

ATTORNEY OR PARTY WITHOUT ATTORNEY OR GOVERNMENTAL AGENCY ( <i>under Family Code, §§ 17400, 17406</i> ) (Name, State Bar number, and address):       TELEPHONE NO.: _____ FAX NO. ( <i>Optional</i> ): _____ E-MAIL ADDRESS ( <i>Optional</i> ): _____ ATTORNEY FOR ( <i>Name</i> ): _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b>  STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	
<b>RESPONSE TO NOTICE OF MOTION TO SET ASIDE JUDGMENT OF PATERNITY</b>	
HEARING DATE: _____ TIME: _____ DEPT., ROOM, OR DIVISION: _____	CASE NUMBER: _____

1. My position on the facts regarding paternity as alleged in the motion to set aside the judgment and voluntary declaration of paternity, if a declaration was filed regarding the following children, is:

		<u>Name of child</u>	<u>Date of birth</u>
a.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	
b.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	
c.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	
d.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	
e.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	
f.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	
g.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	
h.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	
i.	<input type="checkbox"/> Additional children are listed on a page attached to this response.		

2. My position on genetic testing of each of the following children is:

		<u>Name of child</u>	<u>Date of birth</u>
a.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	
b.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	
c.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	
d.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	
e.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	
f.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	
g.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	
h.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	
i.	<input type="checkbox"/> Additional children are listed on a page attached to this response.		

3. I  agree  disagree with the request to appoint a guardian ad litem for each of the children subject to this request.

4.  The motion is not complete because (*specify*):

5.  The motion is not timely because (*specify*):

6.  The motion is not proper because (*specify*):

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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7.  The facts in support of this response are:
- a.  The paternity judgment resulted from a marital dissolution, legal separation, or nullity action.
  - b.  The marriage presumption contained in Family Code section 7540 applies.
  - c.  The paternity judgment was not issued in California.
  - d.  There is another California judgment of paternity in a different case for the same previously established father and child.
  - e.  There is a voluntary declaration of paternity, and there is no basis to set it aside.
  - f.  Genetic tests were conducted before the judgment that indicated the previously established father is the biological father of the child.
  - g.  The paternity judgment is based on an adoption.
  - h.  The child was conceived by artificial insemination, and the paternity judgment is based on Family Code section 7613.
  - i.  The child was conceived under a surrogacy agreement.
  - j.  The motion is not in the best interest of the child because (*specify*):
  
  - k.  Other (*specify*):


Contained in the attached declaration.

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

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

Date:

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

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

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

**PROOF OF SERVICE BY MAIL**

1. I am at least 18 years of age, not a party to this case, and a resident of, or an employee in, the county where the mailing took place.
2. My residence or business address is (*specify*):
  
3. I served a copy of this response by enclosing it in a sealed envelope with first-class postage fully prepaid and depositing it in the United States mail as follows:
  - a. Date of deposit:
  - b. Addressed as follows:
  - c. Place of deposit (*city and state*):

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

Date:

\_\_\_\_\_

(TYPE OR PRINT NAME)

▲  
\_\_\_\_\_

(SIGNATURE OF DECLARANT)