

SAMPLES

START DISSO AND REQUEST FOR ORDER, C/V

Rev. 8/27/2012

**Use the samples to help you complete
the packet of blank forms.**

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):

YOUR NAME
YOUR ADDRESS

TELEPHONE NO.: _____ FAX NO. (Optional): _____

E-MAIL ADDRESS (Optional): _____

ATTORNEY FOR (Name): _____

FOR COURT USE ONLY

SAMPLE ONLY

Do not write on this copy!

CASE NUMBER: **LEAVE BLANK**

SUPERIOR COURT OF CALIFORNIA, COUNTY OF _____

STREET ADDRESS: _____

MAILING ADDRESS: _____

CITY AND ZIP CODE: _____

BRANCH NAME: _____

ASK STAFF TO STAMP FORM WITH CORRECT ADDRESS

PETITIONER/PLAINTIFF: YOUR NAME

RESPONDENT/DEFENDANT: YOUR HUSBAND/WIFE'S NAME

OTHER PARENT/PARTY: _____

REQUEST FOR ORDER **MODIFICATION** **Temporary Emergency Order**

Child Custody and Visitation **Child Support** **Attorney Fees and Costs**

CHECK ALL THE BOXES THAT APPLY (specify):

1. TO (name): **OTHER PARTY'S NAME** (also put DCSS if they are involved with child support issues)
2. A hearing on this Request for Order will be held as follows: **If child custody or visitation is an issue in this proceeding, Family Code section 3170 requires mediation before or at the same time as the hearing (see item 7.)**

a. Date: _____ Time: _____ Dept.: _____ Room.: _____

b. Address of court same as noted above other (specify): **SAME AS STREET ADDRESS ABOVE**

CHECK IF OTHER FORMS ARE ATTACHED

3. Attachments to be served with this Request for Order:
- a. A blank Responsive Declaration (form FL-320)
- b. Completed Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration
- c. Completed Financial Statement (Simplified) (form FL-155) and a blank Financial Statement (Simplified)
- d. Points and authorities
- e. Other (specify): **FL-311, FL-110, FL-100, FL-105, FM-1021**

Date: **TODAY'S DATE** **PRINT YOUR NAME HERE** **SIGN YOUR NAME HERE**

(TYPE OR PRINT NAME) (SIGNATURE)

COURT ORDER

4. YOU ARE ORDERED TO APPEAR IN COURT AT THE DATE AND TIME LISTED IN ITEM 2 TO GIVE ANY LEGAL REASON WHY THE ORDERS REQUESTED SHOULD NOT BE GRANTED. 16 COURT DAYS BEFORE YOUR
5. Time for service hearing is shortened. Service must be on or before (date): HEARING DATE
6. Any responsive declaration must be served on or before (date): 9 COURT DAYS BEFORE HEARING DATE
7. The parties are ordered to attend mandatory custody services as follows:
BOTH PARTIES ARE ORDERED TO ATTEND ORIENTATION AND MEDIATION THROUGH FAMILY COURT SERVICES (408-534-5760).
8. You are ordered to comply with the Temporary Emergency Court Orders (form FL-305) attached.
9. Other (specify): _____
- Date: **LEAVE BLANK** **LEAVE BLANK**
- JUDICIAL OFFICER

To the person who received this Request for Order: If you wish to respond to this Request for Order, you must file a Responsive Declaration to Request for Order (form FL-320) and serve a copy on the other parties at least nine court days before the hearing date unless the court has ordered a shorter period of time. You do not have to pay a filing fee to file the Responsive Declaration to Request for Order (form FL-320) or any other declaration including an Income and Expense Declaration (form FL-150) or Financial Statement (Simplified) (form FL-155).

PETITIONER/PLAINTIFF: YOUR NAME RESPONDENT/DEFENDANT: YOUR HUSBAND/WIFE'S NAME OTHER PARENT/PARTY:	CASE NUMBER: <div style="border: 1px solid black; padding: 5px; display: inline-block;">LEAVE BLANK</div>
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REQUEST FOR ORDER AND SUPPORTING DECLARATION

Petitioner **Respondent** **Other Parent/Party** requests the following orders:

1. **CHILD CUSTODY** **To be ordered pending the hearing**
- a. Child's name and age b. Legal custody to (name of person who makes decisions about health, education, etc.) c. Physical custody to (name of person with whom child will live)

CHILD #1'S NAME, AGE
 CHILD #2'S NAME, AGE
 CHILD #3'S NAME, AGE

SEE ATTACHED FL-311

- d. As requested in form *Child Custody and Visitation Application Attachment* (form FL-311)
 Request for Child Abduction Prevention Orders (form FL-312)
 Children's Holiday Schedule Attachment (form FL-341(C))
 Additional Provisions—Physical Custody Attachment (form FL-341(D))
 Joint Legal Custody Attachment (form FL-341(E))
 Other (Attachment 1d)

- e. **Modify existing order**
 (1) filed on (date):
 (2) ordering (specify):

2. **CHILD VISITATION (PARENTING TIME)** **To be ordered pending the hearing**
- a. As requested in: (1) Attachment 2a (2) *Child Custody and Visitation Application Attachment* (form FL-311)
 (3) Other (specify):

- b. **Modify existing order**
 (1) filed on (date):
 (2) ordering (specify):

- c. **One or more d. IF THERE ARE ANY RESTRAINING ORDERS BETWEEN YOU AND THE OTHER PARENT, CHECK BOX 2c AND COMPLETE THIS SECTION.** you
 have one.) The
- | | |
|---|---|
| (1) <input type="checkbox"/> Criminal: County/state: Case No. (if known): | (3) <input type="checkbox"/> Juvenile: County/state: Case No. (if known): |
| (2) <input type="checkbox"/> Family: County/state: Case No. (if known): | (4) <input type="checkbox"/> Other: County/state: Case No. (if known): |

3. **CHILD SUPPORT (An earnings a COMPLETE ITEM 3 IF YOU ARE ASKING FOR CHILD SUPPORT ORDERS**

- a. Child's name and age b. I request support based on the child support guidelines c. Monthly amount requested (if not by guideline) \$

CHILD #1'S NAME, AGE
 CHILD #2'S NAME, AGE
 CHILD #3'S NAME, AGE

- d. **Modify existing order** IF YOU ARE ASKING TO CHANGE AN EXISTING ORDER, CHECK BOX 3d AND FILL IN THE AMOUNT OF YOUR CURRENT CHILD SUPPORT ORDER.
 (1) filed on (date):
 (2) ordering (specify):

Notice: The court is required to order child support based on the income of both parents. It normally continues until the child is 18. You must supply the court with information about your finances by filing an *Income and Expense Declaration* (form FL-150) or a *Financial Statement (Simplified)* (form FL-155). Otherwise, the child support order will be based on information about your income that the court receives from other sources, including the other parent.

PETITIONER/PLAINTIFF: YOUR NAME RESPONDENT/DEFENDANT: YOUR HUSBAND/WIFE'S NAME OTHER PARENT/PARTY:	CASE NUMBER: <div style="border: 1px solid black; padding: 5px; text-align: center; width: 100%;">LEAVE BLANK</div>
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4. SPOUSAL ORDER COMPLETE ITEM 4 IF YOU ARE ASKING FOR SPOUSAL SUPPORT ORDERS

- a. Amount requested (monthly): \$ _____
- b. Terminate existing order (1) filed on (date): _____ (2) ordering (specify): _____
- c. Modify existing order (1) filed on (date): _____
- d. The *Spousal or Partner Support Declaration Attachment* (form FL-157) is attached (for modification of spousal or partner support after judgment only)
- e. An *Income and Expense Declaration* (form FL-150) must be attached

IF YOU ARE ASKING TO CHANGE AN EXISTING ORDER, CHECK BOX 4C AND FILL IN THE AMOUNT OF YOUR CURRENT SPOUSAL SUPPORT ORDER.

5. ATTORNEY FEES AND COSTS are requested on *Request for Attorney Fees and Costs Order Attachment* (form FL-319) or a declaration that addresses the factors covered in that form. An *Income and Expense Declaration* (form FL-150) must be attached. A *Supporting Declaration for Attorney Fees and Costs Order Attachment* (form FL-158) or a declaration that addresses the factors covered in that form must also be attached.

6. PROPERTY RESTRAINT To be ordered pending the hearing
- a. The petitioner respondent claimant is restrained from transferring, encumbering, hypothecating, concealing, or in any way disposing of any property, real or personal, whether community, quasi-community, or separate, except in the usual course of business or for the necessities of life.
 - The applicant will be notified at least five business days before any proposed extraordinary expenditures, and an accounting of such will be made to the court.
 - b. Both parties are restrained and enjoined from cashing, borrowing against, canceling, transferring, disposing of, or changing the beneficiaries of any insurance or other coverage, including life, health, automobile, and disability, held for the benefit of the parties or their minor children.
 - c. Neither party may incur any debts or liabilities for which the other may be held responsible, other than in the ordinary course of business or for the necessities of life.

7. PROPERTY CONTROL To be ordered pending the hearing
- a. The petitioner respondent is given the exclusive temporary use, possession, and control of the following property that we own or are buying (specify): _____
 - b. The petitioner respondent is ordered to make the following payments on liens and encumbrances coming due while the order is in effect:

<u>Debt</u>	<u>Amount of payment</u>	<u>Pay to</u>

8. OTHER RELIEF (specify): _____

CHECK WITH STAFF BEFORE WRITING ANYTHING HERE

NOTE: To obtain domestic violence restraining orders, you must use the forms *Request for Order (Domestic Violence Prevention)* (form DV-100), *Temporary Restraining Order (Domestic Violence)* (form DV-110), and *Notice of Court Hearing (Domestic Violence)* (form DV-109).

PETITIONER/PLAINTIFF: YOUR NAME RESPONDENT/DEFENDANT: YOUR HUSBAND/WIFE'S NAME OTHER PARENT/PARTY:	CASE NUMBER: <div style="border: 1px solid black; padding: 5px; text-align: center; width: 100%;">LEAVE BLANK</div>
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9. I request that time for service of the *Request for Order* and accompanying papers be shortened so that these documents may be served no less than (*specify number*): _____ days before the time set for the hearing. I need to have this order shortening time because of the facts specified in item 10 or the attached declaration.
10. FACTS IN SUPPORT of orders requested and change of circumstances for any modification are (*specify*):
 Contained in the attached declaration. (*You may use Attached Declaration (form MC-031) for this purpose. The attached declaration must not exceed 10 pages in length unless permission to file a longer declaration has been obtained from the court.*)

EXPLAIN WHY THE ORDERS YOU ARE REQUESTING ARE IN THE BEST INTEREST OF THE CHILD.

FOR EXAMPLE, IF YOU WANT THE COURT TO GIVE YOU PHYSICAL CUSTODY, YOU NEED TO EXPLAIN HERE WHY THE CHILD IS BETTER OFF LIVING WITH YOU INSTEAD OF THE OTHER PARENT.

IF YOU ARE ASKING THE COURT TO ORDER PARENTING TIME (VISITATION) FOR EITHER YOU OR THE OTHER PARENT, EXPLAIN WHY THE SCHEDULE YOU ARE REQUESTING IS IN THE BEST INTEREST OF THE CHILD. IF YOU ARE ASKING THE COURT TO STOP THE OTHER PARENT'S PARENTING TIME, EXPLAIN SPECIFIC REASONS WHY.

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

Date: TODAY'S DATE

PRINT YOUR NAME HERE

(TYPE OR PRINT NAME)

SIGN YOUR NAME HERE

(SIGNATURE OF APPLICANT)



Requests for Accommodations

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least five days before the proceeding. Contact the clerk's office or go to www.courts.ca.gov/forms for *Request for Accommodations by Persons With Disabilities and Response* (form MC-410). (Civil Code, § 54.8.)

PETITIONER/PLAINTIFF: PETITIONER'S NAME	CASE NUMBER: YOUR CASE NUMBER
RESPONDENT/DEFENDANT: RESPONDENT'S NAME	

CHILD CUSTODY AND VISITATION APPLICATION ATTACHMENT

TO **Petition, Response, Application for Order or Responsive Declaration** **Other (specify):**
 To be ordered now and effective until the hearing

1. **Custody.** Custody of the minor children of the parties is requested as follows:

<u>Child's Name</u>	<u>Date of Birth</u>	<u>Legal Custody to</u> <small>(person who makes decisions about health, education, etc.)</small>	<u>Physical Custody to</u> <small>(person with whom the child lives)</small>
CHILD #1'S NAME	BIRTHDATE	YOU HAVE 3 CHOICES:	YOU HAVE 3 CHOICES:
CHILD #2'S NAME	BIRTHDATE	YOUR NAME,	YOUR NAME,
CHILD #3'S NAME	BIRTHDATE	THE OTHER PARENT'S NAME	THE OTHER PARENT'S NAME
		OR JOINT	OR JOINT

2. **Visitation.**

a. Reasonable **violence** COMPLETE THIS SECTION WITH THE PARENTING SCHEDULE YOU WANT FOR THE PARENT THE CHILD DOESN'T USUALLY LIVE WITH involving domestic

b. See the attached _____-page document dated *(specify date)*:

c. The parties will go to mediation at *(specify location)*: Check box 2.c. IF you want the court to order you and the other party to go to Mediation to work out a parenting plan

d. No visitation

e. Visitation for the petitioner respondent will be as follows:

(1) **Weekends starting (date):** Check the box if you are asking for Weekend parenting time

(The first weekend of the month is the first weekend with a Saturday.)

1st 2nd 3rd 4th 5th weekend of the month

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

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

(a) The parents will alternate the fifth weekends, with the petitioner respondent having the initial fifth weekend, which starts *(date)*:

(b) The petitioner will have fifth weekends in odd even months.

(2) **Alternate weekends starting (date) :**

The petitioner respondent 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) :** Check the box if you are asking for Weekday parenting time

The petitioner respondent 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)

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

See Attachment 2e(4).

PETITIONER: PETITIONER'S NAME	CASE NUMBER: YOUR CASE NUMBER
RESPONDENT: RESPONDENT'S NAME	

FILL OUT ITEM 3 IF IT APPLIES

3. **Supervised visitation.**
 I request that (name) : _____ have supervised visitation with the minor children according to the schedule set out on page 1 and that the visits be supervised by (name) : _____ who is a professional nonprofessional supervisor. The supervisor's phone number is (specify) :

I request that the costs of supervision be paid as follows: petitioner: _____ percent; respondent: _____ percent.

If item 3 is checked, you must attach a declaration that shows why unsupervised visitation would be bad for your children. The judge is required to consider supervised visitation if one parent is alleging domestic violence and is protected by a restraining order.

FILL OUT ITEM 4 IF IT APPLIES

4. **Transportation for visitation and place of exchange.**

- a. Transportation **to** the visits will be provided by (name) :
- b. Transportation **from** the visits will be provided by (name) :
- c. Drop-off of the children will be at (address) :
- d. Pick-up of the children will be at (address) :
- e. The children will be driven only by a licensed and insured driver. The car or truck must have legal child restraint devices.
- 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) :

FILL OUT ITEM 5 IF IT APPLIES

5. **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) :

6. **Child abduction prevention.** There is a risk that one of the parents will take the children out of California without the other parent's permission. I request the orders set out on attached form FL-312.

7. **Children's holiday schedule.** I request the holiday and visitation schedule set out on the attached form FL-341(C) other (specify):

8. **Additional custody provisions.** I request the additional orders regarding custody set out on the attached form FL-341(D) other (specify):

9. **Joint legal custody provisions.** I request joint legal custody and want the additional orders set out on the attached form FL-341(E) other (specify):

10. **Other.** I request the following additional orders (specify) :



SUMMONS (Family Law)

CITACIÓN (Derecho familiar)

NOTICE TO RESPONDENT (Name): YOUR SPOUSE'S NAME

AVISO AL DEMANDADO (Nombre):

You are being sued. Lo es

NOTE: YOU MUST WRITE YOUR NAME AND YOUR SPOUSE'S NAME THE SAME WAY THROUGHOUT YOUR FORMS.

FOR COURT USE ONLY (SÓLO PARA USO DE LA CORTE) SAMPLE ONLY Do not write on this copy!

Petitioner's name is: YOUR NAME

Nombre del demandante:

CASE NUMBER (NÚMERO DE CASO): LEAVE BLANK

You have 30 calendar days after this Summons and Petition are served on you to file a Response (form FL-120 or FL-123) at the court and have a copy served on the petitioner. A letter or phone call will not protect you. If you do not file your Response on time, the court may make orders affecting your marriage or domestic partnership, your property, and custody of your children. You may be ordered to pay support and attorney fees and costs. If you cannot pay the filing fee, ask the clerk for a fee waiver form. If you want legal advice, contact a lawyer immediately. You can get information about finding lawyers at the California Courts Online Self-Help Center (www.courtinfo.ca.gov/selfhelp), at the California Legal Services Web site (www.lawhelpcalifornia.org), or by contacting your local county bar association.

Tiene 30 días corridos después de haber recibido la entrega legal de esta Citación y Petición para presentar una Respuesta (formulario FL-120 ó FL-123) ante la corte y efectuar la entrega legal de una copia al demandante. Una carta o llamada telefónica no basta para protegerlo. Si no presenta su Respuesta a tiempo, la corte puede dar órdenes que afecten su matrimonio o pareja de hecho, sus bienes y la custodia de sus hijos. La corte también le puede ordenar que pague manutención, y honorarios y costos legales. Si no puede pagar la cuota de presentación, pida al secretario un formulario de exención de cuotas. Si desea obtener asesoramiento legal, póngase en contacto de inmediato con un abogado. Puede obtener información para encontrar a un abogado en el Centro de Ayuda de las Cortes de California (www.sucorte.ca.gov), en el sitio Web de los Servicios Legales de California (www.lawhelpcalifornia.org) o poniéndose en contacto con el colegio de abogados de su condado.

NOTICE: The restraining orders on page 2 are effective against both spouses or domestic partners until the petition is dismissed, a judgment is entered, or the court makes further orders. These orders are enforceable anywhere in California by any law enforcement officer who has received or seen a copy of them.

AVISO: Las órdenes de restricción que figuran en la página 2 valen para ambos cónyuges o pareja de hecho hasta que se despida la petición, se emita un fallo o la corte dé otras órdenes. Cualquier autoridad de la ley que haya recibido o visto una copia de estas órdenes puede hacerlas acatar en cualquier lugar de California.

NOTE: If a judgment or support order is entered, the court may order you to pay all or part of the fees and costs that the court waived for yourself or for the other party. If this happens, the party ordered to pay fees shall be given notice and an opportunity to request a hearing to set aside the order to pay waived court fees.

AVISO: Si se emite un fallo u orden de manutención, la corte puede ordenar que usted pague parte de, o todas las cuotas y costos de la corte previamente exentas a petición de usted o de la otra parte. Si esto ocurre, la parte ordenada a pagar estas cuotas debe recibir aviso y la oportunidad de solicitar una audiencia para anular la orden de pagar las cuotas exentas.

1. The name and address of the court are (El nombre y dirección de la corte son):

ASK STAFF TO STAMP CORRECT ADDRESS HERE

2. The name, address, and telephone number of the petitioner's attorney, or the petitioner without an attorney, are:

(El nombre, dirección y número de teléfono del abogado del demandante, o del demandante si no tiene abogado, son):

YOUR NAME YOUR PHONE NUMBER

YOUR ADDRESS

Date (Fecha): Clerk, by (Secretario, por) Deputy (Asistente)

[SEAL]

NOTICE TO THE PERSON SERVED: You are served AVISO A LA PERSONA QUE RECIBIÓ LA ENTREGA: Esta entrega se realiza

- a. [X] as an individual. (a usted como individuo.)
b. [] on behalf of respondent who is a (en nombre de un demandado que es):
(1) [] minor (menor de edad)
(2) [] ward or conservatee (dependiente de la corte o pupilo)
(3) [] other (specify) (otro - especifique):

(Read the reverse for important information.) (Lea importante información al dorso.)

WARNING—IMPORTANT INFORMATION

WARNING: California law provides that, for purposes of division of property upon dissolution of a marriage or domestic partnership or upon legal separation, property acquired by the parties during marriage or domestic partnership in joint form is presumed to be community property. If either party to this action should die before the jointly held community property is divided, the language in the deed that characterizes how title is held (i.e., joint tenancy, tenants in common, or community property) will be controlling, and not the community property presumption. You should consult your attorney if you want the community property presumption to be written into the recorded title to the property.

STANDARD FAMILY LAW RESTRAINING ORDERS

Starting immediately, you and your spouse or domestic partner are restrained from

1. Removing the minor child or children of the parties, if any, from the state without the prior written consent of the other party or an order of the court;
2. Cashing, borrowing against, canceling, transferring, disposing of, or changing the beneficiaries of any insurance or other coverage, including life, health, automobile, and disability, held for the benefit of the parties and their minor child or children;
3. Transferring, encumbering, hypothecating, concealing, or in any way disposing of any property, real or personal, whether community, quasi-community, or separate, without the written consent of the other party or an order of the court, except in the usual course of business or for the necessities of life; and
4. Creating a nonprobate transfer or modifying a nonprobate transfer in a manner that affects the disposition of property subject to the transfer, without the written consent of the other party or an order of the court. Before revocation of a nonprobate transfer can take effect or a right of survivorship to property can be eliminated, notice of the change must be filed and served on the other party.

You must notify each other of any proposed extraordinary expenditures at least five business days prior to incurring these extraordinary expenditures and account to the court for all extraordinary expenditures made after these restraining orders are effective. However, you may use community property, quasi-community property, or your own separate property to pay an attorney to help you or to pay court costs.

ADVERTENCIA – INFORMACIÓN IMPORTANTE

ADVERTENCIA: De acuerdo a la ley de California, las propiedades adquiridas por las partes durante su matrimonio o pareja de hecho en forma conjunta se consideran propiedad comunitaria para los fines de la división de bienes que ocurre cuando se produce una disolución o separación legal del matrimonio o pareja de hecho. Si cualquiera de las partes de este caso llega a fallecer antes de que se divida la propiedad comunitaria de tenencia conjunta, el destino de la misma quedará determinado por las cláusulas de la escritura correspondiente que describen su tenencia (por ej., tenencia conjunta, tenencia en común o propiedad comunitaria) y no por la presunción de propiedad comunitaria. Si quiere que la presunción comunitaria quede registrada en la escritura de la propiedad, debería consultar con un abogado.

ÓRDENES DE RESTRICCIÓN NORMALES DE DERECHO FAMILIAR

En forma inmediata, usted y su cónyuge o pareja de hecho tienen prohibido:

1. Llevarse del estado de California a los hijos menores de las partes, si los hubiera, sin el consentimiento previo por escrito de la otra parte o una orden de la corte;
2. Cobrar, pedir prestado, cancelar, transferir, deshacerse o cambiar el nombre de los beneficiarios de cualquier seguro u otro tipo de cobertura, tal como de vida, salud, vehículo y discapacidad, que tenga como beneficiario(s) a las partes y su(s) hijo(s) menor(es);
3. Transferir, gravar, hipotecar, ocultar o deshacerse de cualquier manera de cualquier propiedad, inmueble o personal, ya sea comunitaria, cuasicomunitaria o separada, sin el consentimiento escrito de la otra parte o una orden de la corte, con excepción las operaciones realizadas en el curso normal de actividades o para satisfacer las necesidades de la vida; y
4. Crear o modificar una transferencia no testamentaria de manera que afecte el destino de una propiedad sujeta a transferencia, sin el consentimiento por escrito de la otra parte o una orden de la corte. Antes de que se pueda eliminar la revocación de una transferencia no testamentaria, se debe presentar ante la corte un aviso del cambio y hacer una entrega legal de dicho aviso a la otra parte.

Cada parte tiene que notificar a la otra sobre cualquier gasto extraordinario propuesto, por lo menos cinco días laborales antes de realizarlo, y rendir cuenta a la corte de todos los gastos extraordinarios realizados después de que estas órdenes de restricción hayan entrado en vigencia. No obstante, puede usar propiedad comunitaria, cuasicomunitaria o suya separada para pagar a un abogado o para ayudarle a pagar los costos de la corte.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):

YOUR NAME
YOUR ADDRESS

NOTE: YOU MUST WRITE YOUR NAME AND YOUR SPOUSE'S NAME THE SAME WAY THROUGHOUT YOUR FORMS.

FOR COURT USE ONLY

SAMPLE ONLY
Do not write on this copy!

TELEPHONE NO.: **YOUR PHONE NUMBER** FAX NO. (Optional):

E-MAIL ADDRESS (Optional):

ATTORNEY FOR (Name): **SELF-REPRESENTED**

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA

STREET ADDRESS:

MAILING ADDRESS:

CITY AND ZIP CODE:

BRANCH NAME:

ASK STAFF TO STAMP FORM WITH CORRECT ADDRESS.

MARRIAGE OF

PETITIONER: **YOUR NAME**

RESPONDENT: **YOUR HUSBAND/WIFE'S NAME**

PETITION FOR

- Dissolution of Marriage
- Legal Separation
- Nullity of Marriage

CHECK THE BOX THAT APPLIES

CASE NUMBER:

LEAVE BLANK

AMENDED

IF YOU ARE FILING FOR DISSOLUTION, CHECK THE BOX(ES) THAT APPLY

1. RESIDENCE (Dissolution only) Petitioner Respondent has been a resident of this state for at least six months and of this county for at least three months immediately preceding the filing of this *Petition for Dissolution of Marriage*.

2. STATISTICAL FACTS

DATE YOU SEPARATED MINUS DATE YOU MARRIED

a. Date of marriage: DATE YOU MARRIED

c. Time from date of marriage to date of separation (specify):

b. Date of separation: DATE YOU SEPARATED

Years:

Months:

3. DECLARATION REGARDING MINOR CHILDREN (include children of this relationship born prior to or during the marriage or adopted during the marriage):

- a. There are no minor children.
- b. The minor children are:

<u>Child's name</u>	<u>Birthdate</u>	<u>Age</u>	<u>Sex</u>
CHILD #1'S NAME	DATE OF BIRTH	AGE	M/F
CHILD #2'S NAME	DATE OF BIRTH	AGE	M/F
CHILD #3'S NAME	DATE OF BIRTH	AGE	M/F

Continued on Attachment 3b

c. If there are minor children, IF ANY OF YOUR CHILDREN WERE BORN BEFORE YOU WERE MARRIED AND THE FATHER SIGNED THE VOLUNTARY DECLARATION OF PATERNITY, CHECK BOX 3d AND ATTACH A COPY. *sdiction*

d. A completed voluntary declaration of paternity regarding minor children born to the Petitioner and Respondent prior to the marriage is attached.

4. SEPARATE PROPERTY **IF YOU OR YOUR HUSBAND/WIFE HAVE ANY SEPARATE PROPERTY COMPLETE THIS SECTION.**

Petitioner requests that the assets and debts listed in *Property Declaration* (from FL-160) in Attachment 4 below be confirmed as separate property.

Item

Confirm to

LIST ANY THINGS, MONEY, OTHER PROPERTY OR DEBTS FROM BEFORE MARRIAGE OR AFTER THE DATE YOU AND YOUR HUSBAND/WIFE SEPARATED.

PUT THE NAME OF THE PERSON YOU WANT TO GET EACH OF THE ITEMS YOU LISTED.

ALSO LIST ANYTHING YOU OR YOUR HUSBAND/WIFE HAVE INHERITED OR RECEIVED AS A GIFT AT ANY TIME.

NOTICE: You may redact (black out) social security numbers from any written material filed with the court in this case other than a form used to collect child or spousal support.

MARRIAGE OF (last name, first name of parties):
YOUR LAST NAME, FIRST NAME
YOUR HUSBAND/WIFE'S LAST NAME, FIRST NAME

CASE NUMBER:
LEAVE BLANK

5. DECLARATION REGARDING COMMUNITY AND QUASI-COMMUNITY ASSETS AND DEBTS AS CURRENTLY KNOWN

- a. There are no such assets or debts subject to disposition by the court in this proceeding.
- b. All such assets and debts are listed in *Property Declaration* (form FL-160) in Attachment 5b.
 below (specify): LIST ANY THINGS, MONEY, OTHER PROPERTY OR DEBTS YOU OR YOUR HUSBAND/WIFE HAVE ACCRUED OR EARNED DURING THE MARRIAGE (INCLUDING HOUSE, CAR, 401(k), PENSION DEBTS, FURNITURE) NO MATTER WHOSE NAME IT IS IN!

CHECK THE BOX THAT APPLIES

6. Petitioner requests

- a. dissolution of the marriage based on (1) irreconcilable differences (2) incurable insanity (3) incurable insanity. (Fam. Code, §2310(b).)
- b. legal separation (1) irreconcilable differences (2) incurable insanity. (Fam. Code, §2310(b).)
- c. nullity of void marriage based on (1) incestuous marriage. (Fam. Code, §2200.) (2) bigamous marriage. (Fam. Code, §2201.)
- d. nullity of voidable marriage based on (3) unsound mind. (Fam. Code, §2210(c).) (4) fraud. (Fam. Code, §2210(d).) (5) force. (Fam. Code, §2210(e).) (6) physical incapacity. (Fam. Code, §2210(f).)

CHECK THE APPROPRIATE BOX LABELED a THROUGH d AND THE APPROPRIATE INSIDE BOX LABELED (1) THROUGH (6) SEE ITEM 6a FOR AN EXAMPLE.

7. Petitioner requests that the court grant the above relief and make injunctive (including restraining) and other orders as follows:

- a. Legal custody of children to Petitioner Respondent Joint Other
- b. Physical custody of children to Petitioner Respondent Joint Other
- c. Child visitation be granted to Petitioner Respondent Joint Other
As requested in form: FL-311 FL-312 FL-341(C) FL-341(D) FL-341(E) Attachment 7c.
- d. Determination of parentage of any children born to the Petitioner and Respondent prior to the marriage.
- e. Attorney fees and costs payable by Petitioner Respondent Joint Other
- f. Spousal support payable to (earnings assignment will be issued) Petitioner Respondent Joint Other
- g. Terminate the court's jurisdiction (ability) to award spousal support to Respondent.
- h. Property rights be determined.
- i. Petitioner's former name be restored to (specify):
- j. Other (specify):

COMPLETE ITEMS a-c TO TELL THE COURT WHAT CUSTODY AND VISITATION ORDERS YOU WANT

See FL-311 attached to FL-300 filed concurrently.

CHECK IF YOU WANT SPOUSAL SUPPORT.

CHECK 7g IF YOU DO NOT WANT TO PAY SPOUSAL SUPPORT TO YOUR HUSBAND/WIFE.

CHECK BOX 7i AND WRITE YOUR FULL MAIDEN NAME HERE IF YOU WANT IT BACK

Continued on Attachment 7j.

8. Child support-If there are minor children born to or adopted by the Petitioner and Respondent before or during this marriage, the court will make orders for the support of the children upon request and submission of financial forms by the requesting party. An earnings assignment may be issued without further notice. Any party required to pay support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent.

9. I HAVE READ THE RESTRAINING ORDERS ON THE BACK OF THE SUMMONS, AND I UNDERSTAND THAT THEY APPLY TO ME WHEN THIS PETITION IS FILED.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
Date: TODAY'S DATE

PRINT YOUR NAME HERE
(TYPE OR PRINT NAME)

SIGN YOUR NAME HERE
(SIGNATURE OF PETITIONER)

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF ATTORNEY FOR PETITIONER)

NOTICE: Dissolution or legal separation may automatically cancel the rights of a spouse under the other spouse's will, trust, retirement plan, power of attorney, pay on death bank account, survivorship rights to any property owned in joint tenancy, and any other similar thing. It does not automatically cancel the right of a spouse as beneficiary of the other spouse'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. However, some changes may require the agreement of your spouse or a court order (see Family Code sections 231-235).

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): YOUR NAME YOUR ADDRESS TELEPHONE NO.: E-MAIL ADDRESS (<i>Optional</i>): ATTORNEY FOR (<i>Name</i>):	FOR COURT USE ONLY <h1 style="margin: 0;">SAMPLE ONLY</h1> <h2 style="margin: 0;">Do not write on this copy!</h2>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: YOUR NAME RESPONDENT: YOUR HUSBAND/WIFE'S NAME OTHER PARTY:	
GUARDIANSHIP OF (<i>Name</i>): LEAVE BLANK	CASE NUMBER: LEAVE BLANK
DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)	

NOTE: YOU MUST WRITE YOUR NAME AND YOUR SPOUSE'S NAME THE SAME WAY THROUGHOUT YOUR FORMS.

ASK STAFF TO STAMP WITH CORRECT ADDRESS

(*This section applies only to family law cases.*)
 # OF CHILDREN YOU HAVE WITH THE OTHER PARTY

1. I am a party to this proceeding to determine custody of a child.
2. My present address and the present address of each child residing with me is confidential under Family Code section 3429 as I have indicated in item 3.
3. There are (*specify number*): minor children who are subject to this proceeding, as follows:
 (*Insert the information requested below. The residence information must be given for the last FIVE years.*)

a. Child's name CHILD #1'S NAME (OLDEST CHILD)	Place of birth FOR EXAMPLE: SAN JOSE, CA	Date of birth BIRTHDATE	Sex M OR F
Period of residence 1/05 to present	Address 123 MAPLE STREET <input type="checkbox"/> Confidential SAN JOSE, CA	Person child lived with (<i>name and complete current address</i>) JOHN SMITH <input type="checkbox"/> Confidential SAME ADDRESS	Relationship FATHER
3/00 to 1/05	Child's residence (<i>City, State</i>) 231 ELM STREET, MILPITAS, CA	Person child lived with (<i>name and complete current address</i>) SALLY DOE 543 OAK STREET, SAN JOSE, CA	MOTHER
to	ABOVE IS AN EXAMPLE OF HOW TO COMPLETE THIS FORM. THIS FORM ASKS YOU TO SHOW WHERE THE CHILD HAS LIVED FOR THE LAST 5 YEARS AND WHO HAS LIVED WITH THE CHILD. START WITH THE CHILD'S CURRENT ADDRESS AND WORK BACKWARDS FOR THE LAST 5 YEARS. IF YOU CAN'T REMEMBER OR DON'T KNOW THE EXACT ADDRESSES, PUT AS MUCH AS YOU KNOW.		
to			
b. Child's name CHILD #2'S NAME (NEXT OLDEST CHILD)	Place of birth FOR EXAMPLE: SAN JOSE, CA	Date of birth BIRTHDATE	Sex M OR F
<input type="checkbox"/> Residence information is the same as given above for child a. (<i>If NOT the same, provide the information below.</i>)			
Period of residence to present	Address <input type="checkbox"/> Confidential	Person child lived with (<i>name and complete current address</i>) <input type="checkbox"/> Confidential	Relationship
to	IF THERE ARE MORE CHILDREN, FILL OUT ITEM 2 (AND ATTACHMENT FORM FL-105(A) IF THERE ARE 3 OR MORE CHILDREN). IF THE ADDITIONAL CHILDREN HAVE THE SAME ADDRESS INFORMATION AS THE OLDER CHILD CHECK THE BOX IN ITEM B SAYING IT IS THE SAME. IF THE ADDRESS INFORMATION IS DIFFERENT THEN COMPLETE THE ENTIRE ADDRESS SECTION.		
to			
to	Child's residence (<i>City, State</i>)	Person child lived with (<i>name and complete current address</i>)	

- c. Additional residence information for a child listed in item a or b is continued on attachment 3c.
- d. Additional children are listed on form FL-105(A)/GC-120(A). (*Provide all requested information for additional children.*)

SHORT TITLE: YOUR LAST NAME V. YOUR HUSBAND/WIFE'S LAST NAME	CASE NUMBER: LEAVE BLANK
---	-----------------------------

4. Do you have information about, or have you participated as a party or as a witness or in some other capacity in, another court case or custody or visitation proceeding, in California or elsewhere, concerning a child subject to this proceeding?
 Yes No (If yes, attach a copy of the orders (if you have one) and provide the following information):

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

IF YOU KNOW ABOUT ANY OTHER COURT CASE(S) INVOLVING THE CHILD(REN) IN THIS CASE CHECK "YES" ABOVE AND COMPLETE THIS SECTION.

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

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

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

IF THERE ARE ANY RESTRAINING ORDERS IN PLACE, CHECK THE BOX NEXT TO THE TYPE OF COURT THAT MADE THE ORDERS AND FILL IN THE CASE INFORMATION HERE.

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

a. Name and address of person	b. Name and address of person	c. Name and address of person
IF YOU THINK YOU SHOULD FILL OUT THIS AREA, CHECK WITH STAFF FIRST.		
<input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights	<input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights	<input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights
Name of each child	Name of each child	Name of each child

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

Date: TODAY'S DATE

PRINT YOUR NAME HERE _____
 (TYPE OR PRINT NAME)

▶ SIGN YOUR NAME HERE _____
 (SIGNATURE OF DECLARANT)

7. Number of pages attached: _____

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

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State bar number, and address):

FOR COURT USE ONLY

YOUR NAME
YOUR ADDRESS

**SAMPLE
ONLY
Do not write
on this copy!**

TELEPHONE NO.:

FAX NO. (Optional):

E-MAIL ADDRESS (Optional):

ATTORNEY FOR (Name): **Self Represented**

**SUPERIOR COURT OF CALIFORNIA
COUNTY OF SANTA CLARA
FAMILY DIVISION**

CASE NUMBER:

LEAVE BLANK

DECLARATION OF RESIDENCE
(For Family Law and Parentage Actions Only)

This declaration must be filed with all new family law actions (including, but not limited to, dissolution, legal separation and nullity), and all new actions started under the Uniform Parentage Act (UPA) (including UPA actions filed simultaneously with a Domestic Violence Prevention Act case). Cases assigned to Department 101 (Domestic Violence Prevention Act that are not filed simultaneously with a UPA action, Civil Harassment, Elder Abuse, and Workplace Violence cases) and those filed by Department of Child Support Services (DCSS) are exempt from this requirement.

I am the Petitioner in this case and declare under penalty of perjury that (check one of the boxes labeled 1, 2 or 3):

1. I live in Santa Clara County, and my residence is currently located in the zip code area checked below.

OR **CHECK ONE, ASK STAFF IF NEITHER ONE APPLIES**

I do not live in Santa Clara County, but the Respondent lives in the County and his or her residence is currently located in the zip code area listed below.

If either box is checked above, please **FIND THE CORRECT ZIP CODE AND CHECK THE CORRECT BOXES**

Central County - Courthouse

- 95030 95033 95042 95101 95110 95111 95112 95113 95115 95116 95117
- 95118 95120 95121 95122 95123 95124 95125 95126 95127 95130 95131
- 95132 95133 95135 95136 95138 95139 95140 95148 95192 95193

North County - Courthouse located at 605 W. El Camino Real, Sunnyvale, CA 94087

- 94022 94024 94035 94040 94041 94043 94063 94085 94086 94087 94089
- 94301 94303 94304 94305 94306 95002 95008 95014 95032 95035 95050
- 95051 95053 95054 95070 95128 95129 95134

South County - Courthouse located at 301 Diana Avenue, Morgan Hill, CA 95037

- 95013 95020 95021 95037 95038 95046 95119 95141

OR
2. **Neither I nor Respondent currently resides in Santa Clara County.**

OR
3. **I have registered my address as confidential with the Secretary of State's "Safe At Home" program and decline to provide the zip code for my residence.**

Date: TODAY'S DATE

SIGN YOUR NAME HERE

Signature of Petitioner

<p>ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):</p> <div style="border: 1px solid black; padding: 5px; display: inline-block; margin-bottom: 5px;">YOUR NAME YOUR ADDRESS</div> <p>TELEPHONE NO.: _____</p> <p>E-MAIL ADDRESS (Optional): _____</p> <p>ATTORNEY FOR (Name): _____</p>	<p>FOR COURT USE ONLY</p> <p style="font-size: 2em; font-weight: bold; margin: 10px 0;">SAMPLE ONLY</p> <p style="font-size: 1.5em; font-weight: bold; margin: 0;">Do not write on this copy!</p>
<p>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA</p> <p>STREET ADDRESS: _____</p> <p>MAILING ADDRESS: <div style="border: 1px solid black; padding: 2px; display: inline-block;">ASK STAFF TO STAMP FORM WITH CORRECT ADDRESS</div></p> <p>CITY AND ZIP CODE: _____</p> <p>BRANCH NAME: _____</p>	
<p>PETITIONER: <div style="border: 1px solid black; padding: 2px; display: inline-block;">YOUR NAME</div></p> <p>RESPONDENT: <div style="border: 1px solid black; padding: 2px; display: inline-block;">YOUR HUSBAND/WIFE'S NAME</div></p>	
<p>PROOF OF SERVICE OF SUMMONS</p>	<p>CASE NUMBER: <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px;">LEAVE BLANK</div></p>

1. At the time of service I was at least 18 years of age and not a party to this action. I served the respondent with copies of:
- a. Family Law—Marriage: *Petition—Marriage* (form FL-100), *Summons* (form FL-110), and blank *Response—Marriage* (form FL-120)
 - or-
 - b. Family Law—Domestic Partnership: *Petition—Domestic Partnership* (form FL-103), *Summons* (form FL-110), and blank *Response—Domestic Partnership* (form FL-123)
 - or-
 - c. Uniform Parentage: *Petition to Establish Parental Relationship* (form FL-200), *Summons* (form FL-210), and blank *Response to Petition to Establish Parental Relationship* (form FL-220)
 - or-
 - d. Custody and Support: *Petition for Custody and Support of Minor Children* (form FL-260), *Summons* (form FL-210), and blank *Response to Petition for Custody and Support of Minor Children* (form FL-270)

MARK THE BOXES OF ANY ATTACHED FORMS. and

- e. (1) Completed and blank *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act* (form FL-105)
- (2) Completed and blank *Declaration of Disclosure* (form FL-140)
- (3) Completed and blank *Schedule of Assets and Debts* (form FL-142)
- (4) Completed and blank *Income and Expense Declaration* (form FL-150)
- (5) Completed and blank *Financial Statement (Simplified)* (form FL-155)
- (6) Completed and blank *Property Declaration* (form FL-160)
- (7) *Request for Order* (form FL-300), and blank *Responsive Declaration to Request for Order* (form FL-320)
- (8) Other (specify):
 ADR Options (Local Form FM-1021),
 Family Law Notice (Local Form FM-1050)
 Child Custody and Application Attachment (FL-311)
2. Address where respondent was served:

THE SERVER WRITES IN THE ADDRESS WHERE YOUR HUSBAND/WIFE WAS SERVED (HANDED) A COPY OF THE FILED COURT PAPERS.

3. I served the respondent by the following means (check proper box):
- a. **Personal service.** I personally delivered the copies to the respondent (Code Civ. Proc., § 415.10)
 on (date):

DATE OF SERVICE

 at (time):

TIME OF SERVICE (INCLUDE AM OR PM)
 - b. **Substituted service.** I left the copies with or in the presence of (name): _____
 who is (specify title or relationship to respondent):
- (1) **(Business)** a person at least 18 years of age who was apparently in charge at the office or usual place of business of the respondent. I informed him or her of the general nature of the papers.
 - (2) **(Home)** a competent member of the household (at least 18 years of age) at the home of the respondent. I informed him or her of the general nature of the papers.

PETITIONER: YOUR NAME	CASE NUMBER: LEAVE BLANK
RESPONDENT: YOUR HUSBAND/WIFE'S NAME	

3. b. (cont.) on (date): _____ at (time): _____
- I thereafter mailed additional copies (by first class, postage prepaid) to the respondent at the place where the copies were left (Code Civ. Proc., § 415.20b) on (date): _____
- A **declaration of diligence** is attached, stating the actions taken to first attempt personal service.
- c. **Mail and acknowledgment service.** I mailed the copies to the respondent, addressed as shown in item 2, by first-class mail, postage prepaid, on (date): _____ from (city): _____
- (1) with two copies of the *Notice and Acknowledgment of Receipt* (form FL-117) and a postage-paid return envelope addressed to me. **(Attach completed Notice and Acknowledgment of Receipt (form FL-117).)** (Code Civ. Proc., § 415.30.)
- (2) to an address outside California (by registered or certified mail with return receipt requested). **(Attach signed return receipt or other evidence of actual delivery to the respondent.)** (Code Civ. Proc., § 415.40.)
- d. **Other** (specify code section): _____
 Continued on Attachment 3d.

4. The "NOTICE TO THE PERSON SERVED" on the *Summons* was completed as follows (Code Civ. Proc., §§ 412.30, 415.10, 474):
- a. As an individual or
- b. On behalf of respondent who is a
- (1) minor. (Code Civ. Proc., § 416.60.)
- (2) ward or conservatee. (Code Civ. Proc., § 416.70.)
- (3) other (specify): _____

5. **Person who served papers**

Name: NAME OF SERVER (PERSON WHO HANDED THE PAPERS TO YOUR HUSBAND/WIFE)

Address: SERVER'S ADDRESS

Telephone number: SERVER'S PHONE NUMBER

- This person is
- a. exempt from registration under Business and Professions Code section 22350(b).
- b. not a registered California process server.
- c. a registered California process server: an employee or an independent contractor
- (1) Registration no.: _____
- (2) County: _____
- d. **The fee** for service was (specify): \$ _____

6. **I declare** under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
- or-
7. **I am a California sheriff, marshal, or constable**, and I certify that the foregoing is true and correct.

Date: DATE SERVER SIGNS

SERVER PRINTS THEIR NAME HERE
(NAME OF PERSON WHO SERVED PAPERS)

SERVER SIGNS HERE
(SIGNATURE OF PERSON WHO SERVED PAPERS)