



Judicial Council of California

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INVITATION TO COMMENT

SP24-01

Title

Child Support: Implementing Amendments to the Family Code

Action Requested

Review and submit comments by March 22, 2024

Proposed Rules, Forms, Standards, or Statutes

Approve forms FL-302 and FL-632-INFO; revise forms FL-192, FL-342, FL-342(A), FL-530, FL-600, FL-610, FL-616, FL-630, FL-632, FL-635, FL-640, FL-640-INFO, FL-643, FL-665, FL-680, FL-683, FL-687, FL-688, FL-692, and FL-693; revoke forms FL-380, FL-381, and FL-382

Proposed Effective Date

September 1, 2024, and January 1, 2026

Contact

Marina Soto, 916-643-6906
marina.soto@jud.ca.gov

Proposed by

Family and Juvenile Law Advisory
Committee
Hon. Stephanie E. Hulse, Cochair
Hon. Amy M. Pellman, Cochair

Executive Summary and Origin

The Family and Juvenile Law Advisory Committee proposes approving 2 new forms, revising 20 forms, and revoking 3 forms related to child support. This action is necessary to implement changes to the Family Code made by Assembly Bill 207 (Stats. 2022, ch. 573) and Senate Bill 343 (Stats. 2023, ch. 213) to bring California into compliance with federal regulations requiring child support orders be based on evidence of actual income or, where actual income is unknown, the specific circumstances of the obligor parent. The proposed action is also necessary to implement changes made to the Family Code by Assembly Bill 2960 (Stats. 2022, ch. 420), which mandates that local child support agencies provide notice regarding payment of support to parents and the court when they begin and cease to provide child support enforcement services, and Assembly Bill 1148 (Stats. 2023, ch. 565), which increases the time period before child support resumes after an obligor parent has been released from incarceration or confinement.

This proposal has not been approved by the Judicial Council and is not intended to represent the views of the council, its Rules Committee, or its Legislation Committee. It is circulated for comment purposes only.

Background

In 2016, the federal Office of Child Support Services issued the *Flexibility, Efficiency, and Modernization in Child Support Enforcement Programs Final Rule*.¹ The federal final rule requires states update their child support guidelines to ensure they result in child support orders that reflect a parent's actual ability to pay or the specific circumstances of the obligor parent when evidence of earnings and income is unavailable or insufficient to determine the parent's ability to pay. The final rule also requires that child support guidelines take into consideration the basic subsistence needs of the obligor parent who has a limited ability to pay by incorporating a low-income adjustment. Additionally, states are no longer allowed to use a standard amount to impute income to an obligor parent in lieu of fact gathering to determine the specific circumstances of the parent and cannot treat incarceration as voluntary unemployment when modifying child support orders. California must implement the regulations promulgated by the federal final rule by September 2024.

Legislation to comply with federal final rule

On September 27, 2022, Assembly Bill 207 (Stats. 2022, ch. 573) was signed into law, amending Family Code sections 4007.5, 4054, and 4058.² These amendments brought California closer to compliance with the final rule by (1) providing that incarceration cannot be considered as voluntary unemployment, and (2) providing for the consideration of the factors listed in the federal regulation when income imputation (i.e., earning capacity) is authorized.³

A year later, on September 22, 2023, SB 343 was signed into law. This legislation made wide-ranging changes to the current child support scheme, including:

- Revising the child support guideline by updating the K-factor bands, which is the combined net income of both parents allocated for child support;
- Tying the low-income adjustment to full-time minimum wage;
- Creating a new basis for deviating below guideline, if after applying the low-income adjustment the guideline child support would be greater than 50 percent of the support obligor's net disposable income;
- Changing the apportionment of expenses for additional child support from one-half to each parent to dividing the expenses in proportion to the parents' net incomes;
- Expanding the protocols for issuing an order to pay uninsured health-care costs to also include orders for payment of childcare costs actually incurred, unless childcare costs are included in the guideline calculation;
- Eliminating the ability for local child support agencies to request initial support orders based on presumed income of full-time minimum wage ability when an obligor's income

¹ 81 Fed.Reg. 93492 (Dec. 20, 2016).

² All further statutory references are to the Family Code unless otherwise noted.

³ See 45 C.F.R. § 302.56(c)(1)(iii) (2023).

is unknown; in these situations, the obligor's earning capacity must be considered based on the factors enumerated in section 4058(b); and

- Repealing the expedited child support order scheme.

Delayed implementation date

California is required to implement regulations promulgated by the federal final rule no later than September 2024. While SB 343 and certain provisions of AB 207 were enacted by the Legislature for this purpose, the forms necessary to apply the new law must also be approved by the council no later than September 1, 2024, to ensure compliance with the federal deadline. However, to give the state Department of Child Support Services sufficient time to program the new forms that they use into their electronic case management system, SB 343 added section 17432.5 to the Family Code, which states, "No later than September 1, 2024, the Judicial Council shall adopt and approve any forms necessary to implement Sections 17400, 17404.1, 17430, and 17432 as added by the act that added this section. Forms adopted pursuant to this section shall have an effective date of January 1, 2026." Thus, most of the forms in the proposal must be approved by September 1, 2024, but only the revisions to forms FL-192, FL-342, FL-342(A), FL-632, and new forms FL-302 and FL-632-INFO will go into effect on that date. The effective date for the remaining 15 revised governmental child support forms and the revised judgment form for UIFSA cases⁴ (form FL-530) will be January 1, 2026.

Other legislation

In addition to the changes made to the Family Code to bring California into compliance with the federal final rule, two other bills have recently been enacted that effect the practices of local child support agencies and the child support obligations of parents who are incarcerated or involuntarily institutionalized.

Changes to section 4204

On September 18, 2022, Assembly Bill 2960 (Stats. 2022, ch. 420) was signed into law. This bill, among other things, amended section 4204 to require the local child support agency to notify the parents and the court when the agency starts to provide enforcement services in a case and when it stops providing enforcement services in a case.

Changes to section 4007.5

On September 19, 2023, the Judicial Council approved revisions to form FL-192 to incorporate changes made to section 4007.5 by AB 207. The newly revised form FL-192 became effective on January 1, 2024. However, additional changes are now needed because on October 8, 2023, the Governor signed Assembly Bill 1148 (Stats. 2023, ch. 565). AB 1148 amends section 4007.5 to extend the date a child support obligation resumes, after being suspended by operation of law due to the incarceration or involuntary institutionalization of the parent ordered to pay child support, to the first day of the 10th month after release. The bill also authorizes the person to whom support is owed or the local child support agency to seek a court order reinstating the

⁴ Cases brought under the Uniform Interstate Family Support Act (Fam. Code, § 5700.101 et seq.)

child support obligation to an amount determined by the court if the person owing support obtains employment before the date set for reinstatement.

The Proposal

In order to implement changes in law made by AB 207 and SB 343 to bring California into compliance with the federal final rule, as well as other changes recently made to the Family Code, the committee proposes:

1. Approval of the following 2 new forms, effective September 1, 2024, to (1) implement new law regarding the factors used to determine the earning capacity of a parent to calculate child support, (2) provide information to courts and parties regarding the involvement of a local child support agency in a case, and (3) increase access to justice:
 - *Earning Capacity Factors Attachment* (form FL-302);
 - *Information Sheet: Notice Regarding Payment of Support* (form FL-632-INFO).
2. Revising the following 4 forms to conform to new law, effective September 1, 2024:
 - *Notice of Rights and Responsibilities (Health-Care Costs and Reimbursement Procedures)* (form FL-192);
 - *Child Support Information and Order Attachment* (form FL-342);
 - *Non-Guideline Support Findings Attachment* (form FL-342(A));
 - *Notice Regarding Payment of Support* (form FL-632).
3. Revising the following 16 forms to comply with new law by September 1, 2024, with an effective date of January 1, 2026:
 - *Judgment Regarding Parental Obligations (UIFSA)* (form FL-530);
 - *Summons and Complaint or Supplemental Complaint Regarding Parental Obligations* (form FL-600);
 - *Answer to Complaint or Supplemental Complaint Regarding Parental Obligations* (form FL-610);
 - *Declaration for Amended Proposed Judgment* (form FL-616);
 - *Judgment Regarding Parental Obligations* (form FL-630);
 - *Notice of Entry of Judgment and Proof of Service by Mail* (form FL-635);
 - *Notice and Motion to Cancel (Set Aside) Support Order Based on Presumed Income* (form FL-640);
 - *Information Sheet for Notice and Motion to Cancel (Set Aside) Support Order Based on Presumed Income* (form FL-640-INFO);
 - *Declaration of Obligor's Income During Judgment Period—Presumed Income Set-Aside Request* (form FL-643);
 - *Findings and Recommendation of Commissioner* (form FL-665);
 - *Notice of Motion* (form FL-680);
 - *Order to Show Cause* (form FL-683);

- *Order After Hearing* (form FL-687);
- *Short Form Order After Hearing* (form FL-688);
- *Minutes and Order or Judgment* (form FL-692); and
- *Guideline Findings Attachment* (form FL-693).

4. Revoking the following 3 forms immediately upon council approval as the corresponding Family Code provisions have been repealed:

- *Application for Expedited Child Support Order* (form FL-380);
- *Response to Application for Expedited Child Support Order and Notice of Hearing* (form FL-381); and
- *Expedited Child Support Order* (form FL-382).

Changes to implement AB 207 and SB 343

AB 207 and SB 343 made several changes to the Family Code that affect 22 current Judicial Council forms. The changes also necessitate the creation of a new form to help ensure child support orders are based on the specific circumstances of the obligor parent.

New basis for deviating from guideline support

SB 343 amends section 4057 to add a new factor that rebuts the presumption that the amount of child support established by the guideline formula is the correct amount of support ordered under certain circumstances. Effective September 1, 2024, the presumption that the guideline child support amount is the correct order will be rebutted if a support obligor qualifies for a low-income adjustment and the amount of child support established by the formula exceeds 50 percent of the support obligor’s net disposable income after application of the low-income adjustment.⁵ However, SB 343 also limited the amount of the adjustment to no greater than the amount exceeding 50 percent of the support obligor’s net disposable income. The committee proposes revising *Non-Guideline Child Support Findings Attachment* (form FL-342(A)) and *Guideline Findings Attachment* (form FL-693) to add the new rebuttal deviation factor to the forms.

Earning capacity

AB 207 and SB 343 both made changes to the law regarding earning capacity to comply with the federal final rule. AB 207 amended the law to require the court to consider certain factors when earning capacity is used instead of actual income to set a child support order. Specifically, section 4058(b) now states:

- (1) The court may, in its discretion, consider the earning capacity of a parent in lieu of the parent’s income, consistent with the best interests of the children,

⁵ Stats. 2023, ch. 213, § 5.

taking into consideration the overall welfare and developmental needs of the children, and the time that parent spends with the children.

(2) When determining the earning capacity of the parent pursuant to this subdivision, the court shall consider the specific circumstances of the parent, to the extent known. Those circumstances include, but are not limited to, the parent's assets, residence, employment and earnings history, job skills, educational attainment, literacy, age, health, criminal record and other employment barriers, and record of seeking work, as well as the local job market, the availability of employers willing to hire the parent, prevailing earnings levels in the local community, and other relevant background factors affecting the parent's ability to earn.

Under SB 343, courts must hold a hearing to consider those same factors when the local child support agency requests an order based on earning capacity in its initial pleadings and the matter is proceeding by default. SB 343 also requires the agency to indicate in its initial pleadings the earning capacity factors it used to calculate the proposed guideline child support requested. Consequently, the committee proposes that a new optional form, *Earning Capacity Factors Attachment* (form FL-302), be approved to become effective September 1, 2024. The proposed form would be a dual-use form that could be attached by a party making a request for an order based on earning capacity or could also be used by the court to make findings regarding a parent's earning capacity. The committee also proposes revising the following 15 forms to include provisions related to the earning capacity of the parents that reflects the new law:

- *Child Support Information and Order Attachment* (form FL-342);
- *Judgment Regarding Parental Obligations (UIFSA)* (form FL-530);
- *Summons and Complaint or Supplemental Complaint Regarding Parental Obligations* (form FL-600);
- *Declaration for Amended Proposed Judgment* (form FL-616);
- *Judgment Regarding Parental Obligations* (form FL-630);
- *Notice and Motion to Cancel (Set Aside) Support Order Based on Presumed Income* (form FL-640);
- *Information Sheet for Notice and Motion to Cancel (Set Aside) Support Order Based on Presumed Income* (form FL-640-INFO);
- *Declaration of Obligor's Income During Judgment Period—Presumed Income Set-Aside Request* (form FL-643);
- *Findings and Recommendation of Commissioner* (form FL-665);
- *Notice of Motion* (form FL-680);
- *Order to Show Cause* (form FL-683);
- *Order After Hearing* (form FL-687);
- *Short Form Order After Hearing* (form FL-688);
- *Minutes and Order or Judgment* (form FL-692); and
- *Guideline Findings Attachment* (form FL-693).

Childcare costs and reimbursement procedures

SB 343 also amends section 4062 to require that the court order as additional support childcare costs that are actually incurred and related to employment, or reasonably necessary education or training for employment skills, unless childcare costs are included in the guideline calculation. While section 4062 currently mandates that the court order childcare costs that are related to employment, or reasonably necessary education or training for employment skills, as additional support, it does not explicitly require that childcare costs be actually incurred to obtain reimbursement when a parent is ordered to pay a percentage of childcare costs. Effective September 1, 2024, unless a specific amount of childcare costs is included as part of the guideline calculation for monthly support, a party will have to establish childcare costs were actually incurred to obtain reimbursement from the other parent. AB 343 also amended section 4063, which specifies the current procedure for seeking reimbursement of uninsured health-care expenses, to incorporate a claim for childcare costs into those reimbursement procedures.

The committee proposes revising form FL-192 to reflect the changes in law regarding additional support and advise parties of their rights and responsibilities concerning childcare costs and reimbursement. Because the proposed version of FL-192 will provide information regarding both reimbursement of childcare and health-care costs, as well as information on changing a child support order and information on the child support obligations of incarcerated or confined parents, the committee also proposes revising the title of form FL-192 to simply *Notice of Rights and Responsibilities Regarding Child Support (Health Care Costs and Reimbursement Procedures) and Information Sheet on Changing a Child Support Order* (form FL-192).

Elimination of presumed income

In order to ensure child support orders are based on a parent's actual ability to pay, SB 343 amends sections 17400 and 17404.1 to eliminate the ability of local child support agencies to plead for child support orders based on presumed income of minimum wage at 40 hours per week when the actual income or income history of the obligor parent is unknown. The committee proposes revising forms FL-530, FL-600, FL-616, FL-630, FL-635, FL-680, and FL-683 to remove items referring to the use of presumed income.

Section 17432 set-aside request

SB 343 will amend section 17432 to allow parties to request the court set aside the part of a judgment or order concerning child support that was established by default if the support order was based on earning capacity and did not reflect the obligor's actual income situation. This relief is currently only available to obligors whose order was based on presumed income of full-time minimum wage. As of January 1, 2026, parties will be able to seek a set-aside for child support orders obtained by default that are based on earning capacity, as well as for pre-2026 orders based on presumed income. The window to request relief was also expanded from one year to two.

The committee proposes revising forms FL-640, FL-640-INFO, and FL-643 to reflect the new law created by SB 343. The committee also proposes revising FL-640-INFO to a plain-language form to make it more understandable for parents.

The committee additionally proposes that the titles of these forms be revised as follows to correspond to the changes made to the forms:

- *Notice and Motion to Cancel (Set Aside) Support Order Based on Presumed Income or Earning Capacity* (form FL-640), with a similar change to the title of form FL-640-INFO; and
- *Declaration of Obligor's About Parent's Income During Judgment Periods—Presumed Income Set Aside Request* (form FL-643).

Revocation of expedited child support order forms

SB 343 eliminated the expedited child support order statutory scheme by repealing sections 3620–3634, effective January 1, 2024. The committee proposes that forms FL-380, FL-381, and FL-382 be repealed, effective as soon as approved by the council.

Other changes to forms

In addition to the changes discussed above to implement the provisions of AB 207 and SB 343 and bring California into compliance with the federal final rule, the committee proposes replacing any gendered nouns in the forms being revised. The committee also proposes the additional revisions discussed below to implement other recent changes to the Family Code and ensure compliance with existing law.

Notice regarding payment of support

Effective January 1, 2023, AB 2960 amended section 4204 to require a local child support agency notify the parents and the court when it starts to provide enforcement services in a case and when it stops providing enforcement services in a case. Previously, the law simply stated that the agency may provide notice when it started to provide services. The committee proposes revising *Notice Regarding Payment of Support* (form FL-632) to allow local child support agencies to inform the parents and the court when it is no longer enforcing support owed to the parent receiving support because that parent has requested the local child support agency close its case and cease to provide services to collect child support owed to that parent, but where the local child support agency is still enforcing child support arrears formerly assigned to the county for a period when the parent was receiving cash aid (i.e., CalWORKs).

The committee proposes revising the form to further clarify whether a child support commissioner should still hear a matter once the local child support agency is only enforcing assigned arrears. Ordinarily, if a parent is receiving CalWORKs or if they have requested the local child support agency enforce the support order, then any matters in such cases involving a local child support agency must be heard by a child support commissioner, unless one is not available due to exceptional circumstances.⁶ However, once a parent closes their case, the agency may retain a vested interest in participating in hearings involving child support arrears, but not in other types of hearings—for example, a request to modify ongoing support. In an effort to address this complexity, a notice box for the court clerk has been added to the form. Other

⁶ §§ 4250–4522.

changes have also been made to make the form easier to understand for self-represented litigants, including the creation of a new stand-alone information sheet (form FL-632-INFO). Although FL-632 does not need to be approved by September 1, 2024, to comply with the federal final rule deadline, the committee proposes the revisions to the form also go into effect on September 1 so the changes made a year ago to section 4204 can be properly implemented.

Reinstatement of child support after release from incarceration or confinement

As noted above, effective January 1, 2024, AB 1148 amended section 4007.5 by extending the date a child support obligation resumes after suspension by operation of law due to the incarceration or involuntary institutionalization of the parent ordered to pay child support. Former section 4007.5(b) stated that the suspended child support obligation of a parent who has been incarcerated or involuntarily institutionalized “shall resume on the first day of the first full month after release of the person owing support.” AB 1148 extended the date child support will restart to the first day of the 10th month after release. AB 1148 also amended section 4007.5 by adding a provision that authorizes the person to whom support is owed or the local child support agency to seek a court order reinstating the child support obligation at an amount determined by the court if the parent ordered to pay support becomes employed before the date set for reinstatement.

Form FL-192 provides information about child support orders for incarcerated or detained parents.⁷ The committee proposes revising form FL-192 to:

- Advise that the timing for child support to automatically restart is the first full day of the 10th month after the parent is released; and
- Specify that a person to whom support is owed or the local child support agency may seek a court order reinstating the child support obligation at an amount to be determined by the court if the parent owing support obtains employment before the reinstatement date.

Low-income adjustment

Section 4055(b)(7) provides that in all cases where the obligor parent’s net disposable income is less than \$1,500, adjusted annually for cost-of-living increases, there is a rebuttable presumption that the obligor is entitled to a low-income adjustment on their child support obligation.⁸ The presumption can be rebutted by evidence showing that application of the low-income adjustment would be unjust and inappropriate in the particular case.⁹ Currently, forms FL-342, FL-530, FL-630, FL-665, FL-687, FL-688, and FL-692 each contain an optional item for the judicial officer to complete that states “the low income adjustment does not apply” and provides a field

⁷ Although recently approved revisions to form FL-192 included updates to the section of the form providing information on child support for incarcerated or detained parents to reflect changes made to section 4007.5 by AB 270, the newly approved form does not reflect the changes in law that were made by AB 1148.

⁸ The current threshold for the low-income adjustment is \$2,056, based on the annual California Consumer Price Index for All Urban Consumers.

⁹ § 4055(b)(7).

for the court to specify the reasons the low-income adjustment is not applicable. The committee proposes adding language to this provision in the seven forms identified above to clarify that the reasons for not applying the low-income adjustment need only be specified when the low-income adjustment has been rebutted in cases where the threshold amount has been met.

Signature line for attorney of record

In addition to the changes discussed above that were made to *Notice and Motion to Cancel (Set Aside) Support Order Based on Presumed Income* (form FL-640) to implement AB 207 and SB 343, the committee also proposes revising the signature line on the form. Currently, the signature line on the motion simply states, “Signature.” However, the motion to cancel (set aside) a support order based on presumed income, and now also earning capacity, may be brought by a local child support agency, a party who is not represented, or the attorney of a party. Code of Civil Procedure section 128.7(a) requires that “[e]very pleading, petition, written notice of motion, or other similar paper” be signed by at least one attorney of record in the attorney’s individual name or by the party if they are not represented by an attorney. In order to ensure form FL-640 complies with Code of Civil Procedure section 128.7, the committee proposes changing the signature line to specify that the motion is being signed by a party or their attorney.

Alternatives Considered

The committee considered alternative actions regarding several proposed changes to the forms.

Take no action

The committee considered taking no action and leaving the current forms in place. However, as discussed above, California must implement regulations promulgated by the federal final rule no later than September 2024. In order to ensure compliance with the deadline, the forms necessary to apply the provisions of AB 207 and SB 343 must also be approved by the council no later than September 1, 2024. Moreover, SB 343 requires the council approve any changes to the governmental child support forms discussed above no later than September 1, 2024, despite a delay in the effective date of the forms until January 1, 2026. Due to the mandated deadline imposed by both federal and state law for most of the changes proposed on the forms, and the sweeping nature of the amendments to the Family Code caused by AB 207 and SB 343, the committee recommends moving forward with the proposed form revisions.

The committee additionally considered not moving forward with the proposed revisions to *Notice Regarding Payment of Support (Governmental)* (form FL-632), since the form currently contains a provision for a local child support agency to indicate that it “is no longer providing services under title IV-D of the Social Security Act” and thus complies with the recent amendment made to section 4204. However, the committee decided to proceed with the proposed changes to FL-632 because there are circumstances where the local child support agency may no longer be enforcing current child support and back support owed to the other parent but still be involved in the case to collect arrears owed for public assistance paid by the county. This can cause confusion for the parties regarding to whom support payments should be

made. It can also create confusion for the court in determining whether a matter should be heard by a child support commissioner or other judicial officer. The proposed revisions will allow the local child support agency to not only indicate whether it is enforcing all aspects of a support order or no longer providing any enforcement services in a case, but also (1) provide notice to the court and parties that it is only involved in the case for purposes of enforcing child support arrears assigned to the county; (2) provide notice to the parent ordered to pay support about where current support, back support owed to the other parent, and back support owed to the county should be paid; and (3) aid court clerks in determining whether matters should be calendared for hearing before a child support commissioner or another judicial officer.

The committee has also proposed adding language to seven forms to clarify that the court need only specify reasons for not applying the low-income adjustment when the low-income adjustment has been rebutted. Alternatively, the committee could have chosen to take no action and leave the current forms in place as the forms currently provide an optional provision for the court to find that “the low-income adjustment does not apply” and provides a fillable field for the court to specify its reasons. The committee chose, however, to propose revising the language of the provision to “the low-income adjustment has been rebutted and does not apply” to avoid possible confusion that justification must be provided in every case where the low-income adjustment does not apply, including cases that do not initially meet the required threshold.

Exclude new form FL-302 from the proposal

Another alternative the committee considered was not including the new form *Earning Capacity Factors Attachment* (form FL-302) as part of the proposal since the form would be for optional use only and is not required to implement the new law regarding earning capacity. The committee decided, however, to move forward with the proposed new form because it would benefit the public, attorneys, judicial officers, and local child support agencies by allowing parties and attorneys to provide the necessary information to support a request that the court utilize the earning capacity of a parent to determine support. It would also provide a means for courts to create a meticulous record of its findings regarding earning capacity. The optional form could additionally be used by local child support agencies to meet their obligation to inform an obligor parent of the factors it considered and used to determine the obligor’s earning capacity in the initial pleadings.¹⁰

Revise jurat in form FL-640

The committee has proposed changing the signature line on *Notice and Motion to Cancel (Set Aside) Support Order Based on Presumed Income* (form FL-640) to comply with the requirement in Code of Civil Procedure section 128.7(a) that written notice of motion be signed by an attorney of record or party. In considering this recommendation, the committee also considered revising the form to include a jurat (an oath or affirmation regarding the content of a document) that allows the attorney or party to sign the form upon knowledge, information, and

¹⁰ § 17400(d)(2)(B).

belief as to its truth, rather than under penalty of perjury, as Code of Civil Procedure section 128.7(b) states:

By presenting to the court, whether by signing, filing, submitting, or later advocating, a pleading, petition, written notice of motion, or other similar paper, an attorney or unrepresented party is certifying that to the best of the person's knowledge, information, and belief, formed after an inquiry reasonable under the circumstances, all of the following conditions are met:

- (1) It is not being presented primarily for an improper purpose, such as to harass or to cause unnecessary delay or needless increase in the cost of litigation.
- (2) The claims, defenses, and other legal contentions therein are warranted by existing law or by a nonfrivolous argument for the extension, modification, or reversal of existing law or the establishment of new law.
- (3) The allegations and other factual contentions have evidentiary support or, if specifically so identified, are likely to have evidentiary support after a reasonable opportunity for further investigation or discovery.
- (4) The denials of factual contentions are warranted on the evidence or, if specifically so identified, are reasonably based on a lack of information or belief.

Although it appears the jurat on form FL-640 should be revised to reflect the language in Code of Civil Procedure section 128.7(b), the committee recommends deferring consideration of the jurat issue until a later forms revision cycle, as the issue is not currently on the committee's annual agenda for consideration and such a revision may be needed on several other family law forms. Indeed, a review of the forms in this current proposal indicates that the signature line and jurat on forms FL-610, FL-616, and FL-643, all of which are declarations, may also require further examination to ensure they properly provide for the signature of an attorney. Deferring the matter will allow the committee to seek approval from the Rules Committee to add the issue to a future agenda and provide opportunity for the committee to consider appropriate language, format, and application for a jurat upon information and belief more fully and uniformly. Deferring the matter will also allow for a thorough review of all the family law forms so the issue can be addressed in a single comprehensive proposal.

Fiscal and Operational Impacts

The committee anticipates that courts would incur costs to revise forms and add them to their case management systems, train court staff about the revised forms included in this proposal, and possibly revise local court rules and forms so they are consistent with the changes adopted by the Judicial Council. However, the committee notes that most of the changes proposed are needed to implement the new law, and therefore the result of legislative action.

Request for Specific Comments

In addition to comments on the proposal as a whole, the advisory committee is interested in comments on the following:

- Does the proposal appropriately address the stated purpose?

The advisory committee also seeks comments from *courts* on the following cost and implementation matters:

- Would the proposal provide cost savings? If so, please quantify.
- What would the implementation requirements be for courts—for example, training staff (please identify position and expected hours of training), revising processes and procedures (please describe), changing docket codes in case management systems, or modifying case management systems?
- What challenges, if any, would courts face in implementing new forms FL-302 and FL-632-INFO and the revisions to forms FL-192, FL-342, FL-342(A), and FL-632 within 2 months from Judicial Council approval of this proposal until its effective date?
- Would 17 months from Judicial Council approval of this proposal until its effective date for form FL-530 and the FL-600 series forms for governmental child support actions provide sufficient time for implementation?
- How well would this proposal work in courts of different sizes?

Attachments and Links

1. Forms FL-192, FL-302, FL-342, FL-342(A), FL-380, FL-381, FL-382, FL-530, FL-600, FL-610, FL-616, FL-630, FL-632, FL-632-INFO, FL-635, FL-640, FL-640-INFO, FL-643, FL-665, FL-680, FL-683, FL-687, FL-688, FL-692, and FL-693, at pages 14–79.
2. Link A: Sen. Bill 343 (Stats. 2023, ch. 213),
https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240SB343.
3. Link B: Assem. Bill 1148 (Stats. 2023, ch. 565),
https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB1148.

NOTICE OF RIGHTS AND RESPONSIBILITIES REGARDING CHILD SUPPORT

Childcare and Health-Care Costs and Reimbursement Procedures

Your child support order may include a provision for payment of childcare or uninsured health-care costs. Childcare costs may be included as part of the monthly child support payment or reimbursable as a percentage of the costs. If the childcare costs are included as part of the monthly child support payment, you must pay that amount each month until the court changes (modifies) the child support order. If you need to change your child support order because there has been a change in the cost of childcare, see page 2.

If you have a child support order that includes a provision for the reimbursement of a percentage of childcare costs or 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 childcare costs or health-care costs not paid by insurance. You must give this statement to the other parent within a reasonable time, but no more than 90 days after those costs were given to you.

2. Proof of full payment. If you have already paid all of the childcare costs or uninsured health-care 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 childcare costs or uninsured health-care 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 childcare or 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 a childcare or 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. Going to court. Sometimes parents get into disagreements about childcare and health-care costs. If you and the other parent cannot resolve the situation after talking about it, you can request that the court make a decision.

- a. Disputed requests for payment.** If you dispute a request for payment made by the other parent, you may file a request for the court to resolve the dispute, but only if you pay the requested amount before filing your request.
 - b. Nonpayment.** If you claim that the other parent has failed to pay you back for a payment, or they have failed to make a payment to the provider after proper notice, you may file a request for the court to resolve the dispute.
 - c. Paid charges.** The court will presume that if uninsured health-care costs or childcare costs for employment or necessary training for job skills have been paid, those costs were reasonable. If you want to dispute paid charges, you will have to show the court that the costs were unreasonable.
 - d. Attorney's fees.** If the court decides one parent has been unreasonable, it can order that parent to pay the other parent's attorney's fees and costs.
 - e. Court forms.** Use forms [FL-300](#) and [FL-490](#) to get a court date. See form [FL-300-INFO](#) for information about completing, filing, and serving your court papers.
- 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 parent 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 parent 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 parent incurring those costs.

Information Sheet on Changing a Child Support Order

General Info

The court has made a child support order in your case. This order will remain the same unless one of the parents requests that the support be changed (modified). An order for child support can be modified by filing a request to change child support and serving the other parent. If both parents agree on a new child support amount, they can complete, sign, and file with the court a *Stipulation to Establish or Modify Child Support and Order* ([form FL-350](#)). (**Note:** If the local child support agency is involved in your case, it must be served with any request to change child support and approve any agreement.)

Online Self-Help Guide

For more information about how child support works, visit: <https://selfhelp.courts.ca.gov/child-support>.

When a Child Support Order May Be Changed

The court considers several things when ordering the payment of child support.

- First, the number of children is considered, along with the percentage of time each parent has physical custody of the children.
- Next, the net disposable incomes of both parents are determined (which is how much money is left each month after taxes and certain other items like health insurance, union dues, or other child support ordered and paid are subtracted from a parent's paycheck). The court can also look at earning ability if a parent is not working.
- The court considers both parents' tax filing status and may consider hardships, such as the cost of raising a child of another relationship who lives with a parent.

A parent can request to change an existing order for child support when circumstances change significantly. For example if the net disposable income of one of the parents changes, parenting time changes, 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, you must fill out one of these forms:

- [Form FL-300](#), *Request for Order or*
- [Form 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, and attach proof of income for the past two months (like your paycheck stubs):

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

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

Contact the family law facilitator in your county. You can find them here: <https://www.courts.ca.gov/selfhelp-facilitators.htm>.

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 may 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 and*
- [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 deliver copies of your filed court forms to the other parent, at least **16 court days** before the hearing. Add **5 calendar days** if delivered 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.

Blank copies of both of these forms must also be served:

- [Form FL-320](#), *Responsive Declaration to Request for Order*
- [Form FL-150](#), *Income and Expense Declaration*

Then the server fills out and signs a *Proof of Service*. Take this form, plus one copy, to the clerk and file it at least one week before your hearing.

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:

- [Form FL-340](#), *Findings and Order After Hearing and*
- [Form 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.

Information About Child Support for Incarcerated or Confined Parents

1. Child support. As of September 27, 2022, child support automatically stops if the parent who has to pay is confined against their will for more than 90 days in a row in jail, prison, juvenile detention, a mental health facility, or other institution.

Exception. Child support does not automatically stop if the parent who has to pay has money available to pay child support.

2. Past confinement. Child support also stops during past confinement if it was ordered from October 8, 2015, through December 31, 2019, or January 1, 2021, through September 26, 2022, and the parent who has to pay was confined for more than 90 days in a row during the same time frame.

Exceptions for past confinement. Child support does not automatically stop if the parent who has to pay was in jail or prison for failing to pay child support or for domestic violence against the other parent or the child, or if they had money available to pay support.

3. Timing. Child support automatically restarts the first day of the 10th month after the parent is released. If you need to change your child support order, see page 2.

Employment before restart date. If the parent who has to pay support starts working before the date child support is set to automatically restart, the person who is owed support or the local child support agency can request the court restart the child support order early. The court may order a different amount of child support if appropriate.

4. More info. For more information about child support and incarcerated parents, see [Family Code section 4007.5](#) or go to <https://selfhelp.courts.ca.gov/child-support/incarcerated-parent>.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER: DRAFT
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EARNING CAPACITY FACTORS ATTACHMENT

**Not approved by
the Judicial Council
FL-302.v3.01302024.WC**

Attachment To:

- | | |
|--|---|
| <input type="checkbox"/> Child Support Information and Order Attachment (form FL-342)

<input type="checkbox"/> Request for Order (form FL-300)

<input type="checkbox"/> Judgment Regarding Parental Obligations (form FL-630)

<input type="checkbox"/> Notice of Motion (form FL-680) | <input type="checkbox"/> Summons and Complaint or Supplemental Complaint Regarding Parental Obligations (form FL-600)

<input type="checkbox"/> Declaration for Amended Proposed Judgment (form FL-616)

<input type="checkbox"/> Other (specify): |
|--|---|

1. Earning capacity factors. (Family Code section 4058(b))

a. **Attachment to judgment or court order (to be completed by court only).**

The court determines that petitioner respondent other parent/party has the capacity to earn \$ _____ per month. This determination is in the best interests of the children, taking into consideration their overall welfare and developmental needs, and the time that parent spends with the children. The factors the court considered are listed below in item 2.

b. **Attachment to request (to be completed by party).**

Petitioner Respondent Other parent/party request the court determine that the petitioner respondent other parent/party has the capacity to earn \$ _____ per month. This request is in the best interests of the children, taking into consideration their overall welfare and developmental needs, and the time that parent spends with the children. The factors that the court is being asked to consider are listed below in item 2.

(If this form is attached to a request or declaration that is made under penalty of perjury, all statements in this attachment are made under penalty of perjury.)

2. Specific circumstances.

The specific circumstances of the parent that demonstrate why the parent has the capacity to earn the amount listed in item 1 are (specify all that apply):

a. The parent's assets (describe):

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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2. b. The parent's residence (*describe*):

c. The parent's employment and earnings history (*describe*):

d. The parent's job skills (*describe*):

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2. e. The parent's education (*check all that apply*):
- (1) Parent completed high school or the equivalent.
 - (2) Parent attended college.
 - (a) Number of years of college completed (*specify*):
 - (b) Degree obtained, if any (*specify*):
 - (3) Parent attended graduate school.
 - (a) Number of years of college completed (*specify*):
 - (b) Degree obtained, if any (*specify*):
 - (4) Parent has a professional or occupational license (*specify*):
 - (5) Parent has vocational training (*specify*):
 - (6) Other (*describe*):

- f. The parent's ability to read and write (*check all that apply*):
- (1) Parent is unable to read write.
 - (2) Parent is able to read write in English.
 - (3) Parent is able to read write in another language (*specify*):
 - (4) Other (*describe*):

g. The parent's age (*describe*):

h. The parent's health (*describe*):

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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2. i. The parent's employment barriers due to incarceration (*describe*):

j. The parent's other employment barriers (*describe*):

k. The parent's record of seeking work (*describe*):

l. The local job market (*describe*):

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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2. m. The availability of employers willing to hire the parent (*describe*):

n. The average earnings in the local community (*describe*):

o. Other relevant background factors affecting the parent's ability to earn (*describe*):

p. Other (*describe*):

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER: DRAFT Not approved by the Judicial Council
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NON-GUIDELINE CHILD SUPPORT FINDINGS ATTACHMENT

FL-342(A)
2024-1-30.WC-MS.v3

- Attachment to Child Support Information and Order Attachment (form FL-342)
 Other (specify):

The court makes the following findings required by Family Code sections 4056, 4057, and 4065:

STIPULATION TO NON-GUIDELINE ORDER

1. The child support agreed to by the parties is below or above the statewide child support guidelines. The amount of support that would have been ordered under the guideline formula is: \$ _____ per month. The parties have been fully informed of their rights concerning child support. Neither party is acting out of duress or coercion. Neither party is receiving public assistance and no application for public assistance is pending. The needs of the children will be adequately met by this agreed-upon amount of child support. If the order is below the guideline, no change of circumstances will be required to modify this order. If the order is above the guideline, a change of circumstances will be required to modify this order.

OTHER REBUTTAL FACTORS

2. **Support calculation**
- a. The guideline amount of child support calculated is: \$ _____ per month payable by petitioner respondent other parent/party
 - b. The court finds by a preponderance of the evidence that rebuttal factors exist. The rebuttal factors result in an increase decrease in child support. The revised amount of support is: \$ _____ per month.
 - c. The court finds the child support amount revised by these factors to be in the best interest of the children and that application of the formula would be unjust or inappropriate in this case under Family Code section 4057(b). These changes remain in effect until (date): _____ until further order
 - d. **The factors are:**
 - (1) The sale of the family residence is deferred under Family Code section 3800, and the rental value of the family residence in which the children reside exceeds the mortgage payments, homeowners insurance, and property taxes by: \$ _____ per month.
 - (2) The parent ordered to pay support has extraordinarily high income, and the amount determined under the guideline would exceed the needs of the children.
 - (3) The parent ordered to pay support person receiving ordered support is not contributing to the needs of the children at a level commensurate with that party's custodial time.
 - (4) After application of the low-income adjustment, guideline child support would be greater than 50 percent of the net disposable income of the parent ordered to pay support.
 - (5) Special circumstances exist in this case. The special circumstances are:
 - (a) The parents have different timesharing arrangements for different children.
 - (b) The parents have substantially equal custody of the children and one parent has a much lower or higher percentage of income used for housing than the other parent.
 - (c) A child has special medical or other needs that require support greater than the formula amount. These needs are (specify): _____
 - (d) Other (specify): _____

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER: DRAFT Not approved by the Judicial Council FL-342 2024-2-1 WC-MS.v7
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CHILD SUPPORT INFORMATION AND ORDER ATTACHMENT

- Attachment to:** Findings and Order After Hearing (form FL-340) Judgment (form FL-180) Judgment (form FL-250) Restraining Order After Hearing (form DV-130) Other (specify):

THE COURT USED THE FOLLOWING INFORMATION IN DETERMINING THE AMOUNT OF CHILD SUPPORT:

1. A printout of a computer calculation and findings is attached and incorporated in this order for all required items not filled out below.

2. **Income**

a. Each parent's monthly income is as follows:

	<u>Gross monthly income</u>	<u>Net monthly income</u>	<u>Receiving TANF/CalWORKs</u>
Petitioner: \$	\$	\$	<input type="text"/>
Respondent: \$	\$	\$	<input type="text"/>
Other Parent/Party: \$	\$	\$	<input type="text"/>

- b. **Earning capacity.** The court finds that the petitioner respondent other parent/party has the ability to earn \$ _____ per month. The factors used to calculate earning capacity under Family Code section 4058(b) are stated In *Earnings Capacity Factors Attachment* (form FL-302) as follows (specify):

3. **Children of this relationship**

- a. Number of children who are the subjects of the support order (specify):
- b. Approximate percentage of time spent with petitioner: _____ %
 respondent: _____ %
 other parent/party: _____ %

4. **Hardships** Hardships for the following have been allowed in calculating child support:

	<u>Petitioner</u>	<u>Respondent</u>	<u>Other Parent/Party</u>	<u>Approximate end date for the hardship</u>
a. <input type="checkbox"/> Other minor children:	\$	\$	\$	
b. <input type="checkbox"/> Extraordinary medical expenses:	\$	\$	\$	
c. <input type="checkbox"/> Catastrophic losses:	\$	\$	\$	

THE COURT ORDERS

5. **Low-income adjustment**
- a. The low-income adjustment applies.
- b. The low-income adjustment has been rebutted and does not apply because (specify reasons):

THIS IS A COURT ORDER.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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6. **Child support**

a. **Base child support**

Petitioner Respondent Other parent/party must pay child support beginning *(date)*:
 and continuing until further order of the court, or until the child marries, dies, is emancipated, reaches age 19, or reaches age 18 and is not a full-time high school student, whichever occurs first, as follows:

<u>Child's name</u>	<u>Date of birth</u>	<u>Monthly amount</u>	<u>Payable to (name):</u>
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Payable on the 1st of the month other *(specify)*:

THE COURT FURTHER ORDERS

6. b. **Mandatory additional child support**

(1) **Childcare** costs related to employment or reasonably necessary job training

- (a) Petitioner must pay: % of total or \$ per month child-care costs.
- (b) Respondent must pay: % of total or \$ per month child-care costs.
- (c) Other parent/party must pay: % of total or \$ per month child-care costs.
- (d) Costs to be paid as follows *(specify)*:

(2) **Reasonable uninsured health-care costs for the children**

- (a) Petitioner must pay: % of total or \$ per month.
- (b) Respondent must pay: % of total or \$ per month.
- (c) Other parent/party must pay: % of total or \$ per month.
- (d) Costs to be paid as follows *(specify)*:

c. **Additional child support**

(1) Costs related to the educational or other special needs of the children

- (a) Petitioner must pay: % of total or \$ per month.
- (b) Respondent must pay: % of total or \$ per month.
- (c) Other parent/party must pay: % of total or \$ per month.
- (d) Costs to be paid as follows *(specify)*:

(2) Travel expenses for visitation

- (a) Petitioner must pay: % of total or \$ per month.
- (b) Respondent must pay: % of total or \$ per month.
- (c) Other parent/party must pay: % of total or \$ per month.
- (d) Costs to be paid as follows *(specify)*:

d. **Non-Guideline Order**

This order is below above the child support guideline set forth in Family Code section 4055. *Non-Guideline Child Support Findings Attachment (form FL-342(A))* is attached.

Total child support per month: \$

THIS IS A COURT ORDER.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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7. Health-care expenses

- a. Health insurance coverage for the minor children of the parties must be maintained by the petitioner respondent other parent/party if available at no or reasonable cost through their respective places of employment or self-employment. Both parties are ordered to cooperate in the presentation, collection, and reimbursement of any health-care claims. 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. Health insurance is not available to the petitioner respondent other parent/party at a reasonable cost at this time.
- c. The party providing coverage must assign the right of reimbursement to the other party.

8. Earnings assignment

An earnings assignment order is issued. **Note:** The parent ordered to pay support is responsible for the payment of support directly to the recipient until support payments are deducted from the payor's wages and for payment of any support not paid by the assignment.

- g. In the event that there is a contract between a parent receiving ordered support and a private child support collector, the parent 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 of past due support 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 parent receiving ordered support, jointly.

10. **Employment search order (Family Code section 4505)**

Petitioner Respondent Other parent/party is ordered to seek employment with the following terms and conditions:

11. **Other orders (specify):**

12. Notices

- a. *Notice of Rights and Responsibilities Regarding Child Support (form FL-192)* must be attached and is incorporated into this order.
- b. If this form is attached to *Restraining Order After Hearing (form DV-130)*, the support orders issued on this form (form FL-342) remain in effect after the restraining orders issued on form DV-130 end.

13. Child Support Case Registry Form

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. Thereafter, the parties must notify the court of any change in the information submitted within 10 days of the change by filing an updated form.

NOTICE: Any parent ordered to pay child support must pay interest on overdue amounts at the legal rate, which is currently 10 percent per year.

THIS IS A COURT ORDER.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address): _____	TELEPHONE NO.:	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:		
PETITIONER/PLAINTIFF:		
RESPONDENT/DEFENDANT:		
APPLICATION FOR EXPEDITED CHILD SUPPORT ORDER		CASE NUMBER:

Notice to applicant: This form must be served on you if it is filed with the court.

To (name):

1. I am requesting the court to order you to pay child support in the sum of: \$ _____ per month until trial of this action. (See item 2 of the proposed *Expedited Child Support Order* attached to this form.) Attached is a completed Income and Expense Declaration (form FL-15) for each parent and a worksheet showing the basis for the support.

2. I am receiving am not receiving intend to apply for public assistance for the child or children listed in the proposed order.

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)

IF YOU DO NOT WANT TO PAY THE AMOUNT OF CHILD SUPPORT ASKED FOR, YOU MUST FILE A WRITTEN RESPONSE WITHIN 30 DAYS AND ASK FOR A COURT HEARING. The necessary forms (three blank copies of the *Response to Application for Expedited Child Support Order and Notice of Hearing*, and three blank copies of the *Income and Expense Declaration* (form FL-15)) are attached. You do not have to pay any fee for filing the *Response* (form FL-381).

Contact the clerk's office by telephone or in person and ask for a date for a hearing. The hearing date must be at least 20 days and not more than 30 days after you file the *Response to Application for Expedited Child Support Order* (form FL-381). Complete and file the *Response* after serving a copy on the other parent. You must have someone at least 18 years old, other than you, serve the forms. Have that person mail the papers to the address of the other parent or attorney for the other parent as shown on the top of the *Application*, or have that person personally give the papers to the other parent or attorney for the other parent. See the back of the *Response* for details. Have the person serving the *Response* complete and sign the *Proof of Service* on the back of the *Response*.

If you have this matter set for hearing, you must bring a copy of your most recent federal and state income tax return (whether individual or joint) to the hearing. You may examine the other parent's tax return and ask questions about it. The other parent may examine your tax return and ask questions about it. If you cannot find a copy of your tax return you must ask for a copy from the Internal Revenue Service and State Franchise Tax Board.

Tell them your name, the year of the return, your social security number, and the address to which they should mail the return. Sign the letter in the same way as you signed your tax return. Make a copy of the letter before you mail the original and bring it to the hearing.

If you have not filed a tax return for the last three years, you do not need to bring any return.

- IMPORTANT WARNING -

Unless you file a written response **within 30 calendar days** from the date this form is served on you, and ask the court for a hearing, you will be ordered to pay child support in the amount shown.

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT:	CASE NUMBER:
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PROOF OF SERVICE — APPLICATION FOR EXPEDITED CHILD SUPPORT ORDER

1. I served the

a. *Application for Expedited Child Support Order* (form FL-380), proposed *Expedited Child Support Order* (form FL-382), a completed *Income and Expense Declaration* (form FL-150) for both parents, a worksheet setting forth the basis of the amount of support requested, three blank copies of the *Income and Expense Declaration* (form FL-150) and three blank copies of the *Response to Application for Expedited Child Support Order and Notice of Hearing* (form FL-381).

b. on petitioner/plaintiff respondent/defendant

c. by serving petitioner/plaintiff respondent/defendant
 other (name and title or relationship to person served):

d. by delivery at home at business
 (1) date:
 (2) time:
 (3) address:

e. By mailing
 (1) date:
 (2) place:

2. Manner of service (check proper box):

a. **Personal service.** Personally delivering copies. (CCP 415.10)

b. **Substituted service on natural person.** By leaving copies at the dwelling house, usual place of abode, or usual place of business of the person served in the presence of a competent member of the household or a person apparently in charge of the case or place of business, at least 18 years of age, who was informed of the general nature of the papers, and thereafter mailing (by first-class mail, postage prepaid) copies to the person served at the place where copies were left. (CCP 415.20(b)) **(Attach separate declaration or affidavit stating acts relied on to establish reasonable diligence in first attempting personal service.)**

c. **Mail and acknowledgment service.** By mailing (by first-class mail or airmail, postage prepaid) copies to the person served, together with two copies of the form of notice and acknowledgment and a return envelope, postage prepaid, addressed to the sender. (CCP 415.30) **(Attach completed acknowledgment of receipt.)**

d. **Certified or registered mail service.** By mailing to an address outside California (by first-class mail, postage prepaid, requiring a return receipt) copies to the person served. (CCP 415.40) **(Attach signed return receipt or other evidence of actual delivery to the person served.)**

3. At the time of service I was at least 18 years of age and not a party to this action.

4. Fee for service: \$

5. Person serving:

a. California sheriff, marshal, or constable.

b. Registered California process server.

c. Employee or independent contractor of a registered California process server.

d. Not a registered California process server.

e. Exempt from registration under Business Prof. Code, § 22350(b).

f. Name, address, telephone number, and, if applicable, county of registration and number:

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

Date:

(For California sheriff, marshal, or constable use only)

I certify that the foregoing is true and correct.

Date:

 (SIGNATURE)

 (SIGNATURE)

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address):	TELEPHONE NO.:	FOR COURT USE ONLY
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF		
STREET ADDRESS:		
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME:		
PETITIONER/PLAINTIFF:		
RESPONDENT/DEFENDANT:		
RESPONSE TO APPLICATION FOR EXPEDITED CHILD SUPPORT ORDER AND NOTICE OF HEARING		CASE NUMBER:

To (name):

1. I object to the proposed expedited child support order for the following reasons (check one or more):

- a. I am not the parent of the child or children involved in this action.
- b. My income is incorrectly stated in the application.
- c. The other parent's income is incorrectly stated in the application.
- d. I am entitled to hardship deductions as shown in the attached *Income and Expense Declaration* (form FL-150).
- e. The other parent is not entitled to hardship deductions claimed in the application.
- f. The amount of support is incorrectly computed.
- g. other (specify):

2. I have attached a completed copy of my *Income and Expense Declaration* (form FL-150).

At my request, the court has set a hearing on the application as follows:

a. Date:	Time:	<input type="checkbox"/> Dept.	<input type="checkbox"/> Rm.:
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b. The address of the court is shown above is:

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)

You must bring a copy of your most recent federal and state income tax return (whether individual or joint) to the hearing or declare at the hearing that it doesn't exist or that you don't have it and have requested it from the Internal Revenue Service and Franchise Tax Board. Otherwise the court may grant the other party's request.

PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	

PROOF OF SERVICE BY PERSONAL SERVICE MAIL

Service of the response on the other party may be made by anyone at least 18 years of age EXCEPT you. Service is made in one of the following ways:

(1) Personally delivering it to the attorney for the other party or, if no attorney for the other party.

OR

(2) Mailing it, postage prepaid, to the last known address of the attorney for the other party or, if no attorney, to the other party.

Anyone at least 18 years of age **EXCEPT ANY PARTY** may personally serve or mail the response. Be sure whoever served the response fills out and signs this proof of service. File this proof of service with the court as soon as the response is served.

1. At the time of service I was at least 18 years of age and **not a party to this legal action.**
2. I served a copy of the *Response to Application for Expedited Child Support Order and Notice of Hearing* as follows (check either a or b below):
 - a. **Personal service.** I personally delivered the response as follows:
 - (1) Name of person served:
 - (2) Address where served:
 - (3) Date served:
 - (4) How served:
 - b. **Mail.** I deposited the response in the United States mail in a sealed envelope with postage fully prepaid. The envelope was addressed as follows:
 - (1) Name of person served:
 - (2) Address:
 - (3) Date of mailing:
 - (4) Place of mailing (*city and state*):
 - (5) I am a resident of or employed in the county where the response was mailed.
 - c. My residence or business address is (*specify*):
 - d. My phone number is (*specify*):

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 OF PERSON WHO SERVED THE RESPONSE) (SIGNATURE OF PERSON WHO SERVED THE RESPONSE)

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address): 	TELEPHONE NO.:	FOR COURT USE ONLY
ATTORNEY FOR (Name): SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:		
PETITIONER/PLAINTIFF:		
RESPONDENT/DEFENDANT:		
EXPEDITED CHILD SUPPORT ORDER <input type="checkbox"/> Proposed		CASE NUMBER:

THE COURT FINDS No Response to Application for Expedited Child Support Order has been filed and 30 days have elapsed since service of the application on the other parent on (date):

THE COURT ORDERS Pending trial or until further order of this court:

- Existing orders will continue in effect except as modified by this order.
- Support of the minor children of the parties is fixed as follows beginning on (date):

<u>Child's name</u>	<u>Monthly amount</u>	<u>Payable by</u>	<u>Payable to</u>	<u>Payable on (dates)</u>
---------------------	-----------------------	-------------------	-------------------	---------------------------
- The maximum deductions allowed for extreme financial hardship total: \$
- The hardship deduction is allowed for the period beginning (date): _____ and ending (date): _____
- The payments for monthly child support will change as follows beginning on (date): _____

<u>Child's name</u>	<u>Monthly amount</u>	<u>Payable by</u>	<u>Payable to</u>	<u>Payable on (dates)</u>
---------------------	-----------------------	-------------------	-------------------	---------------------------
- Child support payments must continue until further order of the court, or until the child marries, dies, is emancipated, reaches age 19, or reaches age 18 and is not a full-time high school student residing with a parent, whichever occurs first.

Date: _____ JUDICIAL OFFICER

— NOTICE —

AN EARNINGS ASSIGNMENT WILL BE OBTAINED WITHOUT FURTHER NOTICE TO YOU IF YOU FAIL TO PAY ANY COURT-ORDERED CHILD SUPPORT OR IF REQUESTED BY THE LOCAL CHILD SUPPORT AGENCY.

THIS ORDER IS ENFORCEABLE AS SOON AS IT HAS BEEN SIGNED BY A JUDICIAL OFFICER.

ANY PARTY REQUIRED TO PAY CHILD SUPPORT MUST PAY INTEREST ON OVERDUE AMOUNTS AT THE "LEGAL" RATE, WHICH IS CURRENTLY 10 PERCENT. THIS CAN BE A LARGE ADDED AMOUNT.

GOVERNMENTAL AGENCY (under Family Code, §§ 17400, 17406): TELEPHONE NO.: _____ FAX NO.: _____ EMAIL ADDRESS: _____ ATTORNEY FOR (name): _____	FOR COURT USE ONLY DRAFT Not approved by the Judicial Council FL-530.v5.02012024.wc
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	
JUDGMENT REGARDING PARENTAL OBLIGATIONS (UIFSA) <input type="checkbox"/> AMENDED <input type="checkbox"/> SUPPLEMENTAL	CASE NUMBER:

1. a. **NOTICE TO RESPONDENT: THIS IS A PROPOSED JUDGMENT.** This *Judgment Regarding Parental Obligations (UIFSA)* may be entered by the court and may become legally binding unless you fill out and file the *Response to Uniform Support Petition (UIFSA)* (form FL-520) with the court clerk within 30 days of the date you were served with the *Summons (UIFSA)* (form FL-510) and *Uniform Support Petition* (form OMB 0970-0085). If you need a *Response* form, you may get one from the local child support agency, the court clerk, or the family law facilitator. The family law facilitator will help you fill out the forms. To file the *Response*, follow the procedures listed in the information sheet attached to that form.
- b. **NOTICE: THIS IS A JUDGMENT.** It is now legally binding.
2. **THIS MATTER PROCEEDED AS FOLLOWS:**
 - a. Judgment entered under Family Code section 17430(a).
 - b. By court hearing, appearances as follows:
 - (1) Date: _____ Dept: _____ Judicial Officer: _____
 - (2) Judgment entered by default after court hearing (Fam. Code, §§ 17404.1(c) and 17430(b)(3)).
 - (3) Petitioner present Attorney present (name): _____
 - (4) Respondent present Attorney present (name): _____
 - (5) Other parent/party present Attorney present (name): _____
 - (6) Local child support agency (Family Code, §§ 17400, 17406) (name): _____
 - (7) Other (specify): _____
 - c. The parent ordered to pay support is the petitioner respondent other parent/party.
3. This order is based on earning capacity because the earning capacity of the parent ordered to pay support is greater than their known actual income the actual income of the parent ordered to pay support is unknown. The factors used to determine earning capacity under Family Code section 4058(b) are stated
 - a. in *Earnings Capacity Factors Attachment* (form FL-302)
 - b. as follows (specify): _____

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.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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- 4. Attached is a computer printout showing the parents' income and percentage of time each parent spends with the children. The printout, which shows the calculation of child support payable, will become the court's findings.
- 5. The order is based on the attached documents (*specify*):

6. THE COURT ORDERS:

- a. The parent ordered to pay support is the parent of the children named in item 6b.
 has previously been determined to be the parent of the children named in item 6b.

b. The parent ordered to pay support must pay current child support as follows:

Name of child	Date of birth	Monthly support amount
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- (1) Mandatory additional child support.
 - (a) The parent ordered to pay support must pay additional monthly support for reasonable **childcare** costs, as follows:
 One-half or % or (*specify amount*): \$ _____ per month of the costs
 Payments must be made to the other parent/party State Disbursement Unit child-care provider.
 - (b) The parent ordered to pay support must pay reasonable uninsured health-care costs for the children, as follows:
 One-half or % or (*specify amount*): \$ _____ per month of the costs
 Payments must be made to the other parent/party State Disbursement Unit health-care provider.

(2) Other (*specify*):

(3) For a total of: \$ _____ payable on the: _____ day of each month
 beginning (*date*):

(4) The low-income adjustment applies.

The low-income adjustment **has been rebutted and** does not apply because (*specify reasons*):

(5) Any support ordered will continue until further order of court, unless terminated by operation of law.

- c. The parent ordered to pay support The **person receiving ordered support** must (1) provide and maintain health insurance coverage for the children, if available at no or reasonable cost, and keep the local child support agency informed of the availability of the coverage (the cost is presumed to be reasonable if it does not exceed 5 percent of gross income to add a child); (2) if health insurance is not available, provide coverage when it becomes available; (3) within 20 days of the local child support agency's request, complete and return a health insurance form; (4) provide to the local child support agency all information and forms necessary to obtain health-care services for the children; (5) present any claim to secure payment or reimbursement to the other parent or caretaker who incurs costs for health-care services for the children; and (6) assign any rights to reimbursement to the other parent or caretaker who incurs costs for health-care services for the children. 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.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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6. d. The parent ordered to pay support must pay child support for the past periods and in the amounts set forth below:

Name of child	Date of birth	Period of support	Amount
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(1) Other (specify):

(2) For a total of: \$ _____ payable: \$ _____ on the: _____ day of each month beginning (date): _____

(3) Interest accrues on the entire principal balance owing and not on each installment as it becomes due.

e. No provision of this judgment operates to limit any right to collect the principal (total amount of unpaid support) or to charge and collect interest and penalties as allowed by law. All payments ordered are subject to modification.

f. All payments, unless specified in item 6b(1) above, must be made to the State Disbursement Unit at the following address:
California State Disbursement Unit, P.O. Box 989067, West Sacramento, CA 95798-9067.

g. **An earnings assignment order is issued.**

h. In the event that there is a contract between a person receiving ordered support and a private child support collector, the parent 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 of past due support 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 person receiving ordered support, jointly.

i. If "The parent ordered to pay support" box is checked in item 6c, a health insurance coverage assignment must issue.

j. The parents must notify the local child support agency in writing within 10 days of any change in residence or employment.

k. *Notice of Rights and Responsibilities Regarding Child Support Order* (form FL-192) is attached.

l. The court further orders (specify):

Date: _____

Number of pages attached: _____

 JUDICIAL OFFICER
 SIGNATURE FOLLOWS LAST ATTACHMENT

Approved as conforming to court order.
 Date: _____

(SIGNATURE OF PARENT ORDERED TO PAY SUPPORT OR THEIR ATTORNEY)

GOVERNMENTAL AGENCY (under Fam. Code, §§ 17400 and 17406): TELEPHONE NO.: _____ FAX NO.: _____ EMAIL ADDRESS: _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY DRAFT Not approved by the Judicial Council FL-600 2024-2-1 WC-MS.v8
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	
<input type="checkbox"/> SUMMONS AND COMPLAINT <input type="checkbox"/> SUPPLEMENTAL COMPLAINT <input type="checkbox"/> AMENDED COMPLAINT REGARDING PARENTAL OBLIGATIONS	CASE NUMBER: _____

TO (name):

The local child support agency has filed this lawsuit against you. This lawsuit says you and the other parent are the parents of each child named in this *Complaint* and that the obligor may be required to pay child support. The attached proposed *Judgment Regarding Parental Obligations* (form FL-630) names you and the other parent as parents of each child listed below and, if there is an amount stated in item 6 of the proposed **Judgment**, orders the obligor to pay support for these children. If you disagree with the proposed **Judgment**, you must file the attached **Answer** (form FL-610) with the court clerk **within 30 days of the date that you were served with this Complaint**. **If the amount of child support in the proposed Judgment is based on actual income and you do not file an Answer, the proposed Judgment will become a final determination that you are the parent and responsible for support. If the amount of child support in the proposed Judgment is based on earning capacity, the court will hold a hearing before entering a judgment. If you do not file an answer or appear at the hearing, the court will enter a judgment without your input. If you are required to pay child support, the payments may be taken from your pay or other property without further notice. See the attached statement of your rights and responsibilities for more information.**

[Proposed revisions in Spanish are pending.] La agencia local que vigila la manutención de menores ha registrado la presente demanda contra usted. Esta demanda dice que usted y el otro padre son los padres de los hijos nombrados aquí y que el obligado deberá pagar manutención de menores. El propuesto FALLO RESPECTO A OBLIGACIONES PATERNAS (Gubernamental) (formulario FL-630) los nombra a usted y al otro padre como padres de cada uno de los hijos que figuran a continuación y, si se incluye una suma en el inciso 6, obliga al obligado a pagar manutención por estos hijos. Si no está de acuerdo con el FALLO propuesto, deberá registrar el formulario de RESPUESTA que se adjunta, presentándolo al actuario del tribunal dentro de 30 días después de haber recibido notificación de esta DEMANDA. Si usted no registra una RESPUESTA, el FALLO propuesto tomará efecto con una determinación final de paternidad. Si se le está exigiendo que pague manutención de menores, los pagos podrán ser deducidos de su salario o de otras pertenencias suyas sin necesidad de mandarle ninguna otra notificación. Para mayor información, vea la declaración anexa respecto a los derechos y responsabilidades que tiene.

	<p>Notice to person served: You are served</p> <p>1. <input type="checkbox"/> as an individual defendant/respondent.</p> <p>2. <input type="checkbox"/> on behalf of a minor child or children.</p> <p>3. <input type="checkbox"/> other (<i>specify</i>): _____</p> <p>Date: _____ Clerk, by _____, Deputy</p>
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PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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1. The local child support agency is asking the court to issue judgment or orders for the following children:

Name	Date of Birth	Establish Parentage	Establish Support	Modify Order	Beginning Date
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Additional children are listed on a page (labeled Attachment 1) attached to this *Complaint*.

2. a. The parents of the children named in item 1 are (*specify name*):

(*specify name*):

b. (*Specify name*): _____ is named as the parent of the children listed in item 1 in the declaration of parentage on file with the local child support agency or the county welfare department.

c. The obligor (the parent asked to pay support) is (*specify*):

3. Complete the following section if support is being requested but the "Establish Parentage" box has not been checked in item 1. Please specify each child. You do not need to complete this section if a final judgment of parentage was previously entered under this case number.

a. A voluntary declaration of parentage or paternity that has not been canceled and was signed by both parents has been forwarded to the California Department of Child Support Services for the following children (*specify*):

b. The following are named as children of the marriage in a family law judgment in (*specify county and state*) _____ in case number (*specify*) _____ for the following children (*specify*):

c. Judgment of parentage has previously been entered in (*specify county and state*) _____ in case number (*specify*) _____ for the following children (*specify*):

d. Other (*specify*):

(*Names of children*):

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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4. a. Some or all of the children named in item 1 are receiving or have received public assistance from the following counties (specify):
- b. Date public assistance first paid:

5. Other (specify):

THE LOCAL CHILD SUPPORT AGENCY REQUESTS THAT:

6. The court determine that the persons listed in item 2 are the parents of the children listed in item 1 for whom the "Establish Parentage" boxes have been checked.

7. Based on the California support guideline, the court order the obligor to pay:

a. \$ _____ current monthly child support based on the obligor's known actual income of \$ _____ per month, and, if applicable, the obligee's known actual income of \$ _____ per month.

b. \$ _____ current monthly child support based on the obligor's earning capacity of \$ _____ per month because (check one):

- (1) the obligor's earning capacity is greater than the obligor's known actual income.
- (2) the obligor's actual income is unknown.
- (3) The obligor's earning capacity was determined based on a consideration of the following factors

(check all that apply):

- | | |
|--|--|
| (a) <input type="checkbox"/> Assets | (b) <input type="checkbox"/> Age |
| (c) <input type="checkbox"/> Residence | (d) <input type="checkbox"/> Health |
| (e) <input type="checkbox"/> Work and earnings history | (f) <input type="checkbox"/> Incarceration |
| (g) <input type="checkbox"/> Job skills | (h) <input type="checkbox"/> Employment Barriers |
| (i) <input type="checkbox"/> Education | (j) <input type="checkbox"/> Local job market |
| (k) <input type="checkbox"/> Record of seeking work | (l) <input type="checkbox"/> Availability of employers willing to hire |
| (m) <input type="checkbox"/> Ability to read and write | (n) <input type="checkbox"/> Average earnings in local community |
| (o) <input type="checkbox"/> Other (specify): | |

c. \$ _____ additional monthly child support for the following reasons (specify):

- d. The court issue appropriate orders for sharing the costs of
- (1) childcare (specify):
 - (2) health care (specify):

e. Other (specify):

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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- 8. The court order the obligor to provide health insurance for each child named in item 1 if available at no or reasonable cost; to keep the local child support agency informed of the availability of the coverage; and to complete and return, within 20 days of the local child support agency's request, a health insurance form and that a *National Medical Support Notice* be issued. If health insurance is not available at no or reasonable cost, that the court orders obligor to provide coverage when it becomes available. **NOTICE:** The obligor's employer or other person providing health insurance will be ordered to enroll the children in an appropriate health insurance plan if the obligor is found to be the parent.
- 9. A wage and earnings assignment be issued.
- 10. The court order the parents to advise the local child support agency within 10 days in writing of any change in residence or employment.
- 11. The court order the obligor to make all payments to (*specify*):
- 12. The other parent be added as a party to this case.
- 13. Number of pages attached: _____

<p>NOTICE</p> <ul style="list-style-type: none"> • Child support: The court will make orders for the support of the children upon request and submission of financial forms by the requesting party. • If you want legal advice, contact a lawyer immediately. • A Statement of Rights and Responsibilities is attached to this document. Please read it carefully.

Date: _____

(TYPE OR PRINT NAME)



(ATTORNEY FOR LOCAL CHILD SUPPORT AGENCY)

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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Hearing by Court Commissioner

This case may be referred to a court commissioner for hearing. By law, court commissioners do not have the authority to issue final orders and judgments in contested cases unless they are acting as temporary judges. The court commissioner in your case will act as a temporary judge unless, *before the hearing, you* or any other party objects to the commissioner acting as a temporary judge. You can object to the commissioner acting as a temporary judge in one of two ways: (1) by telling the commissioner in court, at the start of your hearing, that you object or (2) by delivering a written objection to the court clerk. You must object before the hearing in your case begins. You do not have to give a reason for your objection. The court commissioner may still hear your case to make findings and a recommended order. If you do not like the recommended order, you must object to it within 10 court days in writing (use *Notice of Objection* (form FL-666)); otherwise, the recommended order will become a final order of the court). If you object to the recommended order, a judge will make a temporary order and set a new hearing.

Family Law Facilitator

Each superior court has a family law facilitator's office to provide education, information, and assistance to parents who have child support issues. The basic duties of the family law facilitator include:

- Providing educational materials;
- Distributing court forms;
- Providing assistance in completing forms;
- Preparing child support guideline calculations; and
- Providing referrals to the local child support agency, family court services, and other community agencies.

The family law facilitator is a neutral person whose services are available to any person who is NOT represented by an attorney. Both parties in the same case may receive assistance from the family law facilitator. There is no attorney-client privilege between the family law facilitator and any person assisted by the family law facilitator, and matters discussed with the family law facilitator are not confidential. No person can be represented by the family law facilitator.

STATEMENT OF RIGHTS AND RESPONSIBILITIES

NOTICE to the respondent: The proposed *Judgment Regarding Parental Obligations* (form FL-630) may be entered against you unless you file your written *Answer to Complaint or Supplemental Complaint Regarding Parental Obligations* (form FL-610) with the court clerk within 30 days of the date you were served with the Complaint. The proposed Judgment may be entered whether or not you have a lawyer. If you were served with a form telling you the date of a court hearing, you should go to court on that date. An order may be entered without your input if you do not attend the hearing.

[Proposed revisions in Spanish are pending.] AVISO para el acusado: El FALLO propuesto entrará en efecto contra usted, a menos que dentro de 30 días desde cuando recibió notificación de la DEMANDA, usted registre por escrito una RESPUESTA A DEMANDA o DEMANDA SUPLEMENTAL RESPECTO A OBLIGACIONES PATERNAS (Gubernamental) (formulario 610). El FALLO propuesto entrará en efecto contra usted, tenga o no tenga usted un abogado. Si le dieron notificación con un formulario que especifica una fecha de audiencia, usted tiene que presentarse al tribunal en esa fecha. Si no asiste a la audiencia, una orden judicial podrá emitirse sin considerar su punto de vista.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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NOTICE TO BOTH PARENTS

The local child support agency has sued both of you to determine whether you are the parents of the children listed and if one or both of you should be ordered to pay child support. The local child support agency does not represent any individual in this lawsuit, including either parent or the children. Carefully read this statement and the other papers that you received.

You have the right to be represented by a lawyer. If you dispute that you are the parent of the children listed in the *Complaint* and you do not have enough money for a lawyer, you may ask the court to appoint a lawyer to represent you on the issue of parentage.

Other information about court-appointed lawyers (specify):

A blank *Answer to Complaint or Supplemental Complaint Regarding Parental Obligations (form FL-610)* is included in the papers that were served on you. If you did not receive an *Answer* form or if you would like another copy, you may get one from the local child support agency, the court clerk's office, or the family law facilitator. The family law facilitator can assist you in filling out the *Answer* form. **You must file your *Answer* form with the court clerk within 30 days of the date you were served with the *Complaint* whether or not you obtain an attorney.**

Settling Out of Court

You may contact the local child support agency to try to work out a settlement agreement. However, you must still file an *Answer* form within 30 days. If you and the local child support agency can reach an agreement regarding the requests made in the *Complaint*, you may sign a settlement agreement called a **stipulation**. By signing a stipulation, you are agreeing to give up your rights explained in this statement, you are agreeing that you are the parent of the children listed in the *Complaint*, and you are agreeing to obey all of the terms of the stipulation. The stipulation will become a court order that you must obey.

Going to Court

If you file your *Answer* form, you have the right to a court hearing, to subpoena witnesses, to ask questions of any witness against you, and to present evidence on your behalf. **If the amount of child support requested in the *Complaint* is based on earning capacity, the court will hold a hearing even if you do not file an answer.** Genetic testing may be performed if the respondent questions parentage of the children listed in the *Complaint*. If the respondent refuses to cooperate in the genetic testing process, the issue of parentage may be resolved against the respondent. The costs of the genetic testing may be charged to one of you.

Earnings Assignment

All orders for support must contain an earnings assignment. If you are obligated to pay support, this assignment will require your employer or other payor to deduct support payments from your salary or earnings and send the payments to the local child support agency. Your employer may also be required to enroll your children in a health insurance plan and deduct the cost from your salary or earnings.

Any amounts you owe may be collected from your property, whether or not you are current in your payments toward past due support. Collection may be made by taking money owed to you by the state or federal government (such as tax refunds, unemployment and disability benefits, and lottery winnings), by taking property you own, by placing a lien on your property, or by any other lawful means. You may be fined or imprisoned if you fail to pay support as ordered.

If the local child support agency does not know how much money the obligor (parent asked to pay support) earns, the local child support agency will base the child support amount stated in item 6b of the proposed *Judgement Regarding Parental Obligations (form FL-630)* on the obligor's earning capacity after review of the factors stated in Family Code section 4058(b)(2).

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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Other Important Information

Both parents should tell the local child support agency everything they know about the other parent's earnings, assets, work history, job skills, education, and any other specific circumstances that may affect earning capacity (see item 7b of the *Complaint*).

The respondent is always a party to this action. If the other parent has requested or is receiving services from the local child support agency, that parent will become a party to the lawsuit filed by the local child support agency after the initial support order or medical support order is entered by the court. After the other parent has become a party to the lawsuit, either parent may then ask the court to decide issues concerning support, custody, visitation, and restraining orders (domestic violence). No other issues may be raised in this lawsuit. Either parent may go to court to modify the court order. The local child support agency cannot bring proceedings to establish or modify custody, visitation, or restraining orders.

After the other parent has become a party to the lawsuit, either parent may go to court to enforce the existing order against the other, but must first notify the local child support agency as required by law. The local child support agency is allowed 30 days to determine whether or not a parent will be permitted to proceed with the enforcement action against the other parent. The local child support agency may deny a parent permission to proceed if it is currently taking enforcement action or if the action by a parent would interfere with an investigation. If the local child support agency does not respond to the notice by the parent seeking enforcement within 30 days or if the local child support agency notifies the parent seeking enforcement that the enforcement action can proceed, the parent may then file the enforcement action as long as all support is paid through the local child support agency.

If the custodial person receives public assistance, the local child support agency may agree to settle any parentage or support issue in this lawsuit without providing advance notice to the custodial person. A child support agency may not settle any child support issue without the consent of any parent who is an applicant for child support services and who does not receive public assistance.

The local child support agency is required, under section 466(a)(13) of the Social Security Act, to place in the records pertaining to child support the social security number of any individual who is subject to a divorce decree, support order, or parentage determination or acknowledgment. This information is mandatory and will be kept on file at the local child support agency.

Your family law facilitator is available to help you with any questions you may have about the above information. You can find information about the family law facilitator in your county or the county where the case is filed at www.courts.ca.gov/selfhelp-facilitators.htm

You can reach your family law facilitator in the county where the case is filed by telephone at:

or in person at:

For more information on finding a lawyer or family law facilitator, see the Self-Help Guide to the California Courts at <https://selfhelp.courts.ca.gov/>.

PARTY WITHOUT ATTORNEY OR ATTORNEY <i>(Name, state bar number, and address):</i> TELEPHONE NO.: _____ FAX NO. <i>(Optional):</i> _____ EMAIL ADDRESS: _____ ATTORNEY FOR <i>(Name):</i> _____	FOR COURT USE ONLY DRAFT Not approved by the Judicial Council FL-610.v4.02012024.wc
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: _____ MAILING ADDRESS: _____ CITY AND ZIP CODE: _____ BRANCH NAME: _____	
PETITIONER: _____ RESPONDENT: _____ OTHER PARENT/PARTY: _____	
ANSWER TO COMPLAINT OR SUPPLEMENTAL COMPLAINT REGARDING PARENTAL OBLIGATIONS	CASE NUMBER: _____

YOU MUST FILE THIS ANSWER WITH THE COURT IF YOU WISH TO OPPOSE THE LAWSUIT

If you disagree with the proposed judgment attached to the *Summons and Complaint*, you must file this *Answer* with the court clerk within 30 days of the date you were served with the *Complaint*. File the original *Answer* with the court clerk at the address for the superior court stated above and serve a copy on the local child support agency. Keep a copy for your records.

1. PARENTAGE:

a. I am the parent of the following children

	Name of Child	Date of Birth	
<input type="checkbox"/> Yes			<input type="checkbox"/> No
<input type="checkbox"/> Yes			<input type="checkbox"/> No
<input type="checkbox"/> Yes			<input type="checkbox"/> No
<input type="checkbox"/> Yes			<input type="checkbox"/> No
<input type="checkbox"/> Yes			<input type="checkbox"/> No
<input type="checkbox"/> Yes			<input type="checkbox"/> No

Additional children are listed on a page attached to this *Answer*.

b. I request genetic testing to determine parentage be done for all children for whom I have checked a "No" box above. I understand that the local child support agency will pay for the cost of the testing now, but that I may have to repay those costs if the court decides that I am the parent.

2. CHILD SUPPORT

- a. I agree to pay support as stated in the proposed judgment.
- b. I disagree with the support requested. Attached is my completed *Income and Expense Declaration* (form FL-150) or *Financial Statement (Simplified)* (form FL-155). NOTE: You can file this *Answer* without either of these forms.

3. CHILDCARE COSTS:

- a. I agree with the requested order for childcare costs in the proposed judgment.
- b. I disagree with the requested order for childcare costs.

4. UNINSURED HEALTH-CARE COSTS:

- a. I agree with the requested order for uninsured health-care costs stated in the proposed judgment.
- b. I disagree with the requested order for uninsured health-care costs.

5. I disagree with the proposed judgment for the following reasons (*specify*):

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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6. My address and telephone number for receipt of all notices and court dates until I file a change with the court and with the local child support agency are as follows:

- Address:
- City and Zip Code:
- Home Telephone:
- Work Telephone:
- Email Address (optional):

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)

An adult other than you must complete the Proof of Service below and provide a copy of this Answer to the local child support agency at the following address (specify):

PROOF OF SERVICE

6. I am at least 18 years of age, and not a party to this action. I served this Answer and any other forms filed with the Answer on the local child support agency and any other party required to be served.
- a. **Personal delivery.** I personally delivered this Answer to an employee of the local child support agency as follows:
 - (1) Name of employee:
 - (2) Address where delivered:
 - (3) Date of delivery:
 - (4) Time of delivery:
 - b. **Mail.** I deposited this Answer in the United States mail, in a sealed envelope with postage fully prepaid. I used first-class mail. The envelope was addressed and mailed as follows:
 - (1) Name:
 - (2) Address:
 - (3) Date of mailing:
 - (4) Place of mailing (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 PERSON WHO SERVED ANSWER)

This case may be referred to a court commissioner for hearing. By law, court commissioners do not have the authority to issue final orders and judgments in contested cases unless they are acting as temporary judges. The court commissioner in your case will act as a temporary judge unless, before the hearing, you or any other party objects to the commissioner acting as a temporary judge. The court commissioner may still hear your case to make findings and a recommended order. If you do not like the recommended order, you must object to it within 10 court days in writing (use Notice of Objection (Governmental) (form FL-666)); otherwise, the recommended order will become a final order of the Court. If you object to the recommended order, a judge will make a temporary order and set a new hearing.

INFORMATION SHEET FOR ANSWER TO COMPLAINT

Please follow these instructions to complete the *Answer to Complaint or Supplemental Complaint Regarding Parental Obligations* (form FL-610) if you do not have an attorney to represent you. Your attorney, if you have one, should complete this form.

You must file the completed *Answer* and attachments with the court clerk within 30 days of the date you received the *Summons and Complaint* (form FL-600). The address of the court clerk is the same as the one shown for the Superior Court on the *Summons and Complaint* (form FL-600). There is no fee to file an answer in this case. **Keep two copies of the filed *Answer* form and its attachments. Serve one copy on the local child support agency and keep the other copy for your records. (See *Information Sheet for Service of Process* (form FL-611).)**

Upon receipt of your filed *Answer*, the local child support agency will set a court hearing on this matter.

INSTRUCTIONS FOR COMPLETING THE ANSWER FORM (TYPE OR PRINT FORM IN BLACK INK):

Front page, first box, top of form, left side. Print your name, address, and telephone number in this box if they are not already there.

1.
 - a. For each child listed on the *Answer* form, you must check the "yes" box if you agree that you are that child's parent, or check the "no" box if you do not think or are not sure whether you are that child's parent. You must write in the name of each child listed in the *Summons and Complaint* (form FL-600) if your *Answer* form does not include the names of any children.
 - b. If you have checked a "no" box in answer to number 1 above, you must request genetic testing to determine whether you or the other parent is the parent. The local child support agency will tell you when and where to go for the test. The local child support agency will pay for the cost of the test now. If the court decides the test shows parentage as pleaded in the *Complaint*, you may have to repay this cost to the local child support agency.

NOTE: Checking the "no" box does not satisfy the requirements needed to request the court cancel (set aside) any voluntary declaration of parentage or paternity which you may have signed or to request the court find a voluntary declaration is void (invalid) (Fam. Code, §§ 7573.5, 7576, 7577). To make this request, you must file a *Request for Hearing and Application to Cancel (Set Aside) Voluntary Declaration of Parentage or Paternity* (form FL-280). If you signed a voluntary declaration of parentage or paternity for a child listed in the *Summons and Complaint*, you will need to file the request before genetic testing can be done.

2.
 - a. Check this box if you agree to pay the support asked for in the proposed *Judgment Regarding Parental Obligations* (form FL-630) that you received.
 - b. You should check this box if you do not agree to pay the support asked for in the proposed *Judgment Regarding Parental Obligations* (form FL-630).
3.
 - a. Check this box if you agree to pay the requested amount or portion of childcare costs.
 - b. You should check this box if you do not agree to pay the requested amount of childcare or do not agree with how the childcare costs are to be divided.
4.
 - a. Check this box if you agree to pay the requested amount or portion of uninsured health-care costs.
 - b. You should check this box if you do not agree to pay the requested amount of health-care cost or do not agree with how the costs are to be divided.
5. If you agree to pay the support, childcare costs, and uninsured healthcare costs asked for in the proposed *Judgment Regarding Parental Obligations* (form FL-630), but you disagree with the proposed *Judgment* for another reason, you should check this box and write your reasons in this space. **If you have documents that prove your reasons for disagreeing with the proposed *Judgment*, you should attach the documents to the *Answer* form.**
6. You must list your address and phone numbers where you can receive all notices and court dates. You must let the court know whenever your address changes. If the court does not have your current address, you may not receive important notices that affect you.

You must date the *Answer* form, print your name, and sign the form under a penalty of perjury. When you sign the *Answer* form, you are stating that the information you have provided is true and correct.

Instructions for how to complete the *Proof of Service* section of the *Answer* form are in the *Information Sheet for Service of Process* (form FL-611). The person who serves the *Answer* and its attachments must fill out this section of the form. **You cannot serve your own *Answer*.**

GOVERNMENTAL AGENCY (Under Family Code, §§ 17400 and 17406): TELEPHONE NO.: _____ FAX NO. (Optional): _____ EMAIL ADDRESS: _____ ATTORNEY FOR (name): _____	FOR COURT USE ONLY DRAFT Not approved by the Judicial Council FL-616 2024-1-23 WC-MS.v5
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: _____ MAILING ADDRESS: _____ CITY AND ZIP CODE: _____ BRANCH NAME: _____	
PETITIONER: _____ RESPONDENT: _____ OTHER PARENT/PARTY: _____	
DECLARATION FOR AMENDED PROPOSED JUDGMENT	CASE NUMBER: _____

1. The local child support agency is providing enforcement services in this case.
2. On (date): _____ a *Summons and Complaint Regarding Parental Obligations* (form FL-600) was filed requesting the respondent pay child support based on the California support guideline. The amount of the support requested was based on the respondent's gross monthly income as follows (check one):
 - a. Known income of: \$ _____ per month
 - b. Earning capacity of: \$ _____ per month because respondent's (check one)
 - (1) earning capacity was greater than known income.
 - (2) actual income was unknown.
3. Since the service of the *Summons and Complaint Regarding Parental Obligations* (form FL-600), the local child support agency has received the following new information that would result in a different support order.
 - a. Other parent's monthly income is: \$ _____
 - b. Respondent's gross monthly income is as follows (check one):
 - (1) Known income of: \$ _____ per month
 - (2) Earning capacity of: \$ _____ per month. The factors used to calculate respondent's earning capacity under Family Code section 4058(b) are stated
 - (a) in *Earnings Capacity Factors Attachment* (form FL-302).
 - (b) as follows (specify): _____
 - c. Other (specify): _____
4. An amended proposed judgment is attached.

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)

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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PROOF OF SERVICE

5. I served this declaration and the attached amended proposed judgment on the respondent.

a. **Personal delivery.** I personally delivered this declaration and amended proposed judgment to the respondent as follows:

- (1) Name:
- (2) Address where delivered:
- (3) Date of delivery:
- (4) Time of delivery:

b. **Mail.** I deposited this declaration and amended proposed judgment in the United States mail, in a sealed envelope with postage fully prepaid. I used first-class mail. The envelope was addressed and mailed as follows:

- (1) Name:
- (2) Address:
- (3) Date of mailing:
- (4) Place of mailing (*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 PERSON WHO SERVED RESPONDENT)

6. I served this declaration and the attached amended proposed judgment on the other parent/party.

a. **Personal delivery.** I personally delivered this declaration and amended proposed judgment to the other parent/party as follows:

- (1) Name:
- (2) Address where delivered:
- (3) Date of delivery:
- (4) Time of delivery:

b. **Mail.** I deposited this declaration and amended proposed judgment in the United States mail, in a sealed envelope with postage fully prepaid. I used first-class mail. The envelope was addressed and mailed as follows:

- (1) Name:
- (2) Address:
- (3) Date of mailing:
- (4) Place of mailing (*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 PERSON WHO SERVED OTHER PARENT/PARTY)

GOVERNMENTAL AGENCY (under Family Code, §§ 17400, 17406): TELEPHONE NO.: _____ FAX NO.: _____ EMAIL ADDRESS: _____ ATTORNEY FOR (name): _____	FOR COURT USE ONLY DRAFT Not approved by the Judicial Council FL-630 2024-02-1 WC- MS.v7
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	
<div style="text-align: center;"> JUDGMENT REGARDING PARENTAL OBLIGATIONS <input type="checkbox"/> AMENDED <input type="checkbox"/> SUPPLEMENTAL </div>	CASE NUMBER:

1. a. **NOTICE: THIS IS A** **PROPOSED** **AMENDED PROPOSED JUDGMENT.** This *Judgment Regarding Parental Obligations* may be entered by the court and may become legally binding unless you fill out and file *Answer to Complaint or Supplemental Complaint Regarding Parental Obligations (Governmental)* (form FL-610) with the court clerk within 30 days of the date you were served with *Summons and Complaint or Supplemental Complaint Regarding Parental Obligations (Governmental)* (form FL-600). If you need form FL-610, you may get one from the local child support agency's office, the court clerk, or the family law facilitator. The family law facilitator will help you fill out the forms. To file the answer, follow the procedures listed in the attached instructions
- b. **NOTICE: THIS IS A JUDGMENT.** It is now legally binding.
2. **This matter proceeded as follows:**
 - a. Judgment entered under Family Code section 17430(a).
 - b. By court hearing, appearances as follows:
 - (1) Date: _____ Dept.: _____ Judicial officer: _____
 - (2) Judgment entered by default after court hearing under Family Code section 17430(b)(3).
 - (3) Petitioner present Attorney present (name): _____
 - (4) Respondent present Attorney present (name): _____
 - (5) Other parent/party present Attorney present (name): _____
 - (6) Local child support agency attorney (Family Code, §§ 17400,17406) (name): _____
 - (7) Other (specify): _____
 - c. The parent ordered to pay support is the petitioner respondent other parent/party.
3. This order is based on earning capacity because the earning capacity of the parent ordered to pay support is greater than their known actual income the actual income of the person ordered to pay support is unknown. The factors used to determine earning capacity under Family Code section 4058(b) are stated
 - a. in *Earnings Capacity Factors Attachment* (form FL-302)
 - b. as follows (specify): _____
4. Attached is a computer printout showing the parents' incomes and percentage of time each parent spends with the children. The printout, which shows the calculation of child support payable, will become the court's findings.
5. This order is based on the attached documents (specify): _____

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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THE COURT ORDERS

6. a. Petitioner Respondent Other parent/party are the parents of the children named in item 6b below.

b. The parent ordered to pay support must pay current child support as follows:

Name of Child	Date of birth	Monthly Support Amount
---------------	---------------	------------------------

(1) Mandatory additional child support.

(a) The parent ordered to pay support must pay additional monthly support for reasonable childcare costs, as follows:
 One-half or % or (specify amount): \$ _____ per month of the costs.
 Payments must be made to the other parent/party State Disbursement Unit child-care provider.

(b) The parent ordered to pay support must pay reasonable uninsured health-care costs for the children, as follows:
 One-half or % or (specify amount): \$ _____ per month of the costs.
 Payments must be made to the other parent/party State Disbursement Unit health-care provider.

(2) Other (specify):

(3) For a total of: \$ _____ payable on the _____ day of each month beginning (date):

(4) The low-income adjustment applies.

The low-income adjustment has been rebutted and does not apply because (specify reasons):

(5) Any support ordered will continue until further order of court, unless terminated by operation of law.

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.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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c. The parent ordered to pay support The person receiving support must (1) provide and maintain health insurance coverage for the children if available at no or reasonable cost and keep the local child support agency informed of the availability of the coverage (the cost is presumed to be reasonable if it does not exceed 5 percent of gross income to add a child); (2) if health insurance is not available, provide coverage when it becomes available; (3) within 20 days of the local child support agency's request, complete and return a health insurance form; (4) provide to the local child support agency all information and forms necessary to obtain health-care services for the children; (5) present any claim to secure payment or reimbursement to the other parent or caretaker who incurs costs for health-care services for the children; and (6) assign any rights to reimbursement to the other parent or caretaker who incurs costs for health-care services for the children. 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.

d. The parent ordered to pay support must pay child support for the past periods and in the amounts set forth below:

Name of Child	Date of birth	Period of support	Amount
---------------	---------------	-------------------	--------

(1) Other (specify):

(2) For a total of: \$ _____ payable: \$ _____ on the: _____ day of each month beginning (date):

(3) Interest accrues on the entire principal balance owing and not on each installment as it becomes due.

- e. If this is a judgment on a *Supplemental Complaint*, it does not modify or supersede any prior judgment or order for support or arrearage, unless specifically provided.
- f. No provision of this judgment can operate to limit any right to collect the principal (total amount of unpaid support) or to charge and collect interest and penalties as allowed by law. All payments ordered are subject to modification.
- g. All payments, unless specified in item 6b(1) above, must be made to the State Disbursement Unit at the address listed below: **California State Disbursement Unit, P.O. Box 989067, West Sacramento, CA 95798-9067**

h. An earnings assignment order is issued.

- i. In the event that there is a contract between a person receiving support and a private child support collector, the parent 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 of past due support 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 person receiving support, jointly.
- j. If "The parent ordered to pay support" box is checked in item 6c, a health insurance coverage assignment must issue.
- k. The parents must notify the local child support agency in writing within 10 days of any change in residence or employment.
- l. *Notice of Rights and Responsibilities Regarding Child Support* (form FL-192) is attached.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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m. The following person (the "other parent/party") is added as a party to this action (*name*):

n. **The court further orders** (*specify*):

Date: _____

Number of pages attached: _____

JUDICIAL OFFICER

SIGNATURE FOLLOWS LAST ATTACHMENT

Approved as conforming to court order. Date: _____ (SIGNATURE OF PARENT ORDERED TO PAY SUPPORT OR THEIR ATTORNEY)
--

GOVERNMENTAL AGENCY (under Family Code, §§ 17400, 17406):
 RECORDING REQUESTED BY AND WHEN RECORDED MAIL TO:

TEL NO.: _____ FAX NO. (optional): _____
 EMAIL ADDRESS: _____

SUPERIOR COURT OF CALIFORNIA, COUNTY OF _____
 STREET ADDRESS: _____
 MAILING ADDRESS: _____
 CITY AND ZIP CODE: _____
 BRANCH NAME: _____

DRAFT v.2
Not approved by
the Judicial Council
FL-632 2024-2-1 WC-MS.v8

FOR RECORDER'S USE ONLY

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	FOR COURT USE ONLY CASE NUMBER: _____
<p align="center">NOTICE REGARDING PAYMENT OF SUPPORT</p> <input type="checkbox"/> NOTICE OF ASSIGNED SUPPORT <input type="checkbox"/> SUBSTITUTION OF PAYEE	
<p align="center">INFORMATION ABOUT THIS FORM</p> <ul style="list-style-type: none"> This form is used to tell the parents and the court when the local child support agency is or is not enforcing support orders in this case. For more information about this form, see <i>Information Sheet: Notice Regarding Payment of Support (form FL-632-INFO)</i>. 	

- The parent ordered to pay support is the: Petitioner Respondent Other Parent/Party
 (specify name and address): _____
 - The person receiving ordered support is the: Petitioner Respondent Other Parent/Party
 (specify name and address, if parent is payee): _____
 The address of the person receiving ordered support cannot be provided because a protective order was issued or the local child support agency has reason to believe the release of the information may result in harm to the parent or children, per Family Code section 17212(b)(2).
- The substituted payee is:
 - The local child support agency (specify name and address): _____
 - Other (specify name and address): _____

NOTICE TO THE CLERK:

If item 3(b) is checked, no matters should be heard by a child support commissioner.

The following matters should be heard by a child support commissioner, unless one is not available due to exceptional circumstances (Fam. Code, §§ 4250-4252): (1) A request to modify ongoing child support, if Item 3(a) (1) is checked, (2) a request to determine back support (arrears) if item 3(a)(2) or (3) is checked and, (3) a request regarding medical support if item 3(a)(4) is checked.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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3. a. The local child support agency is providing the following enforcement services in this case (*check all that apply*):
- (1) Current support
 - (2) Back support (arrear) owed to the parent listed in Item 1(b)
 - (3) Back support (arrear) owed for public assistance paid by the county
 - (4) Medical support
- b. The local child support agency is no longer providing any enforcement services in this case.

4. All payments must be made as follows:

- a. Payments collected by an Income Withholding Order must be sent to:
California State Disbursement Unit, P.O. Box 989067, West Sacramento, CA 95798-9067.
- b. All payments, other than income withholding payments, must be sent to (*check all that apply*):

Type of support	Local child support Agency listed in Item 2(a)	Person listed in Item 1(b)
Current support	<input type="checkbox"/>	<input type="checkbox"/>
Back support (arrear) owed to the person listed in Item 1(b)	<input type="checkbox"/>	<input type="checkbox"/>
Back support (arrear) owed for public assistance paid by the county	<input type="checkbox"/>	<input type="checkbox"/>
Other (<i>specify</i>):	<input type="checkbox"/>	<input type="checkbox"/>

5. One of the parents has applied for and received public assistance for the children. This means that under California law they gave away (assigned) their right to receive support, while aid is being paid, to the county of (*specify*):

6. The substituted payee must be contacted when notice to a lienholder may or must be given. An abstract or notice of support judgment or support judgment was recorded as follows:

County
Date of recording
Instrument number
Book number
Page number

Date:

_____ _____

(TYPE OR PRINT NAME) (SIGNATURE)

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

NOTICE:
No acknowledgment is required when this form is recorded by a local child support agency.

ACKNOWLEDGMENT

(To be completed when this form is recorded by a person or entity other than a local child support agency.)

STATE OF CALIFORNIA
 COUNTY OF

On _____, before me, _____ (here insert name and title of the officer),
 personally appeared _____,

who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that they executed the same in his/her/their authorized capacity, and that by his/her/their signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

 (SIGNATURE OF NOTARY)

When is form FL-632 used?

Form FL-632 is used to tell the parents and the court when the local child support agency is or is not enforcing support orders in this case. It is also used to identify who is the payee in the case.

What is a payee?

The form tells the parents and the court if support must be paid to one of the parents or the local child support agency. Whomever support must be paid to is called the “payee.”

- **Note:** Sometimes a parent who formerly received public assistance closes their case with the local child support agency but back support (arrears) could still be owed to the county for the time when aid was active. In this situation, current support would be owed to the parent, while this back support would be owed to the county, meaning both the parent *and* the local child support agency would be considered payees.

How does support get paid?

If the local child support agency is enforcing the support order, payments collected by Income Withholding Order must be made to the State Disbursement Unit at the following address: **California State Disbursement Unit, P.O. Box 989067, West Sacramento, CA 95798-9067.**

If the local child support agency stops enforcing current support or back support (arrears) owed to the parent listed in item 1b on form FL-632, this does not affect or change the child support order and child support must still be paid.

- Support must be paid directly to the parent listed in item 1b until a new *Income Withholding Order for Support* ([form FL-195](#)) is put in place. This will *not* happen automatically and it is the responsibility of one of the parents to submit the new Income Withholding Order to the court for approval and then have it delivered to the employer of the parent listed in item 1a on form FL-632.
- Each parent must also complete and deliver to the court a *Child Support Case Registry Form* ([form FL-191](#)) within 10 days of receiving a *Notice Regarding Payment of Support* ([form FL-632](#)) stating that the local child support agency has stopped enforcing current support or back support (arrears) owed to the parent listed in item 1b.

How can parents change the order?

The current child support order will remain the same unless one of the parents (or the local child support agency if they are enforcing current support) requests that the support order can be changed. Parents can change the support order in two different ways:

- If the parents agree to a new amount, they can complete, sign, and submit to the court a *Stipulation to Establish or Modify Child Support and Order* ([form FL-350](#)).
- If the parents don't have an agreement, one of the parents can request a court hearing by filing a *Request for Order* ([form FL-300](#)) and an *Income and Expense Declaration* ([form FL-150](#)) and then having the papers served on the other parent. The judge will decide at the hearing how much support must be paid.

Note: If the local child support agency is involved in your case, it must be served with any request to change child support and approve any agreement.

Is the case assigned to a child support commissioner or a judge?

The following hearings will be in front of a child support commissioner:

- A request to modify ongoing child support if the local child support agency is involved in your case and item 2a(1) is checked on form FL-632.
- A request to determine back support (arrears) if the local child support agency is involved in your case and item 2a(2) or (3) is checked on form FL-632.
- A request regarding medical support if the local child support agency is involved in your case and item 2a(4) is checked on form FL-632.

A judge or other judicial officer will hear your case if the local child support agency is no longer providing any enforcement services in your case and item 2b is checked on form FL-632.

For information about hearings involving a child support commissioner and the local child support agency, visit: <https://selfhelp.courts.ca.gov/request-for-order/LCSA/hearing>.



How can parents get free help?

Every county has a family law facilitator who can:

- Explain the legal process;
- Give you free legal forms; and
- Help you fill out court papers.



Depending on your county, the facilitator may help you in person, online, or by phone. You can find the facilitator in your county here: www.courts.ca.gov/selfhelp-facilitators.htm.

How do I contact the local child support agency?

If you have questions about form FL-632 or about your case with the local child support agency in general, call the Child Support Customer Connect line for more information: **866-901-3212**.

GOVERNMENTAL AGENCY (Under Family Code, §§ 17400 and 17406): TELEPHONE NO.: _____ FAX NO. (Optional): _____ EMAIL ADDRESS: _____ ATTORNEY FOR (name): _____	FOR COURT USE ONLY DRAFT Not approved by the Judicial Council FL-635 2024-1-4 WC-MS.v1
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	
NOTICE OF ENTRY OF JUDGMENT AND PROOF OF SERVICE BY MAIL	CASE NUMBER: _____

1. You are notified that the following judgment was entered on (date):
 - a. Default taken and proposed judgment entered under Family Code section 17430(a)
 - b. Judgment Regarding Parental Obligations (form FL-630)
 - c. Other (specify): _____

2. A copy of each document referred to in item 1 is attached.

NOTICE

If the support order contained in the judgment is based on earning capacity and was entered by default, the parents or the local child support agency may file a request (form FL-640) to cancel (set aside) the support order. The request can be obtained online at www.courts.ca.gov/forms.htm, or from the family law facilitator's office, the court clerk, or the local child support agency. The request must be filed to ask the court to cancel (set aside) the child support portions of the judgment. If the court decides to cancel (set aside) the support order, the court will issue a new support order based on the actual income or earning capacity of the parent ordered to pay support. The request must be filed with the court clerk within two years from the date the first collection of support by wage garnishment is made.

PROOF OF SERVICE BY MAIL

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): _____

5. I served a copy of this notice of entry and referenced documents by enclosing them in a sealed 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:

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)
Page 1 of 1

GOVERNMENTAL AGENCY (under Family Code, §§ 17400, 17406) OR ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address): TELEPHONE NO.: _____ FAX NO. (Optional): _____ EMAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY DRAFT Not approved by the Judicial Council FL-640.v6.2024-1-31 WC.MS.
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	
NOTICE AND MOTION TO CANCEL (SET ASIDE) SUPPORT ORDER BASED ON PRESUMED INCOME OR EARNING CAPACITY	CASE NUMBER: _____

If the support order was entered by default and is based on presumed income or earning capacity, you may file this motion and ask the court to cancel (set aside) the support order. If the court agrees with you, the court will issue another order based on the actual income, earning capacity, or income allowable by law. You must file the original of this motion and the attachments with the court clerk within two years from the date the first collection of support made by wage garnishment was received by the local child support agency and serve a copy on all other parties in this case. Keep a copy of this motion for your records.

1. To: Petitioner Respondent Local child support agency Other (specify):
 A hearing on this motion will be held as follows (see instructions on how to get a hearing date):
 a. Date: _____ Time: _____ Dept.: Div: Room:
 b. Address of court is same as noted above other (specify): _____
2. I am asking the court to cancel (set aside) the child support order in this case.
3. I am asking the court to issue another order because the current order was entered by default and is based on presumed income or earning capacity that is different from the actual income or earning capacity of the parent ordered to pay support.
4. Attached is an *Income and Expense Declaration* (form FL-150) or a *Financial Statement (Simplified)* (form FL-155), or other information concerning income for any relevant years.
5. Attached is my proposed *Answer to Complaint or Supplemental Complaint Regarding Parental Obligations (Governmental)* (form FL-610).
6. My address and telephone number for receipt of all notices and court dates are as follows:
 Address:
 City, state, and zip code:
 Home telephone:
 Work telephone:

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 PARTY OR ATTORNEY)

This case may be referred to a court commissioner for hearing. By law, court commissioners do not have the authority to issue final orders and judgments in contested cases unless they are acting as temporary judges. The court commissioner in your case will act as a temporary judge unless, before the hearing, you or any other party objects to the commissioner acting as a temporary judge. The court commissioner may still hear your case to make findings and recommendations to a judge. However, if you object to the commissioner acting as a temporary judge, an order will not be made until a judge reviews your case.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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PROOF OF SERVICE

1. At the time of service I was at least 18 years of age and not a party to the legal action.
2. My residence or business address is (*specify*):

3. I served a copy of the foregoing *Notice and Motion to Cancel (Set Aside) Support Order Based on Presumed Income or Earning Capacity (Governmental)* and all attachments as follows (check either a, b, or c for each person served):

- a. **Personal delivery.** I personally delivered a copy and all attachments as follows:
- | | |
|--|--|
| (1) <input type="checkbox"/> Name of party or attorney served: | (2) <input type="checkbox"/> Name of party or attorney served: |
| (a) Address where delivered: | (a) Address where delivered: |
| (b) Date delivered: | (b) Date delivered: |
| (c) Time delivered: | (c) Time delivered: |

- b. **Mail.** I am a resident of or employed in the county where the mailing occurred.
- (1) I enclosed a copy in an envelope and
- | | |
|--|--|
| (a) <input type="checkbox"/> deposited the sealed envelope with the U.S. Postal Service with the postage fully prepaid. | (a) <input type="checkbox"/> placed the envelope for collection and mailing on the date and at the place shown below, following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the U.S. Postal Service in a sealed envelope with postage fully prepaid. |
|--|--|
- | | |
|--|---|
| (2) <input type="checkbox"/> Name of party or attorney served: | (3) <input type="checkbox"/> Name of local child support agency served: |
| (a) Address where delivered: | (a) Address where delivered: |
| (b) Date mailed: | (b) Date mailed: |
| (c) Place of mailing (<i>city and state</i>): | (c) Place of mailing (<i>city and state</i>): |

- (4) **Address Verification** (please specify):
- | | |
|---|--|
| (a) <input type="checkbox"/> I served a request to modify a child custody, visitation, or child support judgment or permanent order, which included an address verification declaration (<i>Declaration Regarding Address Verification—Postjudgment Request to Modify a Child Custody, Visitation, or Child Support Order</i> (form FL-334) may be used for this purpose). | (b) <input type="checkbox"/> The address for each individual identified in items 3a and 3b was |
| | (i) <input type="checkbox"/> verified by the California Child Support Enforcement System (CSE) as the current primary mailing address on file. |
| | (ii) <input type="checkbox"/> Other (<i>specify</i>): |
- c. **Other** (*specify code section*):
 Additional page is attached.

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 PERSON WHO SERVED MOTION)
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FL-640-INFO**Information Sheet: Notice and Motion to Cancel (Set Aside)
Support Order Based on Presumed Income or Earning Capacity****INSTRUCTIONS****Who can use this form?**

Either parent can use this form.

Fill out this form yourself if you do not have an attorney to represent you. If you have an attorney, your attorney will need to fill out this form.

What do I use this form for?

Use this form to ask the court to cancel (set aside) a default judgment that is based on **earning capacity** or presumed income.

A **default judgment** is made when a party does not show up to court.

Earning capacity is used when the court does not have information about a parent's income, or the court believes the parent is underemployed. Before January 1, 2026, courts used **presumed income** in these situations, which was minimum wage at 40 hours every week.

You can only use this form if your actual income was different from the amount of **earning capacity** or presumed income that was used to make a decision about child support.

Is there a deadline to ask for a judgment to be canceled or set aside?

Yes, you must file this request within **two years** from the date that the first child support payment made by wage garnishment was received by the local child support agency.

How do I fill out this form?

- ① Fill out the **caption**. The caption is the box at the top of the first page. Put your name, address, and telephone number in the top left part of the box if they are not already there. You will also need to put information about the local child support agency, the other parent, case number, and the court name and address in the caption. Look at *Judgment Regarding Parental Obligations (Governmental)* (form FL-630) in your case to help you fill out this information.
- ② Contact the court clerk to ask for a hearing date. You can find information about how to contact the court at www.courts.ca.gov/find-my-court.htm.
- ③ Fill out an ***Income and Expense Declaration (form FL-150)*** or ***Financial Statement (Simplified) (form FL-155)*** to give the court information about your current income and expenses. Attach this form to the Motion.
Find forms FL-150 and FL-155 at www.courts.ca.gov/forms.htm.
- ④ You may fill out a ***Declaration About Parent's Income During Judgment Periods (FL-643)*** to give the court information about your actual income and expenses during the time period covered by the Judgment.
Find form FL-643 at www.courts.ca.gov/documents/fl643.pdf.
- ⑤ You might also want to attach *Answer to Complaint or Supplemental Complaint Regarding Parental Obligations (Governmental)* (form FL-610) to give the court more information. Talk to a lawyer or your family law facilitator for more information.
- ⑥ Fill out your contact information so the court can get in touch with you about this motion.
- ⑦ Sign and date your Motion.



FL-640-INFO

Information Sheet: Notice and Motion to Cancel (Set Aside) Support Order Based on Presumed Income or Earning Capacity

- ⑧ Fill out the box at the top of the second page. Use the same information printed in the caption box on page 1 of FL-640. Make sure to leave the rest of the page blank. You **do not** fill out this page. The person who serves the Motion will fill this out. Look at the "What do I do after I fill out the form?" section of these instructions for more information.

The person who serves the Motion will need to fill out the "Proof of Service" section on page 2 of the form.

③ File your Motion with the Court

There is no fee to file this Motion.

You can file in person or by mail.

If you file in person:

Take your original Notice and Motion form and your copies to the court. Look at the top of the Notice and Motion in your case to find the court's address:

SUPERIOR COURT OF CALIFORNIA, COUNTY OF
STREET ADDRESS:
MAILING ADDRESS:
CITY AND ZIP CODE:
BRANCH NAME:

Give your original Motion form and copies to the court clerk. The clerk will:

- Stamp your forms
- Keep the original and give the copies back to you.

If you file by mail:

- Mail your original Motion form and your copies you to the court. Look at the top of the Notice and Motion in your case to find the court's address:

SUPERIOR COURT OF CALIFORNIA, COUNTY OF
STREET ADDRESS:
MAILING ADDRESS:
CITY AND ZIP CODE:
BRANCH NAME:

- Send a self-addressed stamped envelope with your forms. If you do not include a self-addressed stamped envelope, you will have to go to the courthouse to pick up your copies.

You may be able to file electronically:

- Look at your court's website to see if you can file electronically. Visit www.courts.ca.gov/find-my-court.htm.

What do I do after I fill out the form?

① Make copies

Fill out the box at the top of the second page. Use the same information printed in the caption box on page 1 of form FL-640. Make at least 3 copies of the papers: one for yourself, one to send to the child support agency, and one to send to the other parent if the other parent is a party in the case.

② Have someone give a copy of the Motion to the local child support agency and the other parent if necessary

The local child support agency and, in some situations, the other parent must be given a copy of any documents that you file. This is called service. You **cannot** serve your own Motion.

To serve these documents, you must ask someone who is 18 or older and not a part of the case to mail or hand deliver the documents to the local child support agency. If the other parent is a part of the case, the person serving the motion must also mail or hand deliver them to the other parent. If the documents are mailed to the other parent, the person serving the documents will need to state on the proof of service how the mailing address of the other parent was verified as their current address.

If you do not know the other parent's current mailing address, the person serving the documents can mail extra copies of the documents to the local child support agency. They will send the copies to the other parent. The local child support agency must receive the documents **at least 30 days before the hearing** if you want them to send the Motion to the other parent.



What happens next?

Go to your court hearing.

If you do not go, the court will not cancel and recalculate the child support order in your case.

How can I get free help?

Every county has a family law facilitator that can:

- Explain the legal process;
- Give you free legal forms; and
- Help you fill out court papers.



Depending on your county, the facilitator may help you in person, online, or by phone. You can find the facilitator in your county here: www.courts.ca.gov/selfhelp-facilitators.htm.

Ask for a Disability Accommodation Request



If you have a disability and need an accommodation while you are at court, you can use [form MC-410](#) to make your request. For more information, see [form MC-410-INFO](#).

PARTY WITHOUT ATTORNEY OR ATTORNEY OR GOVERNMENTAL AGENCY (Name, state bar number, and address): TELEPHONE NO.: _____ FAX NO. (Optional): _____ EMAIL ADDRESS: _____ ATTORNEY FOR (name): _____	FOR COURT USE ONLY DRAFT Not approved by the Judicial Council FL-643 2024-1-31 WC-MS.v3
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	
DECLARATION ABOUT PARENT'S INCOME DURING JUDGMENT PERIODS	CASE NUMBER:

1. I am:
 - a. the parent ordered to pay support.
 - b. the parent receiving ordered support.
 - c. a representative of the local child support agency providing services in this case.
2. On (date): _____ a Judgment Regarding Parental Obligations (form FL-630) was entered using earning capacity or presumed income, instead of actual income.
3. The actual income of the parent ordered to pay support and other factors needed to calculate the correct support for the time periods in the judgment are listed below:

	Time periods in judgment (enter start and end dates)	Average monthly income	Percentage of time with children	Monthly guideline support requested	Source of income
a.	from _____ to _____ <small>(month/year) (month/year)</small>	\$ _____ /month	_____ %	\$ _____ /month	
b.	from _____ to _____ <small>(month/year) (month/year)</small>	\$ _____ /month	_____ %	\$ _____ /month	
c.	from _____ to _____ <small>(month/year) (month/year)</small>	\$ _____ /month	_____ %	\$ _____ /month	
d.	from _____ to _____ <small>(month/year) (month/year)</small>	\$ _____ /month	_____ %	\$ _____ /month	
e.	from _____ to _____ <small>(month/year) (month/year)</small>	\$ _____ /month	_____ %	\$ _____ /month	
f.	from _____ to _____ <small>(month/year) (month/year)</small>	\$ _____ /month	_____ %	\$ _____ /month	
g.	from _____ to _____ <small>(month/year) (month/year)</small>	\$ _____ /month	_____ %	\$ _____ /month	
h.	from _____ to _____ <small>(month/year) (month/year)</small>	\$ _____ /month	_____ %	\$ _____ /month	

4. Additional proof about the parent ordered to pay support's actual income during the time periods in the judgment is attached. (Black out the Social Security number from any papers you attach, like paycheck stubs.)

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)

PARTY WITHOUT ATTORNEY OR ATTORNEY (<i>Name, state bar number, and address</i>): TELEPHONE NO.: _____ FAX NO.: _____ EMAIL ADDRESS: _____ ATTORNEY FOR (<i>name</i>): _____	FOR COURT USE ONLY DRAFT Not approved by the Judicial Council FL-665 2024-2-1 WC-MS.v8
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: _____ MAILING ADDRESS: _____ CITY AND ZIP CODE: _____ BRANCH NAME: _____	
PETITIONER: _____ RESPONDENT: _____ OTHER PARENT/PARTY: _____	
FINDINGS AND RECOMMENDATION OF COMMISSIONER	CASE NUMBER: _____

1. Name (*specify*): _____ objected to Commissioner (*name*): _____ hearing this matter as a temporary judge.
2. **THIS MATTER PROCEEDED AS FOLLOWS**
 - a. By court hearing, appearances as follows:
 - (1) Date: _____ Dept.: _____ Judicial officer: _____
 - (2) Petitioner present Attorney present (*name*): _____
 - (3) Respondent present Attorney present (*name*): _____
 - (4) Other parent/party present Attorney present (*name*): _____
 - (5) Local child support agency attorney (Fam. Code, §§ 17400, 17406) by (*name*): _____
 - (6) Other (*specify*): _____
 - b. The parent ordered to pay support is the petitioner respondent other parent/party.
3. Attached is a computer printout showing the parents' incomes and percentage of time each parent spends with the children. The printout, which shows the calculation of child support payable, will become the court's findings.
4. This recommended order is based on the attached documents (*specify*): _____
5. **THE COMMISSIONER RECOMMENDS THE FOLLOWING**
 - a. All orders previously made in this action remain in full force and effect except as modified below.
 - b. (*Name of parent*): _____ (*Name of parent*): _____ are the parents of the children listed below.
 - c. The parent ordered to pay support must pay current child support as follows:

<u>Name of child</u>	<u>Date of birth</u>	<u>Monthly support amount</u>
(1) <input type="checkbox"/> Mandatory additional child support.		
(a) The parent ordered to pay support must pay additional monthly support for reasonable childcare costs, as follows:		
<input type="checkbox"/> One-half or <input type="checkbox"/> _____ % or <input type="checkbox"/> (<i>specify amount</i>): \$ _____ per month of the costs Payments must be made to the <input type="checkbox"/> other parent/party <input type="checkbox"/> State Disbursement Unit <input type="checkbox"/> childcare provider.		
(b) The parent ordered to pay support must pay reasonable uninsured health-care costs for the children, as follows:		
<input type="checkbox"/> One-half or <input type="checkbox"/> _____ % or <input type="checkbox"/> (<i>specify amount</i>): \$ _____ per month of the costs Payments must be made to the <input type="checkbox"/> other parent/party <input type="checkbox"/> State Disbursement Unit <input type="checkbox"/> health-care provider.		

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.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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5. c. (2) Other (*specify*):

(3) For a total of: \$ _____ payable on the (*specify*): _____ day of each month beginning on (*date*): _____

(4) The low-income adjustment applies.

The low-income adjustment is rebutted and does not apply because (*specific reasons*):

(5) **Earning capacity.** The court finds that the parent ordered to pay support parent receiving ordered support has the ability to earn \$ _____ per month. The factors used to calculate earning capacity, under Family Code section 4058(b) are stated

(a) in *Earning Capacity Factors Attachment (form FL-302)*.

(b) as follows (*specify*):

(6) Any support ordered will continue until further order of court, unless terminated by operation of law.

d. The parent ordered to pay support The person receiving ordered support must (1) provide and maintain health insurance coverage for the children, if available at no or reasonable cost, and keep the local child support agency informed of the availability of the coverage (the cost is presumed to be reasonable if it does not exceed 5 percent of gross income to add a child); (2) if health insurance is not available, provide coverage when it becomes available; (3) within 20 days of the local child support agency's request, complete and return a health insurance form; (4) provide to the local child support agency all information and forms necessary to obtain health-care services for the children; (5) present any claim to secure payment or reimbursement to the other parent or caretaker who incurs costs for health-care services for the children; and (6) assign any rights to reimbursement to the other parent or caretaker who incurs costs for health-care services for the children. 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.

e. The parent ordered to pay support must pay child support for the past periods and in the amounts set forth below:

Name of child	Date of birth	Period of support	Amount
---------------	---------------	-------------------	--------

(1) Other (*specify*):

(2) For a total of: \$ _____ payable: \$ _____ on the: _____ day of each month beginning (*date*): _____

(3) Interest accrues on the entire principal balance owing and not on each installment as it becomes due.

f. The parent ordered to pay support owes support arrears as follows, as of (*date*):

(1) Child support: \$ _____ Spousal support: \$ _____ Family support: \$ _____

(2) Interest is not included and is not waived.

(3) Payable: \$ _____ on the: _____ day of each month beginning (*date*): _____

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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- (4) Interest accrues on the entire principal balance owing and not on each installment as it becomes due.
- 5. g. No provision of this judgment/order may operate to limit any right to collect the principal (total amount of unpaid support) or to charge and collect interest and penalties as allowed by law. All payments ordered are subject to modification.
- h. All payments, unless specified in item 5c(1) above, must be made to the State Disbursement Unit at:
California State Disbursement Unit, P.O. Box 989067, West Sacramento, CA 95798-9067.
- i. **An earnings assignment order is issued.**
- j. In the event that there is a contract between a person receiving ordered 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 of past due support 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 person receiving ordered support, jointly.
- k. If "The parent ordered to pay support" box is checked in item 5d, a health insurance coverage assignment must issue.
- l. The parents must notify the local child support agency in writing within 10 days of any change in residence or employment.
- m. *Notice of Rights and Responsibilities Regarding Child Support* (form FL-192) is attached.
- n. The following person (the "other parent/party") is added as a party to this action (*name*):
- o. The court further recommends (*specify*):

Date: _____

COMMISSIONER

Number of pages attached: _____ SIGNATURE FOLLOWS LAST ATTACHMENT

CLERK’S CERTIFICATE OF SERVICE OR MAILING

I certify that I am not a party to this cause and that

- 1. **Personal service.** A true copy of this *Findings and Recommendation of Commissioner* was handed to the petitioner respondent other parent/party at the hearing of this matter before the commissioner.
- 2. **Mail.** A true copy of this *Findings and Recommendation of Commissioner* was mailed first class, postage fully prepaid, in a sealed envelope addressed as shown below, and that the request was mailed
 at (*place*): _____ California,
 on (*date*): _____

Date: _____ Clerk, by _____, Deputy

GOVERNMENTAL AGENCY <i>(Under Family Code, §§ 17400 and 17406):</i> TELEPHONE NO.: _____ FAX NO. <i>(Optional):</i> _____ EMAIL ADDRESS <i>(Optional):</i> _____ ATTORNEY FOR <i>(Name):</i> _____	FOR COURT USE ONLY DRAFT Not approved by the Judicial Council FL-680.v5.02012024.wc
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: _____ MAILING ADDRESS: _____ CITY AND ZIP CODE: _____ BRANCH NAME: _____	
PETITIONER: _____ RESPONDENT: _____ OTHER PARENT/PARTY: _____	
NOTICE OF MOTION <input type="checkbox"/> JUDGMENT <input type="checkbox"/> MODIFICATION <input type="checkbox"/> Child Support <input type="checkbox"/> Health Care <input type="checkbox"/> Injunctive Order <input type="checkbox"/> Other: _____	CASE NUMBER: _____

1. TO *(name)*: _____

2. **READ THE ATTACHED REQUEST FORM.** A hearing on the motion for the relief requested will be held as follows:

a. Date: _____ Time: _____ <input type="checkbox"/> Dept.: _____ <input type="checkbox"/> Div.: _____ <input type="checkbox"/> Rm: _____
--

b. Address of court is same as noted above other *(specify)*: _____

3. Supporting attachments:

a. Completed <i>Request for Order and Supporting Declaration</i> (form FL-684) and blank <i>Response to Governmental Notice of Motion or Order to Show Cause</i> (form FL-685) b. <input type="checkbox"/> Financial information and blank <i>Income and Expense Declaration</i> (form FL-150)	c. <input type="checkbox"/> <i>Earning Capacity Factors Attachment</i> (form FL-302) d. <input type="checkbox"/> Points and authorities e. <input type="checkbox"/> <i>Order for Genetic (Parentage) Testing</i> (form FL-627) (If you ignore this order, you may be found to be the parent.) f. <input type="checkbox"/> Other <i>(specify)</i> : _____
---	--

4. NOTICE: IF YOU WISH TO HAVE A TRIAL, YOU MUST APPEAR AT THE HEARING ON THIS REQUEST.
 Date: _____

 (TYPE OR PRINT NAME)

 (SIGNATURE OF ATTORNEY)

ORDER

IT IS ORDERED THAT

5. Time for service hearing is shortened. Service must be on or before *(date)*: _____

6. Any responsive declaration must be served on or before *(date)*: _____

7. **Petitioner** **Respondent** Other parent/party is restrained from transferring, encumbering, hypothecating, concealing, or in any way disposing of the following property (describe): _____

8. Other *(specify)*: _____

9. Number of pages attached: _____

Date: _____

 JUDICIAL OFFICER

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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NOTICE

This case may be referred to a court commissioner for hearing. By law court commissioners do not have the authority to issue final orders and judgments in contested cases unless they are acting as temporary judges. The court commissioner in your case will act as a temporary judge unless, before the hearing, you or any other party objects to the commissioner acting as a temporary judge. The court commissioner may still hear your case to make findings and a recommended order. If you do not like the recommended order, you must object to it within 10 court days; otherwise, the recommended order will become a final order of the court. If you object to the recommended order, a judge will make a temporary order and set a new hearing.

Child support is based on your ability to pay, which may include your income, earning capacity, expenses, and lifestyle. The amount of child support can be large and can continue until the children reach age 18. You should give the court information about your income and expenses, and any specific circumstances that may affect your ability to earn. If you do not, the support order will be based on other information given to the court. If the child support amount in the proposed judgment is based on your earning capacity, and you do not appear at the hearing after failing to file an Answer (form FL-610), the court will enter a judgment against you by default.

You do not have to pay any fee to file your *Response to Governmental Notice of Motion or Order to Show Cause (Governmental)* (form FL-685) and your completed *Income and Expense Declaration* (form FL-150) or *Financial Statement (Simplified)* (form FL-155). You must file any documents with the court and have the copies served at least 9 court days before the hearing date to the local child support agency and the other party unless ordered otherwise. Add 5 calendar days if the motion is served by mail within California. (See Code of Civil Procedure section 1005 for other situations.) To determine court days and calendar days, go to <https://selfhelp.courts.ca.gov/child-support/LCSA-Hearing-Notice/Respond>.

PROOF OF SERVICE BY MAIL

1. 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.
2. My residence or business address is:

3. I served a copy of this motion by enclosing it in a sealed envelope and depositing the envelope directly in the U.S. mail with postage paid OR at my place of business for same-day collection and mailing with the U.S. mail, following our business practices, with which I am readily familiar.
 - a. Date of deposit:
 - b. Place of deposit (*city and state*):
 - c. Addressed as follows:

4. The address for each individual identified in item 3 was
 - a. verified by the California Child Support Enforcement System (CSE) as the current primary mailing address on file.
 - b. Other (*specify*):
5. 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 PERSON WHO SERVED MOTION)



Request for Accommodations

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least five court days before the trial. 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.)

GOVERNMENTAL AGENCY (Under Family Code, §§ 17400 and 17406): TELEPHONE NO.: _____ FAX NO. (Optional): _____ EMAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY DRAFT Not approved by the Judicial Council FL-683.v5.02012024.wc
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	
<input type="checkbox"/> Child Support <input type="checkbox"/> MODIFICATION <input type="checkbox"/> Health Care <input type="checkbox"/> Injunctive Relief <input type="checkbox"/> Other:	CASE NUMBER: _____

1. To (name): _____
2. YOU ARE ORDERED TO APPEAR IN THIS COURT AS FOLLOWS TO GIVE ANY LEGAL REASON WHY THE RELIEF SOUGHT IN THE ATTACHED APPLICATION SHOULD NOT BE GRANTED.

Date: _____	Time: _____	<input type="checkbox"/> Dept.: _____	<input type="checkbox"/> Room: _____
<input type="checkbox"/> same as noted above <input type="checkbox"/> other (specify): _____			

3. IT IS FURTHER ORDERED that a completed *Request for Order and Supporting Declaration (Governmental)* (form FL-684), or equivalent application order form, a **blank Response to Governmental Notice of Motion or Order to Show Cause (Governmental)** (form FL-685), and the following must be served with this order:

- Financial information and blank *Income and Expense Declaration* (form FL-150) or *Financial Statement (Simplified)* (form FL-155)
 - Points and authorities
 - Order for Genetic (Parentage) Testing* (form FL-627)
 - Other (specify): _____
 - Time for service hearing is shortened. Service must be on or before (date): _____
- Any responsive declaration must be served on or before (date): _____
- Petitioner** **Respondent** **Other parent/party**

(describe): _____

Other (specify): _____

Date: _____ JUDICIAL OFFICER _____

NOTICE

This case may be referred to a court commissioner for hearing. By law, court commissioners do not have the authority to issue final orders and judgments in contested cases unless they are acting as temporary judges. The court commissioner in your case will act as a temporary judge unless, before the hearing, you or any other party objects to the commissioner acting as a temporary judge. The court commissioner may still hear your case to make findings and a recommended order. If you do not like the recommended order, you must object to it within 10 court days; otherwise, the recommended order will become a final order of the court. If you object to the recommended order, a judge will make a temporary order and set a new hearing.

Child support is based on your ability to pay, which may include your income, earning capacity, expenses, and lifestyle. The amount of child support can be large and can continue until the children reach age 18. You should give the court information about your income, expenses, and any other circumstances that may affect your ability to earn. If you do not, the support order will be based on other information given to the court.

You do not have to pay any fee to file your *Response to Governmental Notice of Motion or Order to Show Cause (Governmental)* (form FL-685) and your completed *Income and Expense Declaration* (form FL-150) or *Financial Statement (Simplified)* (form FL-155). You must file any documents with the court and serve copies at least 9 court days before the hearing date to the local child support agency and the other party unless ordered otherwise. Add 5 calendar days if you serve by mail within California. (See Code of Civil Procedure section 1005 for other situations.) To determine court and calendar days, go to <https://selfhelp.courts.ca.gov/child-support/LCSA-Hearing-Notice/Respond>.

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

GOVERNMENTAL AGENCY (under Family Code, §§ 17400, 17406) OR PARTY WITHOUT ATTORNEY OR ATTORNEY (Name, state bar number, and address): TELEPHONE NO.: _____ FAX NO. (Optional): _____ EMAIL ADDRESS: _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY DRAFT Not approved by the Judicial Council FL-687.v4.02012024.wc
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	
ORDER AFTER HEARING	CASE NUMBER: _____

1. **This matter proceeded as follows:** Uncontested By stipulation Contested

- a. Date: _____ Dept.: _____ Judicial officer: _____
- b. Petitioner present Attorney present (name): _____
- c. Respondent present Attorney present (name): _____
- d. Other parent/party present Attorney present (name): _____
- e. Local child support agency attorney (Fam. Code, §§ 17400, 17406) by (name): _____
- f. Other (specify): _____
- g. The parent ordered to pay support is the petitioner respondent other parent/party.

2. Attached is a computer printout showing the parents' income and percentage of time each parent spends with the children. The printout, which shows the calculation of child support payable, will become the court's findings.
3. This order is based on the attached documents (specify): _____

THE COURT ORDERS

4. a. All orders previously made in this action remain in full force and effect except as specifically modified below.
- b. The parent ordered to pay support is the parent of and must pay current child support for the following children:
- | | | |
|---------------|---------------|------------------------|
| Name of child | Date of birth | Monthly support amount |
|---------------|---------------|------------------------|

- (1) Mandatory additional child support.
- (a) The parent ordered to pay support must pay additional monthly support for reasonable childcare costs, as follows:
 One-half or _____ % or (specify amount): \$ _____ per month of the costs
 Payments must be made to the other parent/party State Disbursement Unit childcare provider.
- (b) The parent ordered to pay support must pay reasonable uninsured health-care costs for the children, as follows:
 One-half or _____ % or (specify amount): \$ _____ per month of the costs
 Payments must be made to the other parent/party State Disbursement Unit health-care provider.

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.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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4. b. (2) Other (specify):

(3) For a total of: \$ _____ payable on the: _____ day of each month beginning (date): _____

(4) The low-income adjustment applies.

The low-income adjustment is rebutted and does not apply because (specific reasons):

(5) **Earning capacity.** The court finds that the parent ordered to pay support person receiving ordered support has the ability to earn \$ _____ per month. The factors used to calculate earning capacity under Family Code section 4058(b) are stated

(a) in *Earnings Capacity Factors Attachment* (form FL-302).

(b) as follows (specify):

(6) Any support ordered will continue until further order of court, unless terminated by operation of law.

c. The parent ordered to pay support The person receiving ordered support must (1) provide and maintain health insurance coverage for the children if available at no or reasonable cost, and keep the local child support agency informed of the availability of the coverage (the cost is presumed to be reasonable if it does not exceed 5 percent of gross income to add a child); (2) if health insurance is not available, provide coverage when it becomes available; (3) within 20 days of the local child support agency's request, complete and return a health insurance form; (4) provide to the local child support agency all information and forms necessary to obtain health-care services for the children; (5) present any claim to secure payment or reimbursement to the other parent or caretaker who incurs costs for health-care services for the children; and (6) assign any rights to reimbursement to the other parent or caretaker who incurs costs for health-care services for the children. 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.

d. The parent ordered to pay support owes support arrears as follows, as of (date):

(1) Child support: \$ _____ Spousal support: \$ _____ Family support: \$ _____

(2) Interest is not included and is not waived.

(3) Payable: \$ _____ on the: _____ day of each month beginning (date): _____

(4) Interest accrues on the entire principal balance owing and not on each installment as it becomes due.

e. No provision of this order may operate to limit any right to collect the principal (total amount of unpaid support) or to charge and collect interest and penalties as allowed by law. All payments ordered are subject to modification.

f. All payments, unless specified in item 4b(1) above, must be made to the State Disbursement Unit at: **California State Disbursement Unit, P.O. Box 989067, West Sacramento, CA 95798-9067.**

g. **An earnings assignment order is issued.**

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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4. h. In the event that there is a contract between a person receiving ordered 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 of past due support 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 person receiving ordered support, jointly.
- i. If "The parent ordered to pay support" box is checked in item 4c, a health insurance coverage assignment must issue.
- j. The parents must notify the local child support agency in writing within 10 days of any change in residence or employment.
- k. *Notice of Rights and Responsibilities Regarding Child Support* (form FL-192) is attached.
- l. The following person (the "other parent/party") is added as a party to this action (*name*):
- m. The court further orders (*specify*):


Date:

JUDICIAL OFFICER

Number of pages attached: _____

SIGNATURE FOLLOWS LAST ATTACHMENT

Approved as conforming to court order. Date:  _____ (SIGNATURE OF THE PARENT ORDERED TO PAY SUPPORT OR THEIR ATTORNEY)

Approved as conforming to court order. Date:  _____ (SIGNATURE OF THE PERSON RECEIVING ORDERED SUPPORT OR THEIR ATTORNEY)
--

GOVERNMENTAL AGENCY (under Family Code, §§ 17400, 17406): <hr/> TELEPHONE NO.: _____ FAX NO.: _____ EMAIL ADDRESS: _____ ATTORNEY FOR (name): _____	FOR COURT USE ONLY DRAFT Not approved by the Judicial Council FL-688.v3.02012024.wc
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	
SHORT FORM ORDER AFTER HEARING	CASE NUMBER: _____

1. **This matter proceeded as follows:** Uncontested By stipulation Contested

- a. Date: _____ Dept: _____ Judicial Officer: _____
- b. Petitioner present Attorney present (name): _____
- c. Respondent present Attorney present (name): _____
- d. Other parent/party present Attorney present (name): _____
- e. Attorney for local child support agency present under Family Code sections 17400 and 17406 by (name): _____
- f. Other (specify): _____

2. **THE COURT FINDS**, based upon the moving papers:

- a. (Name): _____ is the parent ordered to pay support in this proceeding.
- b. The parent ordered to pay support has no ability to pay support because (specify): _____
- c. Health insurance coverage at no or reasonable cost is currently not available to the parent ordered to pay support to cover the minor children in this action.

3. **THE COURT ORDERS**

- a. All orders previously made in this action will remain in full force and effect except as specifically modified below.
- b. This matter is continued to: _____ in Dept.: _____ for the following purposes only:
- c. The parent ordered to pay support is ordered to appear on the continuance date.
- d. Current child support is modified to: \$ _____ per month beginning (date): _____
- e. The low-income adjustment applies.
 The low-income adjustment is rebutted and does not apply because (specific reasons): _____
- f. **Earning capacity.** The court finds that the parent ordered to pay support person receiving ordered support has the ability to earn \$ _____ per month. The factors used to calculate earning capacity under Family Code section 4058(b) are stated
 (1) in Earnings Capacity Factors Attachment (form FL-302).
 (2) as follows (specify): _____

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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3. g. The court retains jurisdiction to order support retroactive to
- (1) (specify date):
- (2) the date the parent ordered to pay support becomes employed or otherwise has the ability to pay support.
- (3) the date the parent ordered to pay support abandons or separates from the children at issue in this case.
- h. Any order to liquidate the support arrearage is suspended until further order of this court.
- i. In the event that there is a contract between a person receiving ordered 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 of past due support 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 person receiving ordered support, jointly.
- j. The parents must notify the local child support agency in writing within 10 days of any change in residence or employment.
- k. The parent ordered to pay support is ordered to obtain health insurance coverage for the children in this action if it becomes available at no or reasonable cost. The party 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.
- l. If this order includes orders for child support or reimbursement of uninsured health-care or childcare costs, *Notice of Rights and Responsibilities Regarding Child Support* (form FL-192) must be attached and is incorporated into this order.
- m. Other (specify):

4. Number of pages attached: _____

Date: _____

JUDICIAL OFFICER

Approved as conforming to court order.

Date: _____

(SIGNATURE OF PARENT ORDERED TO PAY SUPPORT OR THEIR ATTORNEY)

Approved as conforming to court order.

Date: _____

(SIGNATURE OF THE PERSON RECEIVING ORDERED SUPPORT OR THEIR ATTORNEY)

SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	<i>FOR COURT USE ONLY</i> DRAFT Not approved by the Judicial Council FL-692.v4.02012024.wc
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
<input type="checkbox"/> MINUTES <input type="checkbox"/> ORDER <input type="checkbox"/> JUDGMENT <input type="checkbox"/> RECOMMENDED ORDER	

This form may be used for preparation of court minutes and/or as an alternative to form FL-615, FL-625, FL-630, FL-665, or FL-687. If this form is prepared as both court minutes and an alternative to one of these forms, then the parties do not need to prepare any additional form of order.

1. **This matter proceeded as follows:** Uncontested By stipulation Contested
- a. Date: _____ Time: _____ Department: _____
- b. Judicial officer (*name*): _____ Judge pro tempore Commissioner
 Court reporter (*name*): _____ Court clerk (*name*): _____
- c. Interpreter(s) present (*name*): _____ (specify language): _____
 for (*name*): _____
- d. Petitioner present Attorney present (*name*): _____
- e. Respondent present Attorney present (*name*): _____
- f. Other parent/party present Attorney present (*name*): _____
- g. Local child support agency attorney (Fam. Code, §§ 17400, 17406) by (*name*): _____
- h. The parent ordered to pay support is the petitioner respondent other parent/party.
- i. Other (*specify*): _____

2. This is a recommended order/judgment based on the objection of (*specify name*): _____
3. a. This matter is taken off calendar.
- b. This entire matter is denied with without prejudice.
- c. This matter is continued at the request of the local child support agency petitioner
 respondent other parent/party to
 Date: _____ Time: _____ Department: _____
 (*specific issues*):
 Petitioner Respondent Other parent/party is ordered to appear at that date and time.
- d. The court takes the following matters under submission (*specify*): _____

4. **Order of examination**
 The petitioner respondent other parent/party other (*specify*): _____
 was sworn and examined.
 Examination was held outside of court.

5. **Referrals**
- a. The parties are referred to family court services or mediation.
- b. Petitioner Respondent Other parent/party is referred to the family law facilitator.
- c. Other (*specify*): _____

THE COURT FINDS

6. Petitioner Respondent Other parent/party was was not served regarding this matter.
7. Petitioner Respondent Other parent/party admits denies parentage.
8. The parents of the children named below in item 14a are (*specify names*): _____

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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9. Petitioner Respondent Other parent/party has read, understands, and has signed *Advisement and Waiver of Rights for Stipulation (Governmental)* (form FL-694) and gives up those rights and freely agrees that a judgment may be entered in accordance with these findings.

10. a. Guideline support amount: \$

b. This order is is not based on the guideline.

c. The attached *Guideline Findings Attachment (Governmental)* (form FL-693) is incorporated into these findings.

d. A printout, which shows the calculation of child support payable, is attached and must become the court's findings.

e. The child support agreed to by the parents is below above the statewide child support guideline. The amount of support that would have been ordered under the guideline formula is: \$ _____ per month. The parties have been fully informed of their rights concerning child support. Neither party is acting out of duress or coercion. Neither party is receiving public assistance, and no application for public assistance is pending. The needs of the children will be adequately met by this agreed-upon amount of child support. The order is in the best interest of the children. If the order is below the guideline, no change of circumstance will be required for the court to modify this order. If the order is above the guideline, a change of circumstance will be required for the court to modify this order.

f. The low-income adjustment applies.

The low-income adjustment is rebutted and does not apply because (specific reasons):

11. Arrearages from (specify date): _____ through (specify date): _____ are: \$ _____ including interest interest not computed and not waived.

THE COURT ORDERS

12. All orders previously made in this action must remain in full force and effect except as specifically modified below.

13. Genetic testing must be coordinated by the local child support agency.

a. Petitioner Respondent Other parent/party Other (specify): _____

and the minor children must each submit to genetic testing as directed by the local child support agency.

b. The parent ordered to pay support must reimburse the local child support agency for genetic testing costs of: \$ _____

14. a. The parent ordered to pay support is the parent of the children listed below and must pay current child support for them.

The court finds that there is sufficient evidence that the parent ordered to pay support is the parent of the children listed below and therefore there is sufficient evidence to enter a support order.

<u>Name of child</u>	<u>Date of birth</u>	<u>Monthly basic support amount</u>
----------------------	----------------------	-------------------------------------

Additional children are listed on an attached page.

b. The parent ordered to pay support must pay additional support monthly for actual childcare costs of

(specify amount): \$ _____ one-half (specify percent): _____ percent of said costs. Payments must be made to the other parent/party State Disbursement Unit child-care provider.

c. The parent ordered to pay support must pay reasonable uninsured health-care costs for the children of

(specify amount): \$ _____ one-half (specify percent): _____ percent of said costs. Payments must be made to the other parent/party State Disbursement Unit health-care provider.

d. The parent ordered to pay support must pay additional support monthly for the following (specify):

(specify amount): \$ _____ one-half (specify percent): _____ percent of said costs. Payments must be made to the other parent/party State Disbursement Unit

e. Other (specify): _____

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.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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14. f. For a total of: \$ _____ payable on the: _____ day of each month
 beginning (date): _____

g. The low-income adjustment applies.
 The low-income adjustment is rebutted and does not apply because (specific reasons): _____

h. **Earning Capacity.** The court finds that the parent ordered to pay support person receiving ordered support has the ability to earn \$ _____ per month. The factors used to calculate earning capacity under Family Code section 4058(b) are stated

- (1) in *Earning Capacity Factors Attachment (form FL-302)*.
- (2) as follows (specify): _____

i. Any support ordered will continue until further order of court, unless terminated by operation of law.

15. The parent ordered to pay support The person receiving ordered support must (1) provide and maintain health insurance coverage for the children if available at no or reasonable cost and keep the local child support agency informed of the availability of the coverage (the cost is presumed to be reasonable if it does not exceed 5 percent of gross income to add a child); (2) if health insurance is not available, provide coverage when it becomes available; (3) within 20 days of the local child support agency's request, complete and return a health insurance form; (4) provide to the local child support agency all information and forms necessary to obtain health-care services for the children; (5) present any claim to secure payment or reimbursement to the other parent or caretaker who incurs costs for health-care services for the children; and (6) assign any rights to reimbursement to the other parent or caretaker who incurs costs for health-care services for the children. 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.

16. The parent ordered to pay support may claim the children for tax purposes as long as all child support payments are current as of the last day of the year for which the exemptions are claimed.

17. Petitioner Respondent Other parent/party must pay to petitioner respondent other parent/party as spousal support family support \$ _____ per month, beginning (date): _____ payable on the: _____ day of each month.

18. The parent ordered to pay support must pay child support for the following past periods and in the following amounts:

Name of child	Period of support	Amount
---------------	-------------------	--------

a. Other (specify): _____

b. For a total of: \$ _____ payable: \$ _____ on the: _____ day of each month
 beginning (date): _____

c. Interest accrues on the entire principal balance owing and not on each installment as it becomes due.

19. The parent ordered to pay support owes support arrears as follows, as of (date): _____

a. Child support: \$ _____ Spousal support: \$ _____ Family support: \$ _____ Other: \$ _____

b. Interest is not computed and is not waived.

c. Payable: \$ _____ on the: _____ day of each month
 beginning (date): _____

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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- 19. d. Interest accrues on the entire principal balance owing and not on each installment as it becomes due.
- 20. No provision of this judgment can operate to limit any right to collect all sums owing in this matter as otherwise provided by law.
- 21. All payments, unless specified in items 14b, c, and d above, must be made to the State Disbursement Unit at:
California State Disbursement Unit, P.O. Box 989067, West Sacramento, CA 95798-9067.
- 22. **An earnings assignment order is issued.**
- 23. In the event that there is a contract between a **person receiving ordered 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 of past due support 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 **person receiving ordered support, jointly.**
- 24. If "The parent ordered to pay support" box is checked in item 15, a health insurance coverage assignment must issue.
- 25. Job search. (*Specify name(s)*): _____ must seek employment for at least (*specify number*): _____ jobs per week and report those job applications and results to the court and the local child support agency at the continuance date. These job applications are to be made in person, not by phone, fax, or email.
- 26. For purposes of the licensing issue only, the parent ordered to pay support is found to be in compliance with the support order in this action. The local child support agency must issue a release of license(s).
- 27. Notwithstanding any noncompliance issues with the support order in this action, the court finds that the needs of the party ordered to pay support warrant a conditional release. The local child support agency must issue a release of license(s). Such release is effective only as long as the parent ordered to pay support complies with all payment terms of this order.
- 28. A warrant of attachment/bench warrant issues for (*specify name*):
 - a. Bail is set in the amount of: \$ _____
 - b. Service is stayed until (*date*): _____
- 29. The court retains jurisdiction to make orders retroactive to (*date*): _____
- 30. The court reserves jurisdiction over all issues the issues of (*specify*): _____
- 31. The parents must notify the local child support agency in writing within 10 days of any change in residence or employment.
- 32. **Notice of Rights and Responsibilities Regarding Child Support (form FL-192)** is attached and incorporated.
- 33. The following person (the "other parent/party") is added as a party to this action (*name*): _____
- 34. The court further orders (*specify*): _____

Number of pages attached: _____

Approved as conforming to court order.

Date: _____

(SIGNATURE OF PARENT ORDERED TO PAY SUPPORT OR THEIR ATTORNEY)

(SIGNATURE OF PERSON RECEIVING ORDERED SUPPORT OR THEIR ATTORNEY)

JUDICIAL OFFICER

Signature follows last attachment.

Approved as conforming to court order.

Date: _____

(SIGNATURE OF ATTORNEY FOR LOCAL CHILD SUPPORT AGENCY)

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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GUIDELINE FINDINGS ATTACHMENT

The court makes the following findings required by Family Code sections 4056, 4057, and 4065:

1. a. The parent ordered to pay support is: petitioner respondent other parent/party
- b. The person receiving ordered support is: petitioner respondent other parent/party

2. INCOME

- a. A printout of a computer calculation and findings is attached and incorporated in this order for all required items not filled out below.

	<u>Gross monthly income</u>	<u>Net monthly income</u>	<u>Receiving TANF/CalWORKs</u>
b. Each parent's monthly income is as follows:			
Parent ordered to pay support:	\$ _____	\$ _____	<input type="checkbox"/>
Person receiving ordered support:	\$ _____	\$ _____	<input type="checkbox"/>

- c. **Earning capacity.** The court finds that the parent ordered to pay support person receiving ordered support has the ability to earn \$ _____ per month. The factors used to calculate earning capacity under Family Code section 4058(b) are stated

- (1) in *Earnings Capacity Factors Attachment* (form FL-302).
- (2) as follows (*specify*):

3. TAX FILING STATUS

- a. Parent ordered to pay support: Single HH/MLA MFJ MFS Number of exemptions: _____
- b. Person receiving ordered support: Single HH/MLA MFJ MFS Number of exemptions: _____

4. CHILDREN OF THIS RELATIONSHIP

- a. Number of children who are the subjects of the support order (*specify*): _____
- b. Approximate percentage of time spent with the parent ordered to pay support: _____ %
- c. Approximate percentage of time spent with the person receiving ordered support: _____ %

5. HARDSHIPS

Hardships for the following have been allowed in calculating child support:

	<u>Parent ordered to pay support</u>	<u>Person receiving ordered support</u>	<u>Approximate ending time for the hardship</u>
a. <input type="checkbox"/> Other minor children:	\$ _____	\$ _____	_____
b. <input type="checkbox"/> Extraordinary medical expenses:	\$ _____	\$ _____	_____
c. <input type="checkbox"/> Catastrophic losses:	\$ _____	\$ _____	_____

6. THE COURT FINDS:

- a. Mandatory findings for orders that differ from the guideline:
 - (1) The guideline amount of child support calculated is \$ _____ per month.
 - (2) The reasons for departure from guideline support are (*specify*):

 - (3) The reasons the amount ordered is consistent with the best interests of the children are (*specify*):

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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6. b. *If requested*, mandatory findings for orders that differ from the guideline:

are contained in the attached declaration.

(1) The net monthly disposable income for each parent is:

(a) Parent ordered to pay support: \$ _____ (b) Person receiving ordered support: \$ _____

(2) The actual federal income tax filing status for each parent is:

(a) Parent ordered to pay support: _____ (b) Person receiving ordered support: _____

(3) The deductions from gross wages for each parent are:

(a) Parent ordered to pay support:

Description of Deduction	Amount
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
TOTAL	\$ _____

(b) Person receiving ordered support:

Description of Deduction	Amount
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
TOTAL	\$ _____

c. Other findings (*specify*):

7. STIPULATION TO NON-GUIDELINE ORDER

The child support agreed to by the parties is below above the statewide child support guideline. The amount of support that would have been ordered under the guideline formula is \$ _____ per month. The parties have been fully informed of their rights concerning child support. Neither party is acting out of duress or coercion. Neither party is receiving public assistance, and no application for public assistance is pending. The needs of the children will be adequately met by this agreed-upon amount of child support. The order is in the best interest of the children. If the order is below the guideline, no change of circumstances will be required to modify this order. If the order is above the guideline, a change of circumstances will be required to modify this order.

8. OTHER REBUTTAL FACTORS

Support calculation

a. The court finds by a preponderance of the evidence that rebuttal factors exist. The rebuttal factors result in an increase decrease in child support. The revised amount of support is \$ _____ per month.

b. The court finds the child support amount revised by these factors to be in the best interest of the child and that application of the formula would be unjust or inappropriate in this case. The revised amount remains in effect until further order until (*date*): _____ when guideline support of \$ _____ must commence.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	CASE NUMBER:
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8. c. **The factors are:**

- (1) The sale of the family residence is deferred under Family Code section 3800, and the rental value of the family residence in which the children reside exceeds the mortgage payments, homeowners insurance, and property taxes by: \$ _____ per month.
- (2) The parent paying support has extraordinarily high income, and the amount determined under the guideline would exceed the needs of the children.
- (3) The parent ordered to pay support person receiving ordered support is not contributing to the needs of the children at a level commensurate with that party's custodial time.
- (4) After application of the low-income adjustment, guideline child support would be greater than 50 percent of the net disposable income of the parent ordered to pay support.
- (5) Special circumstances exist in this case. The special circumstances are:
 - (a) The parents have different timesharing arrangements for different children.
 - (b) The parents have substantially equal custody of the children and one parent has a much lower or higher percentage of income used for housing than the other parent.
 - (c) A child has special medical or other needs that require support greater than the formula amount. These needs are (*specify*):
 - (d) Other (*specify*):