

ATTORNEY OR PARTY WITHOUT ATTORNEY (name, State Bar number, and address):     TELEPHONE NO.: _____ FAX NO. (optional): _____ E-MAIL ADDRESS (optional): _____ ATTORNEY FOR (name): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF _____ STREET ADDRESS: _____ MAILING ADDRESS: _____ CITY AND ZIP CODE: _____ BRANCH NAME: _____	
PETITIONER/PLAINTIFF: _____ RESPONDENT/DEFENDANT: _____ OTHER PARTY/PARENT: _____	
<b>ORDER TO SHOW CAUSE AND AFFIDAVIT FOR CONTEMPT</b>	CASE NUMBER: _____

<p style="text-align: center;"><b>NOTICE!</b></p> <p>A contempt proceeding is criminal in nature. If the court finds you in contempt, the possible penalties include jail sentence, community service, and fine.</p> <p>You are entitled to the services of an attorney, who should be consulted promptly in order to assist you. If you cannot afford an attorney, the court may appoint an attorney to represent you.</p>	<p style="text-align: center;"><b>¡AVISO!</b></p> <p>Un proceso judicial por desacato es de índole criminal. Si la corte le declara a usted en desacato, las sanciones posibles incluyen penas de prisión y de servicio a la comunidad, y multas.</p> <p>Usted tiene derecho a los servicios de un abogado, a quien debe consultar sin demora para obtener ayuda. Si no puede pagar a un abogado, la corte podrá nombrar a un abogado para que le represente.</p>
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1. TO CITEE (name of person you allege has violated the orders):
  
2. YOU ARE ORDERED TO APPEAR IN THIS COURT AS FOLLOWS, TO GIVE ANY LEGAL REASON WHY THIS COURT SHOULD NOT FIND YOU GUILTY OF CONTEMPT, PUNISH YOU FOR WILLFULLY DISOBEYING ITS ORDERS AS SET FORTH IN THE AFFIDAVIT BELOW AND ANY ATTACHED AFFIDAVIT OF FACTS CONSTITUTING CONTEMPT; AND REQUIRE YOU TO PAY, FOR THE BENEFIT OF THE MOVING PARTY, THE ATTORNEY FEES AND COSTS OF THIS PROCEEDING.

a. Date:	Time:	Dept.:	Rm.:
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b. Address of court:  same as noted above  other (specify):

Date: \_\_\_\_\_ ▶ \_\_\_\_\_

JUDICIAL OFFICER

**AFFIDAVIT SUPPORTING ORDER TO SHOW CAUSE FOR CONTEMPT**

3.  An Affidavit of Facts Constituting Contempt (form FL-411 or FL-412) is attached.
4. Citee has willfully disobeyed certain orders of this court as set forth in this affidavit and any attached affidavits.
5. a. Citee had knowledge of the order in that
  - (1)  citee was present in court at the time the order was made.
  - (2)  citee was served with a copy of the order.
  - (3)  citee signed a stipulation upon which the order was based.
  - (4)  other (specify) :
- Continued on Attachment 5a(4).
- b. Citee was able to comply with each order when it was disobeyed.
6. Based on the instances of disobedience described in this affidavit
  - a.  I have not previously filed a request with the court that the citee be held in contempt.
  - b.  I have previously filed a request with the court that the citee be held in contempt (specify date filed and results) :

Continued on Attachment 6b.

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARTY/PARENT:	CASE NUMBER:
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7.  Citee has previously been found in contempt of a court order (*specify case, court, date*):

Continued on Attachment 7.

8.  Each order disobeyed and each instance of disobedience is described as follows:

- a.  Orders for child support, spousal support, family support, attorney fees, and court or other litigation costs (see attached *Affidavit of Facts Constituting Contempt* (form FL-411))
- b.  Domestic violence restraining orders and child custody and visitation orders (see attached *Affidavit of Facts Constituting Contempt* (form FL-412))
- c.  Injunctive or other order (*specify which order was violated, how the order was violated, and when the order was violated*):

Continued on Attachment 8c.

d.  Other material facts, including facts indicating that the violation of the orders was without justification or excuse (*specify*):

Continued on Attachment 8d.

e.  I am requesting that attorney fees and costs be awarded to me for the costs of pursuing this contempt action. (A copy of my *Income and Expense Declaration* (form FL-150) is attached.)

**WARNING: IF YOU PURSUE THIS CONTEMPT ACTION, IT MAY AFFECT THE ABILITY OF THE DISTRICT ATTORNEY TO PROSECUTE THE CITEE CRIMINALLY FOR THE SAME VIOLATIONS.**

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)

# INFORMATION SHEET FOR ORDER TO SHOW CAUSE AND AFFIDAVIT FOR CONTEMPT

(Do NOT deliver this Information Sheet to the court clerk.)

Please follow these instructions to complete the *Order to Show Cause and Affidavit for Contempt* (form FL-410) if you do not have an attorney to represent you. Your attorney, if you have one, should complete this form, as well as the *Affidavit of Facts Constituting Contempt* (form FL-411 or form FL-412). You may wish to consult an attorney for assistance. Contempt actions are very difficult to prove. An attorney may be appointed for the citee.

## INSTRUCTIONS FOR COMPLETING THE ORDER TO SHOW CAUSE AND AFFIDAVIT FOR CONTEMPT (TYPE OR PRINT FORM IN INK):

If the top section of the form has already been filled out, skip down to number 1 below. If the top section of the form is blank, you must provide this information.

Front page, first box, top of form, left side: Print your name, address, telephone number, and fax number, if any, in this box. If you have a restraining order and wish to keep your address confidential, you may use any address where you can receive mail. **You can be legally served court papers at this address.**

Front page, second box, left side: Print the name of the county where the court is located and insert the address and any branch name of the court building where you are seeking to obtain a contempt order. You may get this information from the court clerk. This should be the same court in which the original order was issued.

Front page, third box, left side: Print the names of the Petitioner, Respondent, and Other Party/Parent (if any) in this box. Use the same names as appear on the most recent court order disobeyed.

Front page, first box, top of form, right side: Leave this box blank for the court's use.

Front page, second box, right side: Print the court case number in this box. This number is also shown on the most recent court order disobeyed.

Item 1: Insert the name of the party who disobeyed the order ("the citee").

Item 2: The court clerk will provide the hearing date and location.

Item 3: Either check the box in item 3 and attach an *Affidavit of Facts Constituting Contempt* (form FL-411 for financial orders or form FL-412 for domestic violence, or custody and visitation orders), or leave the box in item 3 blank but check and complete item 8.

Item 5: Check the box that describes how the citee knew about the order that has been disobeyed.

Item 6: a. Check this box if you have not previously applied for a contempt order.

b. Check this box if you have previously applied for a contempt order and briefly explain when you requested the order and results of your request. If you need more space, check the box that says "continued on Attachment 6b" and attach a separate sheet to this order to show cause.

Item 7: Check this box if the citee has previously been found in contempt by a court of law. Briefly explain when the citee was found in contempt and for what. If there is not enough space to write all the facts, check the box that says "continued on Attachment 7" and attach a separate sheet to this order to show cause.

Item 8: a. Check this box if the citee has disobeyed orders for child support, custody, visitation, spousal support, family support, attorney fees, and court or litigation costs. Refer to item 1a on *Affidavit of Facts Constituting Contempt* (form FL-411).

b. Check this box if the citee has disobeyed domestic violence orders or child custody and visitation orders. Refer to *Affidavit of Facts Constituting Contempt* (form FL-412).

**Information Sheet (continued)**

- Item 8:** c. If you are completing this item, use facts personally known to you or known to the best of your knowledge. State the facts in detail. If there is not enough space to write all the facts, check the box that says "continued on Attachment 8c" and attach a separate sheet to this order to show cause, including facts indicating that the violation of the orders was without justification or excuse.
- d. Use this item to write other facts that are important to this order. If you are completing this item, insert facts personally known to you, or known to the best of your knowledge. State facts in detail. If there is not enough space to write all the facts, check the box that says "Continued on Attachment 8d" and attach a separate sheet to the order to show cause.
- e. If you request attorney fees and/or costs for pursuing this contempt action, check this box. Attach a copy of your *Income and Expense Declaration* (form FL-150).

Type or print and sign your name at the bottom of page 2.

If you checked the boxes in item 3 and item 8a or 8b, complete the appropriate *Affidavit of Facts Constituting Contempt* (form FL-411), following the instructions for the affidavit above.

Make at least three copies of the *Order to Show Cause and Affidavit for Contempt* (form FL-410) and any supporting *Affidavit of Facts Constituting Contempt* (form FL-411 or FL-412) and the *Income and Expense Declaration* (form FL-150) for the court clerk, the citee, and yourself. If the district attorney or local child support agency is involved in your case, you must provide a copy to the district attorney or local child support agency.

Take the completed form(s) to the court clerk's office. The clerk will provide hearing date and location in item 2, obtain the judicial officer's signature, file the originals, and return the copies to you.

Have someone who is at least 18 years of age, who is not a party, serve the order and any attached papers on the disobedient party. For example, a process server or someone you know may serve the papers. **You may not serve the papers yourself. Service must be personal; service by mail is insufficient.** The papers must be served at least 16 court days before the hearing. The person serving papers must complete a *Proof of Personal Service* (form FL-330) and give the original to you. Keep a copy for yourself and file the original *Proof of Personal Service* (form FL-330) with the court.

*If you need assistance with these forms, contact an attorney or the Family Law Facilitator in your county.*

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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**AFFIDAVIT OF FACTS CONSTITUTING CONTEMPT**  
**Financial and Injunctive Orders**  
**Attachment to Order to Show Cause and Affidavit for Contempt (form FL-410)**

1. a. Orders for child support, spousal support, family support, attorney fees, and court and litigation costs (*separately itemize each default on installment payments*):

DATE DUE	TYPE OF ORDER AND DATE FILED	PAYABLE TO	AMOUNT ORDERED	AMOUNT PAID	AMOUNT DUE
<input type="checkbox"/> Continued on Attachment 1a.			TOTAL AMOUNT ORDERED	TOTAL AMOUNT PAID	TOTAL AMOUNT DUE
Summary of contempt counts alleged (including all attachments):  Child support: Spousal support: Family support: Attorney fees: Court and other costs:					
<b>Total</b>			\$	\$	\$

b.  Other orders (*specify which order was violated, how the order was violated, and when the violation occurred*):

Continued on Attachment 1b.

c.  Other material facts (*specify*):

Continued on Attachment 1c.

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)

SHORT TITLE:

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*(Required for verified pleading)* The items on this page stated on information and belief are *(specify item numbers, not line numbers)*:

This page may be used with any Judicial Council form or any other paper filed with the court.

Page \_\_\_\_\_

**ADDITIONAL PAGE**

**Attach to Judicial Council Form or Other Court Paper**

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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**AFFIDAVIT OF FACTS CONSTITUTING CONTEMPT**  
**Domestic Violence/Custody and Visitation**  
**Attachment to Order to Show Cause and Affidavit for Contempt (form FL-410)**

1.  The Citee has violated the restraining order issued on *(date)*: \_\_\_\_\_ by contacting, molesting, harassing, attacking, striking, threatening, sexually assaulting, battering, telephoning, sending any messages to, following, stalking, destroying the personal property of, disturbing the peace of, keeping under surveillance, or blocking movements in public places and thoroughfares of me or any other person protected by the restraining order. *(Specify which order was violated, how the order was violated, and when the violation occurred):* \_\_\_\_\_  
 Continued on Attachment 1.
  
2.  The Citee has violated the restraining order issued on *(date)*: \_\_\_\_\_ by not moving from and staying away from the residence as ordered by the court. *(Specify how the order was violated and when the violation occurred):* \_\_\_\_\_  
 Continued on Attachment 2.
  
3.  The Citee has violated the restraining order issued on *(date)*: \_\_\_\_\_ by not staying *(specify)*: \_\_\_\_\_ yards away from me, the other protected persons, my residence, my place of work, the children's school or place of child care, my vehicle, or other *(specify)*: \_\_\_\_\_  
*(Specify which order was violated, how the order was violated, and when the violation occurred):* \_\_\_\_\_  
 Continued on Attachment 3.
  
4.  The Citee has violated the restraining order issued on *(date)*: \_\_\_\_\_ by not relinquishing his or her firearm(s) as ordered by the court. *(Specify which order was violated, how the order was violated, and when the violation occurred):* \_\_\_\_\_  
 Continued on Attachment 4.
  
5.  The Citee has violated the restraining order issued on *(date)*: \_\_\_\_\_ by failure to complete court-ordered batterer's treatment/anger management class *(specify how the order was violated)*: \_\_\_\_\_  
 Continued on Attachment 5.
  
6.  The Citee has violated order issued on *(date)*: \_\_\_\_\_ by violating the following custody or visitation order *(specify which order was violated, how the order was violated, and when the violation occurred)*: \_\_\_\_\_  
 Continued on Attachment 6.
  
7.  The Citee has violated the order issued on *(date)*: \_\_\_\_\_ by violating other orders *(specify which order was violated and how the order was violated)*: \_\_\_\_\_  
 Continued on Attachment 7.

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)

SHORT TITLE:

NUMBER:

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*(Required for verified pleading)* The items on this page stated on information and belief are *(specify item numbers, not line numbers)*:

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Page \_\_\_\_\_

**ADDITIONAL PAGE**

**Attach to Judicial Council Form or Other Court Paper**



ATTORNEY OR PARTY WITHOUT ATTORNEY OR GOVERNMENTAL AGENCY (under Family Code, §§ 17400, 17406) <i>(Name, State Bar number, and address)</i>	<b>FOR COURT USE ONLY</b>
TELEPHONE NO.: _____ FAX NO.: _____ ATTORNEY FOR <i>(Name)</i> : _____	CASE NUMBER: _____  (If applicable, provide): HEARING DATE: _____ HEARING TIME: _____ DEPT.: _____
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF _____</b> STREET ADDRESS: _____ MAILING ADDRESS: _____ CITY AND ZIP CODE: _____ BRANCH NAME: _____	
PETITIONER/PLAINTIFF: _____  RESPONDENT/DEFENDANT: _____  OTHER PARENT/PARTY: _____	
<b>PROOF OF PERSONAL SERVICE</b>	

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

4. By personally delivering copies to the person served, as follows:
  - a. Date: \_\_\_\_\_ b. Time: \_\_\_\_\_
  - c. Address: \_\_\_\_\_

5. I am
 

a. <input type="checkbox"/> not a registered California process server.	d. <input type="checkbox"/> exempt from registration under Business & Profession Code section 22350(b).
b. <input type="checkbox"/> a registered California process server.	e. <input type="checkbox"/> a California sheriff or marshal.
c. <input type="checkbox"/> an employee or independent contractor of a registered California process server.	

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

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: \_\_\_\_\_

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

\_\_\_\_\_  
 (SIGNATURE OF PERSON WHO SERVED THE PAPERS)