

REQUEST FOR ORDER EX-PARTE



**LEGAL AID
FOUNDATION
OF LOS ANGELES**

HOW TO GUIDE

Self-Help Legal Access Centers

Santa Monica

1725 Main St.,
Room 210
Santa Monica, CA 90401

Inglewood

1 East Regent St.,
Room 107
Inglewood, CA 90301

Torrance

825 Maple Ave.,
Room 160
Torrance, CA 90503

Long Beach

275 Magnolia Ave.,
Room 3101
Long Beach, CA 90802

March 2019

This guide is designed to help you fill out the forms yourself. It is not intended to provide legal advice nor strategy as to how to complete the case. The information provided in this packet only presents options and examples. This is not a substitute for professional legal advice from an attorney.

Please type or print in black or blue ink.

Temporary Emergency (Ex Parte) Request For Orders

The emergency must involve an immediate danger or irreparable harm to a party or children in the case, or an immediate loss or damage to property. If you do not convince the Court that it is an emergency, the Judge may likely tell you to refile an ordinary request for hearing and you will have to start all over again.

YOU WILL NEED TO DO THE FOLLOWING:

- [] Ex Parte (or Emergency Notice) must be given to the other party by telephone notifying them of the time, date, place and what orders that you are asking the court for. This Notice usually must be given by **10 AM the COURT DAY** before you go to the hearing. A Script of what you may consider saying in the phone call to the other side is on the next page.
- [] Complete Form FL 303 which includes a declaration describing how and when you notified the other party (or why you could not give notice) about your request and the hearing. Also, explain how you intend to give (serve) a copy of these documents to the other side.
- [] Describe the emergency and explain in detail in the attached Declaration why you need the temporary emergency orders instead of waiting for a regular hearing.
- [] Complete form FL-305 to serve as your proposed temporary orders for the Judge to sign, if approved.
- [] Complete Form FL-300 and any necessary documents describing what you are asking the court for.
- [] Give a detailed and full explanation your request and why the request is in the best interest of the child(ren) or important to you, your family, property etc.
- [] File the documents before your court's required filling cut off time.
- [] Appear on time for your court hearing.
- [] Convince the court that you should get your orders requested over the likely objection of the other side
- [] Do not bring your child(ren) to Court with you. Their care may distract you or they may distract others which may require the bailiff to remove them from the courtroom. Also, they may hear very emotional or child inappropriate discussions during the hearing. Most courthouses have FREE Child Care for you available.

Use BLACK INK to complete these forms. This guide is to assist you in filling out the necessary forms. This may not be all the forms that you may need based on the individual facts of your case. Seek legal professional guidance before submitting this or any legal document to the court. Blank forms are available in our "Ex Parte Request For Orders Form Packet". Please complete those forms as much as you can (at least 80%) before you ask this center to review your documents.

Ex-Parte Notice in a Family Law/Civil Harassment Case

Note: If you are intending to give notice to the other party, you must give notice before 10 a.m. the COURT/BUSINESS DAY before you present your ex parte matter to the court

Script/What to Say: "I am calling to give ex parte notice.

"My name is (YOUR NAME) _____.

On (date)_____ at (time) _____ I am going to Department(s)
_____ of the Courthouse located at _____

(Address of Court House) to file an Ex Parte Application in the CASE of:

(name of petitioner) _____ versus

(name of respondent) _____

(case number): _____

I can be reached at phone number (**Your Telephone number**) _____.

At the hearing I will be seeking the following orders: _____

_____."

Please get the following information:

1. Date and time you called to give notice: _____

2. Name and title of the person you spoke with: _____

3. If the other party said anything after you spoke with them: _____

4. If you get a voicemail, read the entire script on to the message. Note the date/time of any response you get to prove that the other side got the voicemail message.

IMPORTANT FILING INSTRUCTIONS: The Ex Parte (Temporary Emergency Court Orders) must be filed the morning of your Ex Parte hearing before _____ .

YOU MUST FILE YOUR PAPER WORK ON TIME WITH THE CLERK.

A COPY OF WHAT WAS FILED NEEDS TO BE GIVEN (SERVED) TO THE OTHER SIDE.

YOU MUST BE ON TIME TO YOUR HEARING.

PARTY WITHOUT ATTORNEY OR ATTORNEY: STATE BAR NO.: NAME: PRINT YOUR NAME FIRM NAME: STREET ADDRESS: PRINT YOUR ADDRESS CITY: STATE: ZIP CODE: TELEPHONE NO.: PRINT YOUR PHONE # FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name): SELF REPRESENTED	FOR COURT USE ONLY <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> CHECK THE BOXES OF THE ORDERS THAT YOU ARE ASKING THE COURT TO GIVE YOU. </div>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES STREET ADDRESS: MAILING ADDRESS: PRINT THE ADDRESS OF THE COURT CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: PRINT THE PETITIONER'S NAME RESPONDENT: PRINT THE RESPONDENT'S NAME OTHER PARENT/PARTY:	
REQUEST FOR ORDER <input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> TEMPORARY EMERGENCY ORDERS <input type="checkbox"/> Child Custody <input type="checkbox"/> Visitation (Parenting Time) <input type="checkbox"/> Spousal or Partner Support <input type="checkbox"/> Child Support <input type="checkbox"/> Domestic Violence Order <input type="checkbox"/> Attorney's Fees and Costs <input type="checkbox"/> Property Control <input type="checkbox"/> Other (specify):	CASE NUMBER: <div style="text-align: center; border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> PRINT CASE NUMBER </div>

NOTICE OF HEARING

1. TO (name(s)): **PRINT THE OTHER SIDE'S FULL NAME**

Petitioner Respondent Other Parent/Party Other (specify):

2. A COURT HEARING WILL BE HELD AS FOLLOWS:

Check whether the other side is the petitioner or respondent.

a. Date:	THE CLERK WILL GIVE YOU A HEARING DATE. YOU MUST HAVE THIS DOCUMENT AND ALL THE ATTACHMENTS SERVED ON THE OTHER SIDE AS SOON AS POSSIBLE.	Room: <input type="checkbox"/>
b. Address of court <input checked="" type="checkbox"/> same		

3. **WARNING to the person served** *When the Request for Order is granted, the court may make the requested orders without you if you do not file a Responsive Declaration to Request for Order (form FL-320), serve a copy on the other parties at least nine court days before the hearing (unless the court has ordered a shorter period of time), and appear at the hearing. (See form FL-320-INFO for more information.)*

(Forms FL-300-INFO and DV-400-INFO provide information about completing this form.)

COURT ORDER
(FOR COURT USE ONLY)

It is ordered that:

4. <input type="checkbox"/> Time <input type="checkbox"/> for service	<div style="border: 1px solid black; padding: 20px; text-align: center; width: fit-content; margin: auto;"> THIS IS FOR THE COURT TO FILL OUT </div>	(date):
5. <input type="checkbox"/> A Responsive Declaration):
6. <input type="checkbox"/> The parties must attend a hearing <i>(specify date, time, and location)</i>		ing counseling as follows
7. <input type="checkbox"/> The orders in Temporary Orders must be personally served with all documents filed with this Request for Order.		nd must be personally
8. <input type="checkbox"/> Other (specify):		

Date: _____

JUDICIAL OFFICER Page 1 of 4

REQUEST FOR ORDER

PETITIONER: PRINT THE PETITIONER'S NAME RESPONDENT: PRINT THE RESPONDENT'S NAME OTHER PARENT/PARTY:	CASE NUMBER: PRINT THE CASE NUMBER
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REQUEST FOR ORDER

Note: Place a mark in front of the box that applies to your case or to your request. If you need more space, mark the box for "Attachment." For example, mark "Attachment 2a" to indicate that the list of children's names and birth dates continues on a paper attached to this form. Then, on a sheet of paper, list each attachment number followed by your request. At the top of the paper, write your name, case number, and "FL-300" as a title. (You may use *Attached Declaration* (form MC-031) for this purpose.)

1. **RESTRAINING ORDER INFORMATION**

One or more domestic violence restraining/protective orders are now in effect between (specify):
 Petitioner Respondent Other Parent/Party (Attach a copy of the orders if you have one.)

The orders are from the following court or courts (specify county and state):

- a. Criminal: County
- b. Family: County/s
- c. Juvenile: County/state (specify):
- d. Other: County/state (specify):

Check these boxes IF YOU ARE YOU ASKING FOR CHILD CUSTODY ORDERS AND/OR VISITATION ORDERS

Case No. (if known):
 Case No. (if known):

2. **CHILD CUSTODY**

I request temporary emergency orders

VISITATION (PARENTING TIME)

a. I request that the court make orders about the following children (specify):

Child's Name Date of Birth

PRINT YOUR CHILD(REN'S) NAME(S) PRINT DOB

Legal Custody to (person who decides: health, education, etc):

PRINT THE NAMES OF THE PARENTS WHO WILL HAVE LEGAL CUSTODY. ONE PARENT FOR "SOLE/PRIMARY" TWO PARENTS FOR "JOINT"

Physical Custody to (person with whom child lives):

PRINT THE NAMES OF THE PARENTS WHO WILL HAVE PHYSICAL CUSTODY. ONE PARENT FOR "SOLE/PRIMARY" TWO PARENTS FOR "JOINT"

b. The orders I request for child custody visitation (parenting time) are:

(1) Specified in the attached forms:

- Form FL-305 Form FL-311 Form FL-312 Form FL-341(C)
- Form FL-341(D) Form FL-341(E) Other (specify):

(2) As follows (specify):

Attachment 2a.

Attachment 2b.

IF YOU USE THESE FORMS TO EXPLAIN WHAT YOU WANT, BE SURE TO MARK THEM

c. The orders that I request are in the best interest of the children because (specify):

Attachment 2c.

EXPLAIN WHY THESE ORDERS ARE IN "THE BEST INTEREST OF THE CHILDREN" (OR GOOD FOR THE KIDS). TELL THE STORY.

IF YOU NEED MORE ROOM YOU CAN ADD ATTACHMENTS & LABEL IT "2C".

d. This is a change from the current order for child custody visitation (parenting time).

(1) The order for legal custody is the court ordered (specify):

(2) The visitation (parenting time) is the court ordered (specify):

THIS AREA IS FOR ONLY IF YOU HAVE PREVIOUS ORDERS/JUDGMENT IN PLACE & WANT TO CHANGE THE ORDERS. YOU SHOULD PROVIDE A COPY OF PREVIOUS ORDERS & MARK THEM "ATTACHMENT 2D" OR EXPLAIN THE ORDERS HERE.

Attachment 2d.

PETITIONER: PRINT PETITIONER'S NAME RESPONDENT: PRINT RESPONDENT'S NAME OTHER PARENT/PARTY:	CASE NUMBER: PRINT THE CASE NUMBER
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3. **CHILD SUPPORT**
 (Note: An earnings assignment may be issued. See Attachment 3d.)
 a. I request that the court order child support as follows:
Child's name and age

CHECK HERE IF YOU ARE ASKING FOR CHILD SUPPORT. YOU MUST ALSO FILL OUT THE FL-150 SHOWING ALL OF YOUR EXPENSES AND INCOME. Attach copies of your pay stubs or other proof of income for the last two months.

I request support for each child based on the child support guideline. Monthly amount (\$) requested (if not by guideline)

PRINT THE NAME AND AGE OF EACH CHILD

Check here if you want the support to be decided based on the guidelines set by the state.

Check here if you are requesting a specific amount of child support. Remember that you cannot check both, just check one.

- b. I want to change a current court order for child support filed on (date):
 The court ordered child support as follows (specify):
- c. I have completed and filed with this Request for Order a current *Income and Expense Declaration* (form FL-150) or I filed a current *Financial Statement (Simplified)* (form FL-155) because I meet the requirements to file form FL-155.
- d. The court should make or change the support orders because (specify): Attachment 3d.

EXPLAIN IN DETAIL WHY THE COURT SHOULD MAKE THE CHILD SUPPORT ORDER THAT YOU ARE REQUESTING.

IF YOU NEED MORE ROOM, ADD AN ATTACHMENT AND LABEL IT: "ATTACHMENT 3D".

IF YOU WANT TO USE OUR DECLARATION PACKET PUT IT THERE, AND JUST WRITE HERE: "SEE ATTACHED DECLARATION"

CHECK HERE IF YOU WANT SPOUSAL SUPPORT (AKA ALIMONY). YOU MUST FILL OUT THE FL -150 SHOWING ALL OF YOUR EXPENSES AND INCOME. Attach copies of your pay stubs or other proof of income for the last two months.

4. **SPOUSAL OR DOMESTIC PARTNER SUPPORT**

- (Note: An *Earnings Assignment Order For Spousal or Partner Support* (form FL-435) may be issued.)
- a. Amount requested (monthly): \$ _____
- b. I want the court to change end the current support order filed on (date):
 The court ordered \$ _____ per month for support.
- c. This request is to modify (change) spousal or partner support after entry of a judgment. I have completed and attached *Spousal or Partner Support Declaration Attachment* (form FL-157) or a document that addresses the same factors covered in form FL-157.
- d. I have completed and filed a current *Income and Expense Declaration* (form FL-150) in support of my request.
- e. The court should make, change, or end the support orders because (specify): Attachment 4e.

YOU MAY BE REFERRED TO AN ATTORNEY (VIA REFERRAL SERVICE) OR THE FAMILY LAW FACILITATOR FOR ASSISTANCE WITH CHILD/ SPOUSAL SUPPORT MATTERS

5. **PROPERTY CONTROL** I request temporary

a. The petitioner respondent other parent/party be given exclusive temporary use and control of the following property that we own or are buying lease or rent (specify): _____

CHECK HERE AND WRITE HOW MUCH \$\$\$ YOU ARE ASKING FOR.

CHECK HERE IF YOU WANT ORDERS ABOUT PROPERTY

b. The petitioner respondent other parent/party be ordered to make the following payments on debts and liens coming due while the order is in effect:

Pay to: _____	For: _____	Amount: \$ _____	Due date: _____
Pay to: _____	For: _____	Amount: \$ _____	Due date: _____
Pay to: _____	For: _____	Amount: \$ _____	Due date: _____
Pay to: _____	For: _____	Amount: \$ _____	Due date: _____

c. This is a change from the current order for property control filed on (date): _____

d. Specify in Attachment 5d the reasons why the

LIST OUT SEPARATELY FOR EACH DEBT: WHO THE AMOUNT SHOULD BE PAID, FOR WHAT EXACTLY, HOW MUCH AND THE DATE THAT IT IS DUE.

PETITIONER: PRINT PETITIONER'S NAME	CASE NUMBER:
RESPONDENT: PRINT RESPONDENT'S NAME	PRINT THE CASE NUMBER
OTHER PARENT/PARTY:	

6. ATTORNEY'S FEES AND COSTS

I request attorney's fees and costs, which total (specify amount): \$. I filed the following to support my request:

- a. A current *Income and Expense Declaration (form FL-150)*
- b. A *Request for Attorney's Fees* in that form.
- c. A *Supporting Declaration for* factors covered in that form.

THIS AREA IS FOR ATTORNEY FEES AND COSTS.
PLEASE SPEAK WITH A STAFF PERSON IN THE CENTER BEFORE
FILLING THIS AREA OUT.

7. DOMESTIC VIOLENCE ORDER

- Do not use this form to ask for domestic violence restraining orders! Read form DV-505-INFO, How Do I Ask for a Temporary Restraining Order, for forms and information you need to ask for domestic violence restraining orders.
- Read form DV-400-INFO, How to THIS AREA IS FOR CHANGING OR TERMINATING RESTRAINING ORDERS THAT ARE CURRENTLY IN EFFECT.

- a. The *Restraining Order After Hearing*
- b. I request that the court change protective orders made in *Restraining Orders, or other the orders, complete 7c.*
- c. I request that the court make Attachment 7c.

d. I want the court to change or end the orders because (specify): Attachment 7d.

8. OTHER ORDERS REQUESTED (specify):

Attachment 8.

IF YOU ARE ASKING FOR ANY OTHER ORDERS, MARK THIS BOX AND LIST THEM HERE. EXAMPLES ARE: PASSPORTS FOR CHILDREN, TRAVEL PERMISSION, MOVE AWAY ORDERS, OR NAME CHANGES ON GOVERNMENT DOCUMENTS.

9. TIME FOR SERVICE / TIME UNTIL HEARING

I urgently need:

- a. To serve the *Request for Order* no less than (number): court days before the hearing.
- b. The hearing date and service of the *Request for Order* to be sooner.
- c. I need the order because (specify): Attachment 9c.

CHECK HERE AND TELL YOUR STORY AS TO WHY YOU SHOULD GET WHAT YOU ARE ASKING FOR.

10. FACTS TO SUPPORT the orders I request are listed below. The facts that I write in support and attach to this request cannot be longer than 10 pages, unless the court gives me permission. Attachment 10.

YOU MUST EXPLAIN WHY YOU NEED ANY OF THE ORDERS ABOVE. TELL YOUR STORY!

IF YOU USE OUR DECLARATION PACKET FOR CUSTODY AND VISITATION, WRITE THE STORY THERE AND PRINT HERE, "SEE ATTACHED DELCARATION - CUSTODY AND VISITATION"

IF YOU WRITE THE STORY HERE & NEED MORE ROOM, ADD ANOTHER PAGE & LABEL IT ATTACHMENT 10.

I declare under penalty of perjury under the laws of the State of California that the information provided in this form and all attachments is true and correct.

Date: **PRINT TODAY'S DATE**

PRINT YOUR NAME

(TYPE OR PRINT NAME)

SIGN YOUR NAME HERE

(SIGNATURE OF APPLICANT)



Requests for Accommodations

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

PETITIONER: PRINT THE PETITIONER'S NAME RESPONDENT: PRINT THE RESPONDENT'S NAME OTHER PARENT/PARTY:	CASE NUMBER: PRINT THE CASE NUMBER
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CHILD CUSTODY AND VISITATION (PARENTING TIME) APPLICATION ATTACHMENT
 —This is not a court order—

TO Petition Response Request for Order Responsive Declaration to Request for Order
 Other (specify): **CHECK IF YOU ARE REQUESTING CUSTODY ORDERS**

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

<u>Child's Name</u>	<u>Date of Birth</u>	<u>Legal Custody to (person who decides about health, education, etc.)</u>	<u>Physical Custody to (person with whom the child lives)</u>
PRINT THE CHILD(REN)'S NAME(S) HERE	DOB OF EACH CHILD	PRINT THE NAMES OF THE PARENTS THAT ARE REQUESTING TO HAVE LEGAL CUSTODY ONE PARENT = SOLE BOTH PARENTS = JOINT	PRINT THE NAMES OF THE PARENTS THAT ARE REQUESTING TO HAVE PHYSICAL CUSTODY. ONE PARENT = PRIMARY BOTH PARENTS = JOINT JOINT PHYSICAL CUSTODY MEANS CUSTODY IS SPLIT BETWEEN PARENTS 50/50. PRIMARY PHYSICAL CUSTODY MEANS THAT THE CHILD(REN) STAYS MOSTLY WITH ONE PARENT.

2. **Visitation (Parenting Time).**

Note: Unless specifically ordered, a child's holiday

- a. Reasonable right of parenting time (visitation involving domestic violence).
- b. See the attached _____-page document.
- c. The parties will go to child custody mediation (location): _____
- d. No visitation (parenting time).
- e. Visitation (parenting time). (Specify start of visitation)
 - Petitioner's Respondent's

VISITATION
YOU HAVE THREE OPTIONS FOR VISITATION:

A. REASONABLE VISITATION:
 This means that you will be able to work out a visitation schedule with the other side. This type of order is not enforceable by the police because it is not specific. You should be sure that you can agree about visitation with the other person when you choose this option.

B. NO VISITATION: This means the other party never sees the child(ren). You need to show the other parent is physically or mentally dangerous to the child(ren), a flight risk or something that shows VISITATION SHOULD NOT BE GIVEN TO THE PARENT. Remember a parent has a "basic" right to see their child(ren). **IF YOU CHOOSE THIS OPTION, YOU MUST EXPLAIN WHY THE OTHER SIDE SHOULD NOT BE ABLE TO VISIT THE CHILDREN IN A SEPARATE DECLARATION.**

C. SPECIFIC VISITATION: This means that you set out a specific set of days & times that the other parent would visit with the child(ren). You may request the other parent have overnight visits, certain weekdays, or any other specific schedule or plan. **BE AS CLEAR AS POSSIBLE! IT HAS TO MAKE SENSE TO THE COURT AND TO LAW ENFORCEMENT TO BE ENFORCEABLE.**

- (1) **Weekends starting (date):**
 (Note: The first weekend of the month)
 - 1st 2nd 3rd
 from _____ at _____
 (day of week)
 - (a) The parties will alternate _____ other parent/partner
 - (b) The _____ petitioner weekend in odd even
- (2) **Alternate weekends starting**
 from _____ at _____
 (day of week)
 - to _____ at _____
 (day of week)
- (3) **Weekdays starting (date):**
 from _____ at _____ a.m. p.m./ If applicable, specify: _____
 (day of week) (time)
 - to _____ at _____ a.m. p.m./ If applicable, specify: _____
 (day of week) (time)
- (4) Other visitation (parenting time) days and restrictions are: listed in Attachment 2e(4) as follows:

regularly (not _____)
 unselin _____
 check "start of" OR "after school."
 the (visitation) will be as follows:
 the month _____
 applicable, specify: start of school after school
 applicable, specify: start of school after school
 petitioner respondent starts (date): _____
 party will have the fifth _____
 applicable, specify: start of school after school
 applicable, specify: start of school after school
 applicable, specify: start of school after school

PETITIONER: **PRINT THE PETITIONER'S NAME**
RESPONDENT: **PRINT THE RESPONDENT'S NAME**
OTHER PARENT/PARTY:

CASE NUMBER:
PRINT THE CASE NUMBER

- 3. **Supervised visitation (parenting time).**
 - a. ~~If item 3 is checked, you must attach a declaration that shows why unsupervised visitation would be bad for your children. The judge is required to consider supervised visitation if the petitioner is alleging domestic violence and is protected by a restraining order.~~
 - b. The person who supervises the visitation (parenting time) must meet the requirements of a *Supervised Visitation Provider* (form FL-324) under Family Code § 3200.
 - c. I request that (name):
with the minor children according to the schedule set out on page 1.
 - d. I request that the visitation (parenting time) be supervised by (name):
who is a professional nonprofessional supervisor.
The supervisor's phone number is (specify):
 - e. I request that any costs of supervision be paid as follows: petitioner:
other parent/party: percent.
- 4. **Transportation for visitation (parenting time) and place of exchange.**
 - a. The children will be driven only by a licensed and insured driver. The car or truck must have legal child restraint devices.
 - b. Transportation to begin the visits will be provided by (name):
 - c. Transportation from the visits will be provided by (name):
 - d. The exchange point at the beginning of the visit will be (address):
 - e. The exchange point at the end of the visit will be (address):
 - f. During the exchanges, the party driving the children will wait in the car and the other party will wait at home (or exchange location) while the children go between the car and the home (or exchange location).
 - g. Other (specify):

Indicate if you want the other parent to have supervised visits. You need to show that the other parent cannot care for the child(ren) and needs supervised or monitored visitation.
You should provide:
1. The parent who needs the supervision.
2. the person who supervises the child(ren) and if they are professional/nonprofessional person(s) to provide supervision
3. What percent the supervision should be paid by each parent.
If you choose this option, YOU MUST EXPLAIN WHY UNSUPERVISED VISITATION IS BAD FOR YOUR CHILD(REN) on a separate Attachment.

Transportation to/from visits and where the exchange points will take place. Also, who is responsible for the transportation and other important details involving exchanges.

- 5. **Travel with children.** The petitioner respondent other parent/party **must** have written permission from the other parent or party, or a court order, to take the children out of the following places:
 - a. the state of California.
 - b. the following counties (specify):
 - c. other places (specify):

Travel Restrictions for the child(ren). If you feel that a parent should not take the child out of the county, state or country, mark here and to what extent travel should be restricted.

- 6. **Child abduction prevention.** There is a risk that one of the parties will take the children out of California without the other party's permission. I request the orders set out on attached form FL-312.
- 7. **Children's holiday schedule.** I request the holiday and vacation schedule set out on the attached form FL-341(C) Other (specify):
- 8. **Additional custody provisions.** I request the additional orders regarding custody set out on the attached form FL-341(D) Other (specify):
- 9. **Joint legal custody provisions.** I request joint legal custody and want the additional orders set out on the attached form FL-341(E) Other (specify):
- 10. **Other.** I request the following additional orders (specify):

These are additional restrictions that can be placed on either party. If you mark these boxes, then you must provide the additional forms: FL-312, FL-341(C), FL-341(D), FL-341(E) or the specific explanation as to what you are looking for in the various provisions/details.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Print Your Name Print Your Address City, State, Zip Code TELEPHONE NO.: Print Your Phone # FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): Self Represented	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: Leave Blank MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
(This section applies only to family law cases.) PETITIONER: Print Petitioner's Name RESPONDENT: Print Respondent's Name OTHER PARTY:	
(This section applies only to guardianship cases.) GUARDIANSHIP OF (Name): _____ Minor	CASE NUMBER: Leave Blank
DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)	

1. I am a party to this proceeding to determine custody
 2. My present address and the present address of _____ I have indicated in item 3.
 3. There are (specify number): _____ proceeding, as follows:
 (Insert the information requested below. The residence information must be given for the last FIVE years.)

Write the number of MINOR children you have with the other person.

a. Child's name	Place of birth	Date of birth	Sex
Oldest Minor Child's Name	City and State of Birth	Birthdate	
Period of residence _____ to present Address _____ <input type="checkbox"/> Confidential	Child's residence (City, State) _____ <input type="checkbox"/> Confidential	Person child lived with (name and complete current address) _____ <input type="checkbox"/> Confidential	Relationship _____ Sex _____
_____ to _____ _____ to _____ _____ to _____	Child's residence (City, State) _____ _____ Child's residence (City, State) _____ _____ Child's residence (City, State) _____ _____	Person child lived with (name and complete current address) _____ _____ Person child lived with (name and complete current address) _____ _____ Person child lived with (name and complete current address) _____ _____	Relationship _____ Sex _____
b. Child's name _____ <input type="checkbox"/> Reside (if NO)	Address _____ <input type="checkbox"/> Confidential	Person child lived with (name and complete current address) _____ <input type="checkbox"/> Confidential	Relationship _____ Sex _____
_____ to present _____ to _____ _____ to _____ _____ to _____	Child's residence (City, State) _____ _____ Child's residence (City, State) _____ _____ Child's residence (City, State) _____ _____	Person child lived with (name and complete current address) _____ _____ Person child lived with (name and complete current address) _____ _____ Person child lived with (name and complete current address) _____ _____	Relationship _____ Sex _____

Print where the Child(ren) live and have lived for the past FIVE (5) Years.
List out all the children with the oldest child first.
If you have more than 2, ask a staff person for the additional attachment.
You also have to print who the children lived with and that person's CURRENT ADDRESS where the person is living now.
Don't forget to include the relationship of that person to the child(ren) - mom, dad, grandparents, etc.

c. Additional residence information for a child listed in item a or b is continued on attachment 3c.
 d. Additional children are listed on form FL-105(A)/GC-120(A). (Provide all requested information for additional children.) Page 1 of 2



SHORT TITLE: Petitioner's Last Name vs. Respondent's Last Name	CASE NUMBER: Print Case No.
--	---------------------------------------

4. Do you have information about, or have you participated as a party or as a witness or in some other capacity in, another court case or custody or visitation proceeding, in California or elsewhere, concerning a child subject to this proceeding?

Yes No (If yes, attach a copy of the orders (if you have one) and provide the following information):

Proceeding	Case number	Court (name, state, location)	Court of or judge (date)	If there is a past court order from Children's Court or a domestic violence restraining order or child support order or other court orders, Answer Yes and print information.	Status
a. <input type="checkbox"/> Family					
b. <input type="checkbox"/> Guardianship					
c. <input type="checkbox"/> Other					

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

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

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

**Is there a current restraining order (NOT expired)?
If yes, answer yes and answer questions a-d.**

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

Besides you or the other parent, has anyone else formally filed or claims to have custody or visitation - grand parents, other family members etc.

a. Name and address of person	b. Name and address	c. Name and address
<input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child	<input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child	<input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child

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

Date: **Print Today's Date**

Print Your Name

(TYPE OR PRINT NAME)

Sign Your Name

(SIGNATURE OF DECLARANT)

7. Number of pages attached: _____

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

CUSTODY AND/OR VISITATION

I, _____, declare as follows:

1. In my dissolution or paternity case,

I am the Petitioner

or

I am the Respondent

**Fill out this page with the appropriate information.
The Petitioner or Respondant will always be the same throughout the case. Look at the Original Petition if you are not sure.**

2. The other party

Full name of

Age

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. I am the mother father.

4. Currently the child(ren) live with mother father. The child(ren) have lived primarily with that parent since _____.

//

//

//

//

1 5. I request the Court to make the following changes or modification of orders for legal and
2 physical custody:

- 3 1. Primary physical custody and sole legal custody to
4 mother father
- 5 2. Joint legal custody to both mother and father to
6 mother father
- 7 3. Joint legal and physical custody to both mother and father.
- 8 4. Other: _____

Indicate what type of custody arrangement you are requesting.

10 6. I request that the court make one of the following orders for visitation of child(ren) for

- 11 mother father to be:
- 12 Reasonable visitation that we can agree to.
- 13 No visitation. I have explained in paragraph 10 why I believe the other parent should have
14 no visitation.
- 15 Supervised or monitored visitation. I have explained in paragraph 11 why I believe the
16 other parent should have supervised visitation.
- 17 Specific visitation, as stated in forms:
- 18 FL-311, FL-312, FL-341(C), FL-341(D), FL-341(E)
- 19 Specific visitation, as follows:

Check off what type of visitation you want. If you have already filled out these specific visitation and custody forms, check off the forms you filled out.

1 7. I believe that this is an emergency situation, and that I should be heard immediately by the court
2 because:

3
4
5
6 **WRITE WHY YOU BELIEVE THIS IS AN**
7 **EMERGENCY SITUATION. YOU MUST**
8 **INDICATE WHY YOU SHOULD BE ABLE TO**
9 **GO TO COURT IMMEDIATELY RATHER THAN**
10 **WAIT 3-5 WEEKS LIKE EVERYONE ELSE.**
11
12
13
14
15
16
17
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21
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27
28

1 8. I believe that it is in the child(ren)'s best interest to award custody and visitation as I have
2 requested because: _____
3 _____
4 _____
5 _____
6 _____
7 _____
8 _____
9 _____
10 _____
11 _____
12 _____
13 _____
14 _____
15 _____
16 _____
17 _____
18 _____
19 _____
20 _____
21 _____
22 _____
23 _____
24 _____
25 _____
26 _____
27 _____
28 _____

You will need to write a statement of why you want the orders you are requesting. You will need to write why the orders you are requesting are in the best interests of your CHILD(REN). You should also write facts to support why it is in the child's best interest to have orders granted.

1 9. I request that there be NO visitation which would be in the best interest of the minor child(ren)
2 for the following reasons: _____
3 _____
4 _____
5 _____
6 _____
7 _____

If you are requesting no visitation for the other parent, you must state why you are requesting this. You need to show the other parent is physically or mentally dangerous to the child(ren), a flight risk or something similar.

8 10. A monitor/supervisor is necessary for the following reasons: _____
9 _____
10 _____
11 _____
12 _____
13 _____

If you are requesting supervised visitation for the other parent, you must state why you are requesting this. You need to show that the other parent cannot care for the child(ren) and needs supervised or monitored visitation.

14 (A) I request that _____ shall serve as the visitation monitor for
15 the following reasons: _____
16 _____
17 _____

18 (B) I request that _____ shall NOT serve as the visitation monitor
19 for the following reasons: _____
20 _____
21 _____

22 (C) I request that mother father pay the fees for any professional monitor.
23 _____

24 I declare under penalty of perjury under the laws of the State of California that the foregoing
25 is true and correct. Executed at _____ PRINT THE NAME OF THE CITY WHERE YOU SIGNED THIS California on _____, 20____. PRINT THE DATE

26 SIGN YOUR NAME
27 _____

28 Petitioner Respondent

PARTY WITHOUT ATTORNEY OR ATTORNEY: STATE BAR NUMBER: NAME: PRINT YOUR NAME FIRM NAME: STREET ADDRESS: PRINT YOUR ADDRESS CITY: STATE: ZIP CODE: TELEPHONE NO.: PRINT YOUR TELEPHONE # FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name): SELF REPRESENTED	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES STREET ADDRESS: MAILING ADDRESS: PRINT THE COURT'S ADDRESS CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: PRINT THE PETITIONER'S NAME RESPONDENT: PRINT THE RESPONDENT'S NAME OTHER PARENT/PARTY:	
DECLARATION REGARDING NOTICE AND SERVICE OF REQUEST FOR TEMPORARY EMERGENCY (EX PARTE) ORDERS	
CASE NUMBER: PRINT THE CASE NUMBER	

NOTICE: Do not use this form to ask for domestic violence restraining orders. Procedures for requesting temporary emergency orders and obtaining them are found in the Family Law Act. Courts may grant temporary emergency orders with or without an emergency hearing. Find local rules at courts.ca.gov/3027.htm.

1. I am (specify) attorney for petitioner respondent other parent/party
 not a party in the case (name and title/relationship to party):

2. I did did not give notice that **DID YOU GIVE THE NOTICE TO THE OTHER SIDE?**
 there will be an emergency court hearing on a request for temporary emergency (ex parte) orders.
 papers will be submitted to the court asking a judicial officer to grant temporary emergency orders without a hearing on the date, time, and location indicated below:

a. Date:	Time:	Dept.:	Room:
b. Address of court:	<input checked="" type="checkbox"/> same as noted above <input type="checkbox"/> other (specify):		

3. **NOTICE** (If you gave notice, complete item 3a. If you did not give notice, complete item 3b.)
 a. I gave notice as described in items (1) through (5):
 (1) I gave notice to (select all that apply)

PRINT THE DATE, TIME, DEPARTMENT AND ROOM # OF THE HEARING. REMEMBER THE NOTICE REQUIREMENT, USUALLY THE CALL HAS TO BE MADE BEFORE 10 AM THE COURT DAY BEFORE.

- | | |
|--|---|
| <input checked="" type="checkbox"/> petitioner | <input checked="" type="checkbox"/> petitioner's attorney |
| <input checked="" type="checkbox"/> respondent | <input checked="" type="checkbox"/> respondent's attorney |
| <input type="checkbox"/> other parent/party | <input type="checkbox"/> other parent's/party's attorney |
| <input type="checkbox"/> child's attorney | <input type="checkbox"/> Other (specify): |

WHO YOU GAVE THE NOTICE TO.

(2) I gave notice
 personally on (date): _____ at (location): _____ California: at _____ a.m.
 by telephone on (date): _____ a.m.
 by voicemail on (date): _____ p.m.
 by fax on (date): _____ fax no.: _____ at _____ a.m.
 by fax on (date): _____ p.m.

HOW YOU GAVE THE NOTICE - PERSONALLY, BY TELEPHONE, VOICEMAIL OR FAX? ALSO, PUT THE DATE/TIME & THE PHONE NUMBER YOU USED (IF APPLICABLE).

(3) I gave notice (select one):
 by 10 a.m. the court day before this emergency hearing. **MARK HERE IF YOU GAVE NOTICE, BY 10 AM THE COURT/BUSINESS DAY BEFORE.**
 after 10 a.m. the court day before this emergency hearing because _____ (specify):

If NOTICE was given after 10 am the COURT DAY before, explain why you COULD NOT give the proper amount of notice to the otherside.

PETITIONER: PRINT THE PETITIONER'S NAME RESPONDENT: PRINT THE RESPONDENT'S NAME OTHER PARENT/PARTY:	CASE NUMBER: PRINT THE CASE NUMBER
---	--

3. a. (4) I notified the person in 3a(1) that the following temporary emergency orders are being requested (*specify*):

Write what Emergency Orders YOU TOLD the other side are being requested from the Court - child custody, visistation, support etc.

(5) The person in 3a(1) responded as follows: Attachment 3a(5)

Write down what the other side told you after you made the call/gave notice about the hearing to them.

They said: "Okay... I will see you then... I am going to oppose them... ", etc.

(6) I do do not believe **Mark if you believe that the other side will come or not come to court for the hearing and oppose your request.**

- b. **Request for waiver of notice.** I did court waive notice to the other party to help prevent an immediate (*identify the exceptional circumstances*)
- (1) danger or irreparable harm to myself (or my client) or to the children in the case.
 - (2) risk that the children in the case will be removed from the state of California.
 - (3) loss or damage to property subject to disposition in the case.
 - (4) Other exceptional circumstances (*specify*):

Mark here and check the box that best describes why you should not have to give notice and are asking the court to "waive" or not to have to give the notice at all.

Facts in support of the request to waive notice (*specify*):

Give a detailed explanation why you are asking the Judge to waive notice based upon the boxes you checked. Explain the Exceptional Circumstances that make it unsafe for you to tell the other side.

c. **Unable to provide notice.** I did not give notice about the request for temporary emergency orders. I used my best efforts to tell the opposing party when and where this hearing would take place but was unable to do so. The efforts I made to inform the other person were (*specify below*): Attachment 3c.

Mark here if you could not give the required notice even though you gave your "best efforts" to tell the other side. You should describe in detail what those efforts were here.

4. **SERVICE OF FORMS** **Check who you served the these papers**

- a. An unfiled copy of *Request for Order* (form FL-300) for temporary emergency orders, *Temporary Emergency (Ex Parte) Orders* (form FL-305), and related documents were served on
- petitioner petitioner's attorney other parent/party other parent/party's attorney
 respondent respondent's attorney child's attorney
 Other (*specify*):

CHECK THE METHOD OF SERVICE THE OTHER SIDE WAS SERVED THESE PAPERS AND FILL IN THE DATE & TIME IT WAS COMPLETED.

- b. Method of service:
- Personal service of p.m.
 Fax on (*date*): _____ fax no.: _____ at a.m.
 Overnight mail or other overnight carrier p.m.

c. Documents were not served on the opposing party due to the exceptional circumstances specified in 3b, above 3c, above Attachment 4c.

Mark and explain here why the other side is not going to get a copy of this paperwork. Mark 3(b) or 3(c) if it is the same for the above reasons in b or c. If for other reasons, explain here or use an attachment & label it "Attachment 4c."

I declare under penalty of perjury

Date: **PRINT TODAY'S DATE**

PRINT YOUR NAME

(TYPE OR PRINT NAME)

SIGN YOUR NAME HERE

(SIGNATURE)

DECLARATION REGARDING NOTICE AND SERVICE OF REQUEST FOR TEMPORARY EMERGENCY (EX PARTE) ORDERS

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: NAME: PRINT YOUR NAME FIRM NAME: STREET ADDRESS: PRINT YOUR ADDRESS CITY: STATE: ZIP CODE: TELEPHONE NO.: PRINT YOUR TELEPHONE # FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name): SELF REPRESENTED	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES STREET ADDRESS: MAILING ADDRESS: PRINT THE COURT ADDRESS CITY AND ZIP CODE: BRANCH NAME:	<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> MARK THE BOXES FOR THE ORDERS THAT YOU ASKED FOR. </div>
PETITIONER: PRINT THE PETITIONER'S NAME RESPONDENT: PRINT THE RESPONDENT'S NAME OTHER PARENT/PARTY:	
TEMPORARY EMERGENCY (EX PARTE) ORDERS <input type="checkbox"/> Child Custody <input type="checkbox"/> Visitation (Parenting Time) <input type="checkbox"/> Property Control <input type="checkbox"/> Other (specify): _____	CASE NUMBER: <div style="text-align: center; border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> PRINT THE CASE NUMBER </div>

1. **TO (name(s)):** _____ **PRINT THE OTHER SIDE'S NAME HERE**
 Petitioner Respondent Other Parent/Party Other (specify): _____

A court hearing will be held on the *Request for Order* (form FL-300) served with this order, as follows:

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

2. **Findings:** Temporary emergency (ex parte) orders are needed to: (a) help prevent an immediate loss or irreparable harm to a party or to children in the case, (b) help prevent immediate loss or damage to property subject to disposition in the case, or (c) set or change procedures for a hearing or trial.

COURT ORDERS: The following temporary emergency orders expire on the date and time of the hearing scheduled in (1), unless extended by court order:

3. **CHILD CUSTODY**

		<u>Temporary physical custody, care, and control to:</u>		
a. <u>Child's name</u>	<u>Date of Birth</u>	Petitioner	Respondent	Other Party/Parent
PRINT EACH CHILD'S NAME(S) HERE	PRINT THE DATE OF BIRTH	<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"/>

Continued on Attachment 3(a)

b. Visitation (3) are s

**THIS IS THE ORDER.
 THE COURT WILL FILL OUT
 THE REST OF THIS
 DOCUMENT**

ren in

See Attachment 3(b)

THIS IS A COURT ORDER.

TEMPORARY EMERGENCY (EX PARTE) ORDERS

PETITIONER: PRINT THE PETITIONER'S NAME RESPONDENT: PRINT THE RESPONDENT'S NAME OTHER PARENT/PARTY:	CASE NUMBER: PRINT THE CASE NUMBER
---	--

3. **CHILD CUSTODY (continued)**

c. **Travel restrictions**

- (1) The party or parties with temporary physical custody, care, and control of minor children **must not remove the minor children from the state of California unless the court allows it after a noticed hearing.**
- (2) Petitioner Respondent Other Parent/Party must not remove their minor children (*specify*):
 - (a) from the state of California.
 - (b) from the following counties (*specify*):
 - (c) other (*specify*):

d. Child abduction prevention orders are attached (see form FL-244/D)

- e. (1) **Jurisdiction**
Jurisdiction
- (2) **Notice**
provided
- (3) **Country**
 The
- (4) **If you v**

**THIS IS THE ORDER.
THE COURT WILL FILL OUT
THIS PART OF THE
DOCUMENT**

Custody
ward as

4. **PROPERTY CONTROL**

a. Petitioner Respondent Other Parent/Party is given exclusive temporary use, possession, and control of the following property that the parties own or are buying lease or rent

b. Petitioner Respondent Other Parent/Party is ordered to make the following payments on the liens and encumbrances coming due while the order is in effect:

Pay to:	For:	Amount: \$	Due date:
Pay to:	For:	Amount: \$	Due date:
Pay to:	For:	Amount: \$	Due date:
Pay to:	For:	Amount: \$	Due date:

5. All other existing orders, not in conflict with these temporary emergency orders, remain in full force and effect.

6. **OTHER ORDERS** (*specify*): Additional orders are listed in Attachment 6.

**THIS IS THE ORDER.
THE COURT WILL SIGN HERE
IF IT APPROVES YOUR
REQUEST.**

Date: _____