

**FAMILY LAW FACILITATOR
SELF-HELP CENTER**

**REQUEST FOR ORDER INSTRUCTIONS
CHILD CUSTODY & VISITATION**

1 You will need the following forms:

1. [FL-300 Request for Order](#)
2. [FL-320 Responsive Declaration Regarding Order to Show Cause](#)
3. [FL-330 Proof of Personal Service](#)

The filing fee is \$85.00 payable when you give the completed papers to the clerk. If you would like to request a Fee Waiver, you will also need a [Fee Waiver Application FW-001](#) and [Fee Waiver Order FW-003](#).

2 You can get copies of the forms on-line at www.courtinfo.ca.gov/forms

3 Use the attached instructions with examples to fill out the forms. Your case number and case title can be obtained through the Civil Records Department.

Your Case Information		
Petitioner/Plaintiff: Other Parent: Respondent/Defendant:	Case Number:	
Requested Court Date:	Time:	Dept:
Current Orders:		

4 Follow the steps on the last page to properly file and serve your papers.

5 If you have any questions, feel free to contact us in person or by calling the office at 299-1137.

How to fill out

REQUEST FOR ORDERS (FL-300)

DIRECTIONS

- ▶ Find the highlighted number on the sample form.
 - ▶ Go to the same number below to find out how to fill out the form.
 - ▶ Type or print in ink. You can also prepare and print this form online at <http://www.courts.ca.gov/forms.htm>
- 1 Write in your name, address, and telephone number. Next to “Attorney for:” write in “Self-represented.” Write in court address as shown.
 - 2 Write in the name of the Petitioner and the Respondent as originally filed.

FL-300	
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	
FOR COURT USE ONLY	
1	
TELEPHONE NO.: _____ FAX NO. (optional): _____	
E-MAIL ADDRESS (optional): _____	
ATTORNEY FOR Name:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Napa	
STREET ADDRESS: 825 BROWN St.	
MAILING ADDRESS:	
CITY AND ZIP CODE: Napa, CA 94559	
BRANCH NAME:	
PETITIONER/PLAINTIFF:	
RESPONDENT/DEFENDANT:	
OTHER PARTY/PARTY:	
2	
REQUEST FOR ORDER <input type="checkbox"/> MODIFICATION <input type="checkbox"/> Temporary Emergency Court Order	
<input type="checkbox"/> Child Custody <input type="checkbox"/> Visitation <input type="checkbox"/> Spousal Support <input type="checkbox"/> Other (specify): _____	
<input type="checkbox"/> Child Support <input type="checkbox"/> Spousal Support <input type="checkbox"/> Other (specify): _____	
<input type="checkbox"/> Attorney Fees and Costs	
CASE NUMBER: 3	
4	
1. TO (name): 5	
2. A hearing on this Request for Order will be held as follows: If child custody or visitation is an issue in this proceeding, Family Code section 3170 requires mediation before or at the same time as the hearing (see item 7.)	
a. Date: 6 Time: _____ Dept.: _____ Room: _____	
b. Address of court <input type="checkbox"/> same as noted above <input type="checkbox"/> other (specify): _____	
3. Attachments to be served with this Request for Order:	
a. <input type="checkbox"/> A blank Responsive Declaration (form FL-320)	
b. <input type="checkbox"/> Completed Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration	
c. <input type="checkbox"/> Completed Financial Statement (Simplified) (form FL-155) and a blank Financial Statement (Simplified)	
d. <input type="checkbox"/> Points and authorities	
e. <input type="checkbox"/> Other (specify): _____	
Date: 7	
(TYPE OR PRINT NAME) _____ (SIGNATURE) _____	
8 COURT ORDER	
4. <input type="checkbox"/> YOU ARE ORDERED TO APPEAR IN COURT AT THE DATE AND TIME LISTED IN ITEM 2 TO GIVE ANY LEGAL REASON WHY THE ORDERS REQUESTED SHOULD NOT BE GRANTED.	
5. <input type="checkbox"/> Time for <input type="checkbox"/> service <input type="checkbox"/> hearing is shortened. Service must be on or before (date): _____	
6. Any responsive declaration must be served on or before (date): _____	
7. The parties are ordered to attend mandatory custody services as follows:	
9	
8. <input type="checkbox"/> You are ordered to comply with the Temporary Emergency Court Orders (form FL-305) attached.	
9. <input type="checkbox"/> Other (specify): _____	
Date: _____	
JUDICIAL OFFICER	
To the person who received this Request for Order: If you wish to respond to this Request for Order, you must file a Responsive Declaration to Request for Order (form FL-320) and serve a copy on the other parties at least nine court days before the hearing date unless the court has ordered a shorter period of time. You do not have to pay a filing fee to file the Responsive Declaration to Request for Order (form FL-320) or any other declaration including an Income and Expense Declaration (form FL-150) or Financial Statement (Simplified) (form FL-155).	
Page 1 of 4	
Form Adopted by Mandatory Law Judicial Council of California FL-300 (Rev. July 1, 2012)	
REQUEST FOR ORDER	
Family Court Services 2009-2010 Government Code, § 26520 www.cwsb.ca.gov	

- 3 Write in the case number.
- 4 Check the “Child Custody” and “Visitation” boxes. Check the “Modification” box if you want to change an existing order.
- 5 Write in the name of the person you are taking to court.
- 6 Fill in the court date, time and department.

If the other parent does not have an attorney, schedule the date 8 weeks out on a Wednesday in Department F at 8:30 a.m. Fill in item 2b address as “other: 1111 Third Street, Napa, CA 94559”

If the other parent has an attorney, schedule the date 8 weeks out on a Monday in Dept. A at 8:30 a.m. Check box 2b address as “same as noted above.”

- 7 Date, print and sign your name.
- 8 Check “COURT ORDER” box. Also check box 4 “YOU ARE ORDERED TO APPEAR IN COURT....”
- 9 Write in “Prior to court, attend orientation and mediation through Family Court Services (707) 299-1240.”

FL-300

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/PARTY:	CASE NUMBER:
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1

REQUEST FOR ORDER AND SUPPORTING DECLARATION

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

1. **CHILD CUSTODY** To be ordered pending the hearing

a. Child's name and age b. Legal custody to (name of person who makes decisions about health, education, etc.) c. Physical custody to (name of person with whom child will live)

3

d. As requested in form

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

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

5 2. **CHILD VISITATION (PARENTING TIME)** To be ordered pending the hearing

a. As requested in: (1) Attachment 2a (2) Child Custody and Visitation Application Attachment (form FL-311)
 (3) Other (specify):

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

6 c. One or more domestic violence restraining/protective orders are now in effect. (Attach a copy of the orders if you have one.) The orders are from the following court or courts (specify county and state):

(1) Criminal: County/state: (3) Juvenile: County/state:
 Case No. (if known): Case No. (if known):
 (2) Family: County/state: (4) Other: County/state:
 Case No. (if known): Case No. (if known):

3. **CHILD SUPPORT** (An earnings assignment order may be issued.)

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

d. Modify existing order
 (1) filed on (date):
 (2) ordering (specify):

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

FL-300 (Rev. July 1, 2012) **REQUEST FOR ORDER** Page 2 of 4

Northwest
ESSENTIAL FORMS™

How to fill out

Page 2 of the REQUEST FOR ORDER (FL-300)

DIRECTIONS

- ▶ Find the highlighted number on the sample form.
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in ink.

1 Write in the name of the Petitioner, Respondent and Case Number.

2 Check whether you are the Petitioner or Respondent.

3 Check box 1 “Child Custody” to let the other party and the court know you want to change custody. Write in the child’s name and age.

Legal Custody: if you seek sole legal custody, write in your name under “Legal Custody.” If you seek joint legal custody, write in your name and the other party’s name.

Physical Custody: if you seek sole physical custody, write in your name under “Physical Custody.” If you seek joint physical custody, write in your name and the other party’s name.

4 If you are changing an existing order, check box 1(e) “Modify existing order” and write in the date and terms of the current order.

5 Check box 2 to let the other party and the court know you want to change visitation. Check the “other:” box. Write in how you want visitation to be ordered by the court. Check box b “Modify existing order” and write in the date and terms of the current order.

6 Check box 2(c) if any domestic violence restraining orders are in effect. Specify the county and state where issued. Specify the type of order and case number if known.

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARTY/PARTY:	1	CASE NUMBER:
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4. **SPOUSAL OR PARTNER SUPPORT** *(An earnings assignment order may be issued.)*
- a. Amount requested (monthly): \$ Terminate existing order (1) filed on (date): (2) ordering (specify):
- c. Modify existing order (1) filed on (date): (2) ordering (specify):
- d. The Spousal or Partner Support Declaration Attachment (form FL-157) is attached (for modification of spousal or partner support after judgment only)
- e. An Income and Expense Declaration (form FL-150) must be attached
5. **ATTORNEY FEES AND COSTS** are requested on Request for Attorney Fees and Costs Order Attachment (form FL-319) or a declaration that addresses the factors covered in that form. An Income and Expense Declaration (form FL-150) must be attached. A Supporting Declaration for Attorney Fees and Costs Order Attachment (form FL-158) or a declaration that addresses the factors covered in that form must also be attached.
6. **PROPERTY RESTRAINT** **To be ordered pending the hearing**
- a. The petitioner respondent claimant is restrained from transferring, encumbering, hypothecating, concealing, or in any way disposing of any property, real or personal, whether community, quasi-community, or separate, except in the usual course of business or for the necessities of life.
- The applicant will be notified at least five business days before any proposed extraordinary expenditures, and an accounting of such will be made to the court.
- b. Both parties are restrained and enjoined from cashing, borrowing against, canceling, transferring, disposing of, or changing the beneficiaries of any insurance or other coverage, including life, health, automobile, and disability, held for the benefit of the parties or their minor children.
- c. Neither party may incur any debts or liabilities for which the other may be held responsible, other than in the ordinary course of business or for the necessities of life.
7. **PROPERTY CONTROL** **To be ordered pending the hearing**
- a. The petitioner respondent is given the exclusive temporary use, possession, and control of the following property that we own or are buying (specify):
- b. The petitioner respondent is ordered to make the following payments on liens and encumbrances coming due while the order is in effect:
- | | | |
|-------------|--------------------------|---------------|
| <u>Debt</u> | <u>Amount of payment</u> | <u>Pay to</u> |
|-------------|--------------------------|---------------|
8. **OTHER RELIEF** (specify):

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

How to fill out

Page 3 of the REQUEST FOR ORDER (FL-300)

DIRECTIONS

- ▶ Find the highlighted number on the sample form.
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in ink.
- 1** Write in the name of the Petitioner, Respondent and Case Number.

Leave the rest of the form Blank.

How to fill out

Page 4 of the REQUEST FOR ORDER (FL-300)

DIRECTIONS

- ▶ Find the highlighted number on the sample form.
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in ink.

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/PARTY:		CASE NUMBER:	FL-300
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9. I request that time for service of the Request for Order and accompanying papers be shortened so that these documents may be served no less than (specify number) _____ days before the time set for the hearing. I need to have this order shortening time because of the facts specified in item 10 or the attached declaration.

10. FACTS IN SUPPORT of orders requested and change of circumstances for any modification are (specify):
 Contained in the attached declaration. (You may use Attached Declaration (form MC-031) for this purpose.
2 The attached declaration must not exceed 10 pages in length unless permission to file a longer declaration has been obtained from the court.)

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

Date: **3** _____

(TYPE OR PRINT NAME) (SIGNATURE OF APPLICANT)

2 Requests for Accommodations
Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least five days before the proceeding. Contact the clerk's office or go to www.courts.ca.gov/forms for Request for Accommodations by Persons With Disabilities and Response (form MC-110). (Civil Code, § 54.8.)

FL-300 (Rev. July 1, 2012) REQUEST FOR ORDER Page 4 of 4
ESSENTIAL FORMS™

- 1** Write in the name of the Petitioner, Respondent and Case Number.
- 2** Check box 10. In the space provided, write the reasons for your request. If more space is needed, check the "Contained in the attached declaration" box. Attach additional sheets as necessary but no more than 10.
- 3** Date, print and sign your name.

“BLANK” RESPONSIVE DECLARATION TO ORDER TO SHOW CAUSE OR NOTICE OF MOTION (FL-320)

DIRECTIONS

- ▶ Leave pages 1 + 2 of this form blank.
- ▶ This form gets attached to the Endorsed copy that is served on the other party.

<small>ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):</small>		<small>FOR COURT USE ONLY</small>		FL-320
<small>TELEPHONE NO.:</small>		<small>FAX NO.:</small>		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Napa				
<small>STREET ADDRESS: 825 BROWN BL.</small>				
<small>MAILING ADDRESS:</small>				
<small>CITY AND ZIP CODE: Napa, CA 94559</small>				
<small>BRANCH NAME:</small>				
<small>PETITIONER/PLAINTIFF:</small>				<small>CASE NUMBER:</small>
<small>RESPONDENT/DEFENDANT:</small>				
RESPONSIVE DECLARATION TO ORDER TO SHOW CAUSE OR NOTICE OF MOTION				
<small>HEARING DATE:</small>		<small>TIME:</small>		<small>DEPARTMENT OR ROOM:</small>

1. CHILD CUSTODY
 - a. I consent to the order requested.
 - b. I do not consent to the order requested but I consent to the following order:

2. CHILD VISITATION
 - a. I consent to the order requested.
 - b. I do not consent to the order requested but I consent to the following order:

3. CHILD SUPPORT
 - a. I consent to the order requested.
 - b. I consent to guideline support.
 - c. I do not consent to the order requested, but I consent to the following order:
 - (1) Guideline
 - (2) Other (specify):

4. SPOUSAL SUPPORT
 - a. I consent to the order requested.
 - b. I do not consent to the order requested.
 - c. I consent to the following order:

5. ATTORNEY FEES AND COSTS
 - a. I consent to the order requested.
 - b. I do not consent to the order requested.
 - c. I consent to the following order:

Form Adopted for Mandatory Use
Judicial Council of California
FL-320 (Rev. January 1, 2002)
Martin Dunne's Essential Forms™

RESPONSIVE DECLARATION TO ORDER TO SHOW CAUSE
OR NOTICE OF MOTION

Page 1 of 2
www.courtinfo.ca.gov

<small>PETITIONER/PLAINTIFF:</small>		<small>CASE NUMBER:</small>	
<small>RESPONDENT/DEFENDANT:</small>			

6. PROPERTY RESTRAINT
 - a. I consent to the order requested.
 - b. I do not consent to the order requested.
 - c. I consent to the following order:

7. PROPERTY CONTROL
 - a. I consent to the order requested.
 - b. I do not consent to the order requested.
 - c. I consent to the following order:

8. OTHER RELIEF
 - a. I consent to the order requested.
 - b. I do not consent to the order requested.
 - c. I consent to the following order:

9. SUPPORTING INFORMATION

contained in the attached declaration.

NOTE: To respond to a request for domestic violence restraining orders requested in the *Request for Order (Domestic Violence Prevention)* (form DV-100) you must use the *Answer to Temporary Restraining Order (Domestic Violence Prevention)* (form DV-120).

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)

FL-320 (Rev. January 1, 2002)
Martin Dunne's Essential Forms™

RESPONSIVE DECLARATION TO ORDER TO SHOW CAUSE
OR NOTICE OF MOTION

Page 2 of 2

<small>ATTORNEY OR PARTY WITHOUT ATTORNEY OR GOVERNMENTAL AGENCY (under Family Code, §§ 17400, 17406) (Name, state bar number, and address):</small> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"> 1 TELEPHONE NO.: _____ FAX NO.: _____ ATTORNEY FOR (Name): _____ SUPERIOR COURT OF CALIFORNIA, COUNTY OF Napa STREET ADDRESS: 825 Brown St. MAILING ADDRESS: CITY AND ZIP CODE: Napa, CA 94559 BRANCH NAME: _____ </div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"> PETITIONER/PLAINTIFF: _____ RESPONDENT/DEFENDANT: 2 OTHER PARENT: _____ </div> <div style="border: 1px solid black; padding: 2px;"> PROOF OF PERSONAL SERVICE </div>	<small>FOR COURT USE ONLY</small> CASE NUMBER: 3
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1. I am at least 18 years old, not a party to this action, and not a protected person listed in any of the orders.

2. Person served (name): **4**

3. I served copies of the following documents (specify):

5

4. By personally delivering copies to the person served, as follows:

a. Date: _____ b. Time: _____
 c. Address: **6**

5. I am

7 a. not a registered California process server. d. exempt from registration under Bus. & Prof. Code section 22350(b).
 b. a registered California process server.
 c. an employee or independent contractor of a registered California process server. e. a California sheriff or marshal.

6. My name, address, and telephone number, and, if applicable, county of registration and number (specify):

8

9 7. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
 8. I am a California sheriff or marshal and I certify that the foregoing is true and correct.

Date: **10**

(TYPE OR PRINT NAME OF PERSON WHO SERVED THE PAPERS)

(SIGNATURE OF PERSON WHO SERVED THE PAPERS)

Page 1 of 2

Form Approved for Optional Use
 Judicial Council of California
 FL-330 (Rev. January 1, 2003)
 Martin Clavin's Essential Forms™

PROOF OF PERSONAL SERVICE

Code of Civil Procedure, § 10111
 www.courtinfo.ca.gov

How to fill out PROOF OF PERSONAL SERVICE (FL-330)

DIRECTIONS

- ▶ Find the highlighted number on the sample form.
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in ink.

- 1** Write in your name, address, and telephone number. Next to “Attorney for:” write in “Self-represented.” Write in court address as shown.
- 2** Write in the name of the Petitioner and the Respondent as shown on the first page.
- 3** Write in the case number as shown on the first page
- 4** Write in the name of the person who is being served with copies.
- 5** Write in the following: “Request for Order; Blank Response”
- 6** Have the person who served the papers write in the date, time and address where the other person was given the copies.
- 7** Check box 5 (a) if a friend or family member served the copies.
- 8** Have the person who served the papers write in their name, address and telephone number.
- 9** Check box 7 if a friend or family member served the copies.
- 10** Have the person who served the copies date, print and sign.

**FAMILY LAW FACILITATOR
SELF-HELP CENTER**

**REQUEST FOR ORDER
CHILD CUSTODY & VISITATION**

So how do I get the court to hear my case?

Fill out the forms using the attached Samples & Instructions. You can get additional copies of the forms at www.courtinfo.ca.gov

Make 2 copies.

Drop off the originals and 2 copies with the clerk at Napa Superior Court, 825 Brown Street, Napa, CA 94559.

Wait approximately 2 days for the judge to sign the order

Pick up “Endorsed” copies from the clerk.
One set is for your records.
One set is for service on the other party.

Contact Family Court Services at 299-1240 to schedule Orientation and Mediation.

Have someone 18 or older personally serve the other party with one of the Endorsed copies AND blank Response forms. You must have served the other party at least 16 court days before the date of the hearing if personally served. If the other party lives out of state or out of the country, longer notice is required.

Have the person who served the other party fill out the Proof of Service.

File the Proof of Service with the clerk. This gives the judge proof that the other party was notified of the court date.

Attend orientation/mediation at Family Court Services as directed.

Attend the court hearing on the date scheduled. Bring your papers with you in case the judge has any questions.

File

Serve

**File the
Proof**