GOVERNMENTAL AGENCY (under Family Code, §§ 17400,17406):	FOR COURT USE ONLY
TELEPHONE NO.:	
E MAIL ADDDESO (Orfice)	
E-MAIL ADDRESS (Optional): FAX NO. (Optional): ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
STREET ADDRESS:	
• • • • • • • • • • • • • • • • • • • •	
MAILING ADDRESS:	
CITY AND ZIP CODE:	
BRANCH NAME:	
PETITIONER/PLAINTIFF:	
RESPONDENT/DEFENDANT:	
OTHER PARENT:	
NOTICE OF ENTRY OF JUDGMENT AND PROOF OF SERVICE BY MAIL	CASE NUMBER:
 You are notified that the following judgment was entered on (date): Default taken and proposed judgment entered under Family Code section 17430 Judgment Regarding Parental Obligations (form FL-630) Other (specify): 	
A copy of each document referred to in item 1 is attached.	
NOTICE If the local child support agency does not know how much money the Obligor (the parent who is required to pay support) earns, the Obligor is presumed to earn the minimum wage, at 40 hours per week, as provided by state law.	
If the support order contained in this judgment is based on presumed income, the Obligor may file a motion (form FL-640), a copy of which may be obtained from the local child support agency, the family law facilitator's office, or the court clerk, and ask the court to set aside the child support provisions of the judgment. If the court decides to set aside the support order, the court will issue another support order based on the Obligor's actual income or earning capacity. The Obligor must file the motion with the court clerk within one year from the date the first collection of support is made.	
PROOF OF SERVICE BY MAI	L
 3. I am at least 18 years of age, not a party to this cause, and a resident of or employed in the county where the mailing took place. 4. My residence or business address is (specify): 	
 I served a copy of this notice of entry and referenced documents by enclosing them in a sealed envelope and depositing the envelope directly in the United States mail with postage prepaid OR at my place of business for same-day collection and mailing with the United States mail, following our ordinary business practices with which I am readily familiar. a. Date of deposit: b. Place of deposit (city and state): c. Addressed as follows: 	
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I declare under penalty of perjury under the laws of the State of California that the f Date:	oregoing is true and correct.
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(TVDE OD DDINT NAME)	(SIGNATI IDE OF DECLADANT)
(TYPE OR PRINT NAME)	(SIGNATURE OF DECLARANT) Page 1 of 1