, *Request for Order* or
- FL-390, *Notice of Motion and Motion for Simplified Modification of Order for Child, Spousal, or Family Support*

You must also fill out one of these forms:

- FL-150, *Income and Expense Declaration* or FL-155, *Financial Statement (Simplified)*

What if I am not sure which forms to fill out?

Talk to the family law facilitator at your court.

After you fill out the forms, file them with the court clerk and ask for a hearing date. Write the hearing date on the form.

The clerk will ask you to pay a filing fee. If you cannot afford the fee, fill out these forms, too:

- Form FW-001, *Request to Waive Court Fees*
- Form FW-003, *Order on Court Fee Waiver (Superior Court)*

You must serve the other parent. If the local child support agency is involved, serve it too.

This means someone 18 or over - **not you** - must serve the other parent copies of your filed court forms at least **16 court days** before the hearing. Add **5 calendar days** if you serve by mail within California (see Code of Civil Procedure section 1005 for other situations).

Court days are weekdays when the court is open for business (Monday through Friday except court holidays). **Calendar days** include all days of the month, including weekends and holidays. To find court holidays, go to www.courts.ca.gov/holidays.htm.

The server must also serve blank copies of these forms:

- FL-320, *Responsive Declaration to Request for Order* and FL-150, *Income and Expense Declaration*, or
- FL-155, *Financial Statement (Simplified)*

Then the server fills out and signs a *Proof of Service* (form FL-330 or FL-335). Take this form to the clerk and file it.

Go to your hearing and ask the judge to change the support. Bring your tax returns from the last two years and your last two months' pay stubs. The judge will look at your information, listen to both parents, and make an order. After the hearing, fill out:

- FL-340, *Findings and Order After Hearing* and
- FL-342, *Child Support Information and Order Attachment*

Need help?

Contact the family law facilitator in your county or call your county's bar association and ask for an experienced family lawyer.

PETITIONER/PLAINTIFF: Pat Sample RESPONDENT/DEFENDANT: Sam Sample OTHER PARENT:	CASE NUMBER: FL110572
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SPOUSAL, PARTNER, OR FAMILY SUPPORT ORDER ATTACHMENT

- TO Findings and Order After Hearing (form FL-340) Judgment (form FL-180)
 Restraining Order After Hearing (CLETS-OAH) (form DV-130) Other (specify):
 Stipulation of Parties

THE COURT FINDS

1. Net income. The parties' monthly income and deductions are as follows (complete a, b, or both):

	Total gross monthly income	Total monthly deductions	Total hardship deductions	Net monthly disposable income
a. Petitioner: <input type="checkbox"/> receiving TANF/CalWORKS \$	3,010 \$		\$	\$ 2,754
b. Respondent: <input type="checkbox"/> receiving TANF/CalWORKS \$	7,000 \$		\$	\$ 4,879

2. A printout of a computer calculation of the parties' financial circumstances is attached for all required items not filled out above (for temporary support only).

3. Judgment for spousal or partner support

- a. Modifies a judgment or order entered on (date):
b. The parties were married for (specify numbers): 15 years ____ months.
c. The parties were registered as domestic partners or the equivalent on (specify numbers): ____ years ____ months.
d. The parties are both self-supporting, as shown on the Declaration for Default or Uncontested Dissolution or Legal Separation (form FL-170).
e. The marital standard of living was (describe):

See Attachment 3d.

THE COURT ORDERS

4. The issue of spousal or partner support for the petitioner respondent is reserved for a later determination.
5. The court terminates jurisdiction over the issue of spousal or partner support for the petitioner respondent.
6. a. The petitioner respondent must pay to the petitioner respondent
as temporary spousal support family support partner support
\$ 407 per month, beginning (date): 8/1/2011, payable through (specify end date):

payable on the (specify): 1st day of each month.
 Other (specify):

- b. Support must be paid by check, money order, or cash. The support payor's obligation to pay support will terminate on the death of either party, remarriage, or registration of a new domestic partnership of the support payee.
c. An earnings assignment for the foregoing support will issue. (Note: The payor of spousal, family, or partner support is responsible for the payment of support directly to the recipient until support payments are deducted from the payor's earnings, and for any support not paid by the assignment.)
d. Service of the earnings assignment is stayed provided the payor is not more than (specify number): ____ days late in the payment of spousal, family, or partner support.

THIS IS A COURT ORDER.

SPOUSAL, PARTNER, OR FAMILY SUPPORT ORDER ATTACHMENT
(Family Law)



initials _____

PETITIONER/PLAINTIFF: **Pat Sample**
RESPONDENT/DEFENDANT: **Sam Sample**
OTHER PARENT:

CASE NUMBER:
FL110572

7. The petitioner respondent should make reasonable efforts to assist in providing for his or her support needs.
8. The parties must promptly inform each other of any change of employment, including the employer's name, address, and telephone number.
9. This order is for family support. Both parties must complete and file with the court a *Child Support Case Registry Form* (form FL-191) within 10 days of the date of this order. The parents must notify the court of any change of information submitted within 10 days of the change by filing an updated form. A *Notice of Rights and Responsibilities (Health-Care Costs and Reimbursement Procedures) and Information Sheet on Changing a Child Support Order* (form FL-192) is attached.
10. Notice: If this form is attached to *Restraining Order After Hearing (CLETS-OAH) (Order of Protection)* (form DV-130), the orders issued on this form (FL-343) do not expire upon termination of the restraining orders issued on form DV-130.
11. Other orders (*specify*):

NOTICE: Any party required to pay support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent.

THIS IS A COURT ORDER.

SPOUSAL, PARTNER, OR FAMILY SUPPORT ORDER ATTACHMENT
(Family Law)

initials _____

PETITIONER: Pat Sample RESPONDENT: Sam Sample	CASE NUMBER: FL110572
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PROPERTY ORDER ATTACHMENT TO JUDGMENT

1. Division of community property assets

- a. There are no community property assets.
- b. The court finds that the net value of the community estate is less than \$5,000 and that the petitioner respondent cannot be found. Under Family Code section 2604, the entire community estate is awarded to the petitioner respondent.
- c. The petitioner will receive the following assets: *(Attach additional page if necessary.)*
1234 Main St., San Luis Obispo, CA 100% of CalPERS
Washer and Dryer
2008 Honda Accord
Bank of America Checking
- d. The respondent will receive the following assets: *(Attach additional page if necessary.)*
Living Room Furniture 100% of 401K
Television
2007 Ford F150
Bank of America Savings
- e. The petitioner respondent will be responsible for preparing and filing a *Qualified Domestic Relations Order (QDRO)* to divide the following plan or retirement account(s) *(specify)*:

The fee for preparation of the QDRO shall be shared as follows *(specify)*:

f. Other orders:

- g. Each spouse will receive the assets listed above as his or her sole and separate property. The parties must execute any and all documents required to carry out this division.
- h. The court reserves jurisdiction to divide any community assets not listed here and enforce the terms of this order.

2. Division of community property debts

- a. There are no community debts.
- b. All community debts have been paid by the petitioner respondent.
The petitioner respondent must reimburse the other party: \$
The payment plan is as follows:
- c. The petitioner will be responsible for the following debts: *(Attach additional page if necessary.)*
Bank of America Visa
- d. The respondent will be responsible for the following debts: *(Attach additional page if necessary.)*
Target Credit Card
Sears Credit Card
Master Card

initials _____

PETITIONER: Pat Sample RESPONDENT: Sam Sample	CASE NUMBER: FL110572
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e. Other orders:

f. Each party will be solely responsible for paying the debts assigned to him or her and will hold the other harmless from those debts. The parties understand that the creditors are not bound by this judgment. If a creditor seeks payment from the party who is not listed as responsible for the debt, that party can file a motion to seek reimbursement from the defaulting party.

g. The court reserves jurisdiction to divide any community debts not listed here.

3. **Equalization of division of property and debt orders.** To equalize the division of the community property assets and debts, the petitioner respondent must pay to the other the sum of: \$ _____, payable as follows (*specify*):

4. **Separate property**

a. The court confirms the following assets or debts as the sole separate property, or sole responsibility, of the petitioner:
2000 Ford Mustang

b. The court confirms the following assets or debts as the sole separate property, or sole responsibility, of the respondent:
1999 Toyota 4Runner

5. The settlement agreement between the parties dated (*date*): _____ is attached and made a part of this judgment.

6. **Sale of property.** The following property will be offered for sale and sold for the fair market value as soon as a willing buyer can be found, and the net proceeds from the sale will be divided equally other (*specify*):

7. Other orders (*specify*):

initials _____

Short Title: Sample and Sample

Case No.: FL110572

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ATTACHMENT 4o TO STIPULATED JUDGMENT

1. The parties agree that the Attachments to this Stipulated Judgment contain all the exact terms of the final judgment to be entered in this case. The attachments to this Stipulated Judgment are incorporated into the final judgment and the parties are ordered to comply with each attachment's provisions.

2. The parties acknowledge that they have initialed the bottom of each page of this Stipulated Judgment (FL-180) and attachments which consists of the following: Child Custody and Visitation (Parenting Time) Order Attachment (FL-341); Stipulation and Order for Custody and/or Visitation of Children (FL-355); Stipulation to Establish or Modify Child Support and Order (FL-350); Notice of Rights and Responsibilities (FL-192); Spousal, Partner, or Family Support Order Attachment (FL-343); Property Orders Attachment (FL-345) in addition to this page and the notary acknowledgement(s) contained on the succeeding page, and we each have signed this page in the presence of a notary public.

3. Under Family Code section 2105(d), the parties agree to waive the requirements of Family Code section 2105(a) concerning the final declaration of disclosure. The parties agree as follows:

- a.** We have complied with Family Code section 2104, and the preliminary declarations of disclosure have been completed and exchanged.
- b.** We have completed and exchanged a current Income and Expense Declaration (FL-150) that includes all material facts and information on each party's earnings, accumulations, and expenses.
- c.** We have fully complied with Family Code section 2102 and have fully augmented the preliminary declarations of disclosure, including disclosure of all material facts and information on the following: the characterization of all assets and liabilities; the valuation of all assets that are community property or in which the community has an interest; and the amounts of all community debts and obligations.
- d.** Each of the parties enters into this waiver knowingly, intelligently and voluntarily.

initials — —

Short Title: Sample and Sample

Case No.: FL110572

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e. Each party understands that this waiver does not limit the legal disclosure obligations of the parties but rather is a statement under penalty of perjury that those obligations have been fulfilled.

f. The parties also understand that if they do not comply with these obligations, the court will set aside the judgment.

4. The Petitioner and Respondent have agreed to all the issues in their case as reflected in the Stipulated Judgment. This Stipulated Judgment is entered into knowingly, voluntarily, and without duress by the Petitioner and the Respondent.

THE FOREGOING IS AGREED TO BY:

Dated: _____

Dated: _____

(Signature of Petitioner)

(Signature of Respondent)

(Print Name of Petitioner)

(Print Name of Respondent)

IT IS HEREBY ORDERED.

JUDGE OF THE SUPERIOR COURT

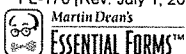
↑ Sign in front of a notary and attach notary page.

initials _____

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Pat Sample 1234 Main Street San Luis Obispo, CA 93401 TELEPHONE NO.: (805) 555-1234 FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): Petitioner in Pro Per	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF San Luis Obispo STREET ADDRESS: 1035 Palm Street, Room 385 MAILING ADDRESS: CITY AND ZIP CODE: San Luis Obispo, CA 93408 BRANCH NAME:	
PETITIONER: Pat Sample RESPONDENT: Sam Sample	
DECLARATION FOR DEFAULT OR UNCONTESTED <input checked="" type="checkbox"/> DISSOLUTION <input type="checkbox"/> LEGAL SEPARATION	CASE NUMBER: FL110572

(NOTE: Items 1 through 12 apply to both dissolution and legal separation proceedings.)

1. I declare that if I appeared in court and were sworn, I would testify to the truth of the facts in this declaration.
 2. I agree that my case will be proven by this declaration and that I will not appear before the court unless I am ordered by the court to do so.
 3. All the information in the amended *Petition* *Response* is true and correct.
 4. **Type of case (check a, b, or c):**
 - a. **Default without agreement**
 - (1) No response has been filed and there is no written agreement or stipulated judgment between the parties;
 - (2) The default of the respondent was entered or is being requested, and I am not seeking any relief not requested in the petition; and
 - (3) The following statement is true (check one):
 - (A) There are no assets or debts to be disposed of by the court.
 - (B) The community and quasi-community assets and debts are listed on the **completed** current *Property Declaration* (form FL-160), which includes an estimate of the value of the assets and debts that I propose to be distributed to each party. The division in the proposed *Judgment* (form FL-180) is a fair and equal division of the property and debts, or if there is a negative estate, the debts are assigned fairly and equitably.
 - b. **Default with agreement**
 - (1) No response has been filed and the parties have agreed that the matter may proceed as a default matter without notice; and
 - (2) The parties have entered into a written agreement regarding their property and their marriage or domestic partnership rights, including support, the original of which is being or has been submitted to the court. I request that the court approve the agreement.
 - c. **Uncontested**
 - (1) Both parties have appeared in the case; and
 - (2) The parties have entered into a written agreement regarding their property and their marriage or domestic partnership rights, including support, the original of which is being or has been submitted to the court. I request that the court approve the agreement.
- Choose 4b if FL-120 Response was not filed.
- Choose 4c if FL-120 Response was filed.
5. **Declaration of disclosure (check a, b, or c):**
 - a. Both the petitioner and respondent have filed, or are filing concurrently, a *Declaration Regarding Service of Declaration of Disclosure* (form FL-141) and an *Income and Expense Declaration* (form FL-150).
 - b. This matter is proceeding by default. I am the petitioner in this action and have filed a proof of service of the preliminary *Declaration of Disclosure* (form FL-140) with the court. I hereby waive receipt of the final *Declaration of Disclosure* (form FL-140) from the respondent.
 - c. This matter is proceeding as an uncontested action. Service of the final *Declaration of Disclosure* (form FL-140) is mutually waived by both parties. A waiver provision executed by both parties under penalty of perjury is contained on the *Stipulation and Waiver of Final Declaration of Disclosure* (form FL-144), in the settlement agreement or proposed judgment or another, separate stipulation.



PETITIONER: Pat Sample RESPONDENT: Sam Sample	CASE NUMBER: FL110572
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6. **Child custody and visitation (parenting time)** should be ordered as set forth in the proposed *Judgment* (form FL-180).
- a. The information in *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act* (UCCJEA) (form FL-105) has has not changed since it was last filed with the court. (If changed, attach updated form.)
- b. There is an existing court order for custody/parenting time in another case in (county):
The case number is (specify):
- c. The current custody and visitation (parenting time) previously ordered in this case, or current schedule is (specify):
 Contained on Attachment 6c.
The Respondent spends alternating weekends and Wednesday afternoons with the minor children.
- d. Facts in support of requested judgment (In a default case, state your reasons below):
 Contained on Attachment 6d.

7. **Child support** should be ordered as set forth in the proposed *Judgment* (form FL-180).
- a. If there are minor children, check and complete item (1) if applicable and item (2) or (3):
- (1) Child support is being enforced in another case in (county):
The case number is (specify):
- (2) The information in the child support calculation attached to the proposed judgment is correct based on my personal knowledge.
- (3) I request that this order be based on the petitioner's respondent's earning ability. The facts in support of my estimate of earning ability are (specify):
 Continued on Attachment 7a(3).

- b. Complete items (1) and (2) regarding public assistance.
- (1) I am receiving am not receiving intend to apply for public assistance for the child or children listed in the proposed order.
- (2) To the best of my knowledge, the other party is is not receiving public assistance.
- c. The petitioner respondent is presently receiving public assistance, and all support should be made payable to the local child support agency at the address set forth in the proposed judgment. A representative of the local child support agency has signed the proposed judgment.

8. **Spousal, Partner, and Family Support** (If a support order or attorney fees are requested, submit a completed Income and Expense Declaration (form FL-150) unless a current form is on file. Include your best estimate of the other party's income. Check at least one of the following.)

- a. I knowingly give up forever any right to receive spousal or partner support.
- b. I ask the court to reserve jurisdiction to award spousal or partner support in the future to (name):
- c. I ask the court to terminate forever spousal or partner support for: petitioner respondent.
- d. Spousal support or domestic partner support should be ordered as set forth in the proposed *Judgment* (form FL-180) based on the factors described in:
 Spousal or Partner Support Declaration Attachment (form FL-157)
 written agreement
 attached declaration (Attachment 8d.)
- e. Family support should be ordered as set forth in the proposed *Judgment* (form FL-180).
- f. Other (specify): **Spousal support should be ordered as set forth in the FL-343 Spousal, Partner, or Family Support Order Attachment to Judgment (form FL-180).**

PETITIONER: Pat Sample RESPONDENT: Sam Sample	CASE NUMBER: FL110572
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9. **Parentage** of the children of the petitioner and respondent born prior to their marriage or domestic partnership should be ordered as set forth in the proposed *Judgment* (form FL-180).
- a. A Voluntary Declaration of Paternity is attached.
- b. Parentage was previously established by the court in (*county*):
 The case number is (*specify*):
 Written agreement of the parties attached here or to the *Judgment* (form FL-180).
10. **Attorney fees** should be ordered as set forth in the proposed *Judgment* (form FL-180)
 facts in support in form FL-319
 other (*specify facts below*):
11. The judgment should be entered nunc pro tunc for the following reasons (*specify*):
12. The petitioner respondent requests restoration of his or her former name as set forth in the proposed *Judgment* (form FL-180).
13. There are irreconcilable differences that have led to the irremediable breakdown of the marriage or domestic partnership, and there is no possibility of saving the marriage or domestic partnership through counseling or other means.
14. This declaration may be reviewed by a commissioner sitting as a temporary judge, who may determine whether to grant this request or require my appearance under Family Code section 2336.

STATEMENTS IN THIS BOX APPLY ONLY TO DISSOLUTIONS

15. If this is a dissolution of marriage or of a domestic partnership created in another state, the petitioner and/or the respondent have been residents of this county for at least three months and of the state of California for at least six months continuously and immediately preceding the date of the filing of the petition for dissolution of marriage or domestic partnership.
16. I ask that the court grant the request for a judgment for dissolution of marriage or domestic partnership based on irreconcilable differences and that the court make the orders set forth in the proposed *Judgment* (form FL-180) submitted with this declaration.
17. This declaration is for the termination of **marital or domestic partner status only**. I ask the court to reserve jurisdiction over all issues whose determination is not requested in this declaration.

THIS STATEMENT APPLIES ONLY TO LEGAL SEPARATIONS

18. I ask that the court grant the request for a judgment for legal separation based on irreconcilable differences and that the court make the orders set forth in the proposed *Judgment* (form FL-180) submitted with this declaration.
- I understand that a judgment of legal separation does not terminate a marriage or domestic partnership and that I am still married or a partner in a domestic partnership.**

19. Other (*specify*):

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

Date: **7/18/2011**

Pat Sample _____
(TYPE OR PRINT NAME)

▶ *Pat Sample* _____
(SIGNATURE OF DECLARANT)

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Sam Sample 333 Oak Street San Luis Obispo, CA 93401 TELEPHONE NO.: (805) 239-9999 FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): Respondent in Pro Per	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF San Luis Obispo STREET ADDRESS: 1035 Palm Street, Room 385 MAILING ADDRESS: CITY AND ZIP CODE: San Luis Obispo, CA 93408 BRANCH NAME:	
PETITIONER: Pat Sample RESPONDENT: Sam Sample	
APPEARANCE, STIPULATIONS, AND WAIVERS	CASE NUMBER: FL110572

1. **Appearance by respondent (you must choose one):**
 - a. By filing this form, I make a general appearance.
 - b. I have previously made a general appearance.
 - c. I am a member of the military services of the United States of America. I have completed and attached to this form *Declaration and Conditional Waiver of Rights Under the Servicemembers Civil Relief Act of 2003 (form FL-130(A))*.

2. **Agreements, stipulations, and waivers (choose all that apply):**
 - a. The parties agree that this cause may be decided as an uncontested matter.
 - b. The parties waive their rights to notice of trial, a statement of decision, a motion for new trial, and the right to appeal.
 - c. This matter may be decided by a commissioner sitting as a temporary judge.
 - d. The parties have a written agreement that will be submitted to the court, or a stipulation for judgment will be submitted to the court and attached to *Judgment (Family Law)* (form FL-180).
 - e. None of these agreements or waivers will apply unless the court approves the stipulation for judgment or incorporates the written settlement agreement into the judgment.
 - f. This is a parentage case, and both parties have signed an *Advisement and Waiver of Rights Re: Establishment of Parental Relationship* (form FL-235) or its equivalent.

3. **Other (specify):**

Date: **7/18/2011**

Pat Sample _____
(TYPE OR PRINT NAME)

▶ **Pat Sample** _____
(SIGNATURE OF PETITIONER)

Date: **7/18/2011**

Sam Sample _____
(TYPE OR PRINT NAME)

▶ **Sam Sample** _____
(SIGNATURE OF RESPONDENT)

Date:

(TYPE OR PRINT NAME)

▶ _____
(SIGNATURE OF ATTORNEY FOR PETITIONER)

Date:

(TYPE OR PRINT NAME)

▶ _____
(SIGNATURE OF ATTORNEY FOR RESPONDENT)



ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Pat Sample 1234 Main Street San Luis Obispo, CA 93401 TELEPHONE NO.: (805) 555-1234 FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): Petitioner in Pro Per	COURT PERSONNEL: STAMP DATE RECEIVED HERE DO NOT FILE
SUPERIOR COURT OF CALIFORNIA, COUNTY OF San Luis Obispo STREET ADDRESS: 1035 Palm Street, Room 385 MAILING ADDRESS: CITY AND ZIP CODE: San Luis Obispo, CA 93408 BRANCH NAME:	
PETITIONER/PLAINTIFF: Pat Sample RESPONDENT/DEFENDANT: Sam Sample OTHER PARENT:	
CHILD SUPPORT CASE REGISTRY FORM <input checked="" type="checkbox"/> Mother <input checked="" type="checkbox"/> First form completed <input type="checkbox"/> Father <input type="checkbox"/> Change to previous information	CASE NUMBER: FL110572

THIS FORM WILL NOT BE PLACED IN THE COURT FILE. IT WILL BE MAINTAINED IN A CONFIDENTIAL FILE WITH THE STATE OF CALIFORNIA.

Notice: Pages 1 and 2 of this form must be completed and delivered to the court along with the court order for support. Pages 3 and 4 are instructional only and do not need to be delivered to the court. If you did not file the court order, you must complete this form and deliver it to the court within 10 days of the date on which you received a copy of the support order. Any later change to the information on this form must be delivered to the court on another form within 10 days of the change. It is important that you keep the court informed in writing of any changes of your address and telephone number.

1. Support order information (this information is on the court order you are filing or have received).
 - a. Date order filed:
 - b. Initial child support or family support order Modification
 - c. Total monthly base current child or family support amount ordered for children listed below, plus any monthly amount ordered payable on past-due support:

<u>Child Support:</u> (1) <input checked="" type="checkbox"/> Current \$ 1,617.00 base child support: <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order (2) <input type="checkbox"/> Additional monthly support: \$ (3) <input type="checkbox"/> Total past-due support: \$ (4) <input type="checkbox"/> Payment on past-due support: \$ (5) <input checked="" type="checkbox"/> Wage withholding was <input checked="" type="checkbox"/> ordered <input type="checkbox"/> ordered but stayed until (date) :	<u>Family Support:</u> <input type="checkbox"/> Current \$ base family support: <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order <input type="checkbox"/> Additional monthly support: \$ <input type="checkbox"/> Total past-due support: \$ <input type="checkbox"/> Payment on past-due support: \$	<u>Spousal Support:</u> <input checked="" type="checkbox"/> Current \$ 407.00 spousal support: <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order <input type="checkbox"/> Total past-due support: \$ <input type="checkbox"/> Payment on past-due support: \$
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2. Person required to pay child or family support (name): **Sam Sample**
 Relationship to child (specify): **Father**
3. Person or agency to receive child or family support payments (name): **Pat Sample**
 Relationship to child (if applicable): **Mother**

TYPE OR PRINT IN INK

PETITIONER/PLAINTIFF: Pat Sample RESPONDENT/DEFENDANT: Sam Sample OTHER PARENT:	CASE NUMBER: FL110572
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4. The child support order is for the following children:

Child's name	Date of birth	Social security number
a. Chad Sample	1/2/05	555-55-5555
b. Cindy Sample	5/2/10	777-77-7777
c.		

Additional children are listed on a page attached to this document.

You are required to complete the following information about yourself. You are not required to provide information about the other person, but you are encouraged to provide as much as you can. This form is confidential and will not be filed in the court file. It will be maintained in a confidential file with the State of California.

5. Father's name: **Sam Sample**

- a. Date of birth: **12/7/64**
- b. Social security number: **522-22-2222**
- c. Street address: **333 Oak Street**

City, state, zip code: **San Luis Obispo, CA 93401**

d. Mailing address: **Same as above**

City, state, zip code: **Same as above**

- e. Driver's license number: **Unknown**
State: **CA**
- f. Telephone number: **(805) 239-9999**
- g. Employed Not employed Self-employed
Employer's name: **ABC Electrical**

Street address: **777 Elm Street**

City, state, zip code: **Anytown, CA 93401**

Telephone number: **(805) 444-2222**

6. Mother's name: **Pat Sample**

- a. Date of birth: **4/7/69**
- b. Social security number: **533-33-3333**
- c. Street address: **1234 Main Street**

City, state, zip code: **San Luis Obispo, CA 93401**

d. Mailing address: **Same as above**

City, state, zip code: **Same as above**

- e. Driver's license number: **C923576**
State: **CA**
- f. Telephone number: **(805)237-5555**
- g. Employed Not employed Self-employed
Employer's name: **Costco**

Street address: **7600 Higuera Street**

City, state, zip code: **San Luis Obispo, CA 93401**

Telephone number: **(805) 333-5555**

7. A restraining order, protective order, or nondisclosure order due to domestic violence is in effect.

- a. The order protects: Father Mother Children
- b. From: Father Mother
- c. The restraining order expires on (date) :

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

Date: **7/18/11**

Pat Sample
(TYPE OR PRINT NAME)

Pat Sample
(SIGNATURE OF PERSON COMPLETING THIS FORM)

Employer's Name: ABC Electrical Employer FEIN: _____
 Employee/Obligor's Name: Sam Sample SSN: _____
 Case Identifier: _____ Order Identifier: FL110572

REMITTANCE INFORMATION: If the employee/obligor's principal place of employment is California (State/Tribe), you must begin withholding no later than the first pay period that occurs 10 days after the date of Receipt. Send payment within 7 business days of the pay date. If you cannot withhold the full amount of support for any or all orders for this employee/obligor, withhold 50 % of disposable income for all orders. If the obligor is a non-employee, obtain withholding limits from Supplemental Information. If the employee/obligor's principal place of employment is not California (State/Tribe), obtain withholding limitations, time requirements, and any allowable employer fees from the jurisdiction of the employee/obligor's principal place of employment. State-specific withholding limit information is available at www.acf.hhs.gov/css/resource/state-income-withholding-contacts-and-program-requirements. For tribe-specific contacts, payment addresses, and withholding limitations, please contact the tribe at www.acf.hhs.gov/sites/default/files/programs/css/tribal_agency_contacts_printable_pdf.pdf or https://www.bia.gov/tribalmap/DataDotGovSamples/tld_map.html.

For electronic payment requirements and centralized payment collection and disbursement facility information [State Disbursement Unit (SDU)], see www.acf.hhs.gov/css/employers/employer-responsibilities/payments.

Include the Remittance ID with the payment and if necessary this locator code: _____

Remit payment to at	<u>California State Disbursement Unit</u> <u>P.O. Box 989067, West Sacramento, CA 95798-9067</u>	(SDU/Tribal Order Payee) (SDU/Tribal Payee Address)
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Return to Sender (Completed by Employer/Income Withholder). Payment must be directed to an SDU in accordance with sections 466(b)(5) and (6) of the Social Security Act or Tribal Payee (see Payments to SDU below). If payment is not directed to an SDU/Tribal Payee or this IWO is not regular on its face, you *must* check this box and return the IWO to the sender.

If Required by State or Tribal Law: Signature of Judge/Issuing Official: _____ Print Name of Judge/Issuing Official: <u>E. Jeffrey Burke</u> Title of Judge/Issuing Official: <u>Judge of the Superior Court</u> Date of Signature: _____

If the employee/obligor works in a state or for a tribe that is different from the state or tribe that issued this order, a copy of this IWO must be provided to the employee/obligor.

If checked, the employer/income withholder must provide a copy of this form to the employer/obligor.

ADDITIONAL INFORMATION FOR EMPLOYERS/INCOME WITHHOLDERS

State-specific contact and withholding information can be found on the Federal Employer Services website located at www.acf.hhs.gov/css/resource/state-income-withholding-contacts-and-program-requirements.

Employers/income withholders may use OCSE's Child Support Portal (<https://ocsp.acf.hhs.gov/csp/>) to provide information about employees who are eligible to receive a lump sum payment, have terminated employment, and to provide contacts, addresses, and other information about their company.

Priority: Withholding for support has priority over any other legal process under State law against the same income (section 466(b)(7) of the Social Security Act). If a federal tax levy is in effect, please notify the sender.

Combining Payments: When remitting payments to an SDU or tribal CSE agency, you may combine withheld amounts from more than one employee/obligor's income in a single payment. You must, however, separately identify each employee/obligor's portion of the payment.

Payments to SDU: You must send child support payments payable by income withholding to the appropriate SDU or to a tribal CSE agency. If this IWO instructs you to send a payment to an entity other than an SDU (e.g., payable to the custodial party, court, or attorney), you must check the box above and return this notice to the sender. Exception: If this IWO was sent by a court, attorney, or private individual/entity and the initial order was entered before January 1, 1994 or the order was issued by a tribal CSE agency, you must follow the "Remit payment to" instructions on this form.

Employer's Name: ABC Electrical Employer FEIN: _____
Employee/Obligor's Name: Sam Sample SSN: _____
Case Identifier: _____ Order Identifier: FL110572

Reporting the Pay Date: You must report the pay date when sending the payment. The pay date is the date on which the amount was withheld from the employee/obligor's wages. You must comply with the law of the state (or tribal law if applicable) of the employee/obligor's principal place of employment regarding time periods within which you must implement the withholding and forward the support payments.

Multiple IWOs: If there is more than one IWO against this employee/obligor and you are unable to fully honor all IWOs due to federal, state, or tribal withholding limits, you must honor all IWOs to the greatest extent possible, giving priority to current support before payment of any past-due support. Follow the state or tribal law/procedure of the employee/obligor's principal place of employment to determine the appropriate allocation method.

Lump Sum Payments: You may be required to notify a state or tribal CSE agency of upcoming lump sum payments to this employee/obligor such as bonuses, commissions, or severance pay. Contact the sender to determine if you are required to report and/or withhold lump sum payments.

Liability: If you have any doubts about the validity of this IWO, contact the sender. If you fail to withhold income from the employee/obligor's income as the IWO directs, you are liable for both the accumulated amount you should have withheld and any penalties set by state or tribal law/procedure.

Anti-discrimination: You are subject to a fine determined under state or tribal law for discharging an employee/obligor from employment, refusing to employ, or taking disciplinary action against an employee/obligor because of this IWO.

Withholding Limits: You may not withhold more than the lesser of: 1) the amounts allowed by the Federal Consumer Credit Protection Act (CCPA) [15 USC §1673(b)]; or 2) the amounts allowed by the law of the state of the employee/obligor's principal place of employment, if the place of employment is in a state; or the tribal law of the employee/obligor's principal place of employment if the place of employment is under tribal jurisdiction. Disposable income is the net income after mandatory deductions such as: state, federal, local taxes; Social Security taxes; statutory pension contributions; and Medicare taxes. The federal limit is 50% of the disposable income if the obligor is supporting another family and 60% of the disposable income if the obligor is not supporting another family. However, those limits increase 5% --to 55% and 65% --if the arrears are greater than 12 weeks. If permitted by the state or tribe, you may deduct a fee for administrative costs. The combined support amount and fee may not exceed the limit indicated in this section.

Depending upon applicable state or tribal law, you may need to consider amounts paid for health care premiums in determining disposable income and applying appropriate withholding limits.

Arrears Greater Than 12 Weeks? If the **Order Information** section does not indicate that the arrears are greater than 12 weeks, then the employer should calculate the CCPA limit using the lower percentage.

Supplemental Information:

Employer's Name: ABC Electrical Employer FEIN: _____
 Employee/Obligor's Name: Sam Sample SSN: _____
 Case Identifier: _____ Order Identifier: FL110572

NOTIFICATION OF EMPLOYMENT TERMINATION OR INCOME STATUS: If this employee/obligor never worked for you or you are no longer withholding income for this employee/obligor, you must promptly notify the CSE agency and/or the sender by returning this form to the address listed in the contact information below:

- This person has never worked for this employer nor received periodic income.
- This person no longer works for this employer nor receives periodic income.

Please provide the following information for the employee/obligor:

Termination date: _____ Last known telephone number: _____

Last known address: _____

Final payment date to SDU/Tribal Payee: _____ Final payment amount: _____

New employer's name: _____

New employer's address: _____

CONTACT INFORMATION:

To Employer/Income Withholder: If you have questions, contact Pat Sample (issuer name)
 by telephone: (805) 555-1234, by fax: _____, by email or website: _____

Send termination/income status notice and other correspondence to:
Pat Sample 1234 Main Street, San Luis Obispo, CA 93401 (issuer address).

To Employee/Obligor: If the employee/obligor has questions, contact State Disbursement Unit (issuer name)
 by telephone: (866) 325-1010, by fax: _____, by email or website: www.casdu.com

IMPORTANT: The person completing this form is advised that the information may be shared with the employee/obligor.

Encryption Requirements:

When communicating this form through electronic transmission, precautions must be taken to ensure the security of the data. Child support agencies are encouraged to use the electronic applications provided by the federal Office of Child Support Enforcement. Other electronic means, such as encrypted attachments to emails, may be used if the encryption method is compliant with Federal Information Processing Standard (FIPS) Publication 140-2 (FIPS PUB 140-2).

The Paperwork Reduction Act of 1995

This information collection and associated responses are conducted in accordance with 45 CFR 303.100 of the Child Support Enforcement Program. This form is designed to provide uniformity and standardization. Public reporting for this collection of information is estimated to average two to five minutes per response. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.