

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, State Bar number, and address):</i>  <hr/>  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:	
CHILDREN'S NAMES:	
<b>ORDER TO APPEAR FOR FINANCIAL EVALUATION</b>	CASE NUMBER:

1. To *(name)*:  
 The court has determined that you are a person liable under Welfare and Institutions Code section 903.1 for the support of the children named above. You must appear before *(name of financial evaluation officer)*:  
 at *(address)*: \_\_\_\_\_ for an evaluation of your ability to repay all or part of the cost of legal services provided to the children or directly to you in the children's dependency proceeding
  - a.  Between the hours of *(time)*: \_\_\_\_\_ and \_\_\_\_\_, Monday through Friday, on or before *(date)*: \_\_\_\_\_.  
 You may call *(telephone number)*: \_\_\_\_\_ to make an appointment.
  - b.  Your appointment has been set at *(time)*: \_\_\_\_\_ on *(date)*: \_\_\_\_\_.
  
2. You must bring with you to the financial evaluation:
  - a.  A completed copy of the *Financial Declaration—Juvenile Dependency* (form JV-132);
  - b.  Documentation of all household income and assets listed on your *Financial Declaration—Juvenile Dependency* (form JV-132)—including pay stubs, bank statements, proof of public assistance, and any other records; and
  - c.  Documentation of household expenses.—including rental agreements, mortgage or credit card statements, utility bills, records of car or insurance payments, and any other records.

**NOTICE**

A. You have the right to a written statement of the cost of legal services for which you are liable as soon as it is available.

B. You have the right to dispute the financial evaluation officer's determination of your ability to pay all or part of that cost.

C. You have the right, in the event of a dispute, to a hearing before the juvenile court to determine your liability for the cost, the amount of the cost, your ability to pay the cost, or the terms of payment.

D. You have the right, in the event of a hearing:

1. To be heard in person, to present witnesses and other evidence, and to confront and cross-examine adverse witnesses;
2. To examine the evidence presented against you;
3. To be represented by counsel and, when unable to afford counsel, to have counsel appointed; and
4. To receive a written statement of the court's findings and orders.

E. **WARNING:** If you do not appear for the financial evaluation or respond to this order within the time limit set in item 1, the financial evaluation officer will recommend that the court order you to repay the full cost of any legal services provided in this case directly to you or to the children named above, and the officer's recommendation by itself will be enough to allow the court to order you to pay up the full cost.

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

\_\_\_\_\_  
JUDICIAL OFFICER