

# RESPONSE to PETITION FOR CUSTODY AND SUPPORT OF MINOR CHILDREN

## **HELPFUL WEBSITES**

[www.courts.ca.gov](http://www.courts.ca.gov) - State Court - forms, etc.  
[www.kern.courts.ca.gov](http://www.kern.courts.ca.gov) - Kern Court Website  
[www.kclawlib.org](http://www.kclawlib.org) – Kern County Law Library  
[www.findlaw.com](http://www.findlaw.com) – Case Law  
<http://leginfo.legislature.ca.gov> - Legislation/Codes  
[www.accesslaw.com](http://www.accesslaw.com) – Forms, Cases, Codes

## **GETTING STARTED**

If you have been served with a Petition to Custody and Support of Minor Children, FL-260, you have thirty (30) days from the date you were served to file a Response to Petition for Custody and Support of Minor Children, FL-270. The Response is your chance to tell the Court what you want.

**#1 Complete the following forms:** You can get these forms from the Family Law Clerk, Family Law Facilitator, or online at [www.courtinfo.ca.gov/forms](http://www.courtinfo.ca.gov/forms).

1. **Mandatory** Response to Petition for Custody and Support of Minor Children (FL-270)
2. **Mandatory** Declaration Under Uniform Child Jurisdiction and Enforcement Act (UCCJEA) (FL-105); if there are more than 2 children use attachment FL-105(A), if need more space to write address use Attachment 3c
3. **Optional Custody/Visitation Attachments**
  - Child Custody and Visitation Attachment (FL-311)
  - Request for Child Abduction Prevention Order (FL-312)
  - Children’s Holiday Schedule Attachment (FL-341(C))
  - Additional Provisions – Physical Custody Attachment (FL-341(D))
  - Joint Legal Custody Attachment (FL-341(E))
4. Server completes Proof of Service by Mail (FL-335).

**#2 Filing Fee or Fee Waiver:** There is a FEE for filing the papers. If you cannot afford the filing fee, Fee Waiver forms are available. See current fee schedule for list of fees. (Fee Waiver & Order form number FW-001 & FW-003)

**#3 Have forms reviewed for completeness and accuracy:**

You may visit the Family Law Facilitator's Office to have your documents reviewed BEFORE you make copies:

Family Law Facilitator's Office Location and Hours:  
1215 Truxtun Ave., First Floor, Bakersfield, CA.  
Monday – Thursday: 8:00 a.m. – 4:00p.m.  
Friday: 8:00 a.m. – 12:00 p.m.  
EMAIL: **WMFacil@kern.courts.ca.gov**

#4 **MAKE COPIES:** Make sufficient number of copies, original + 2 or 3 or more for all parties and attorneys involved as follows:

1. Response to Petition for Custody and Support of Minor Children (FL-270) & any attachments used.
2. Declaration Under Uniform Child Jurisdiction and Enforcement Act (UCCJEA) (FL-105).
3. Proof of Service by Mail (FL-335) or Proof of Personal Service (FL-330).

#5 **SERVE RESPONDENT:** Have a 3<sup>rd</sup> person (**SERVER**), 18 years or older and not a party or witness to the case serve the documents to the Respondent by mail. **Server** completes the Proof of Service by mail (FL-335) **OR** Proof of Personal Service (FL-330)

***\*\*NOTE: If you do not have a 3<sup>rd</sup> person (server) to serve your documents, the Family Law Facilitator's Office can serve your documents by mail for you.***

***\*\*YOU MUST PROVIDE the following: Original and 2 copies of response documents including all attachments, an envelope and sufficient postage.***

#6 **FILE with the Family Law Clerk ASAP.** Take the original Response with attached original proof of service and one additional copy to the Family Law Division for filing after service is done on Petitioner with the filing fee or Fee Waiver.

#7 **WHAT NEXT?**

1. You or the Petitioner may now request to set a hearing and go to Trial by filing an At-Issue Memorandum (separate handout/local form).
2. The Clerk of the Court will send out a notice by mail for a *Family Centered Case Resolution (FCCR) conference*. (make sure your address is current with the Family Law Department. If not Complete Change of Address form (MC-040).
3. Prepare Mandatory Settlement Conference Statement (separate handout/local form). At MSC, case may settle or be set for Trial Setting Conference.
4. At Trial Setting Conference, case may be set for Case Management Conference or set for Trial Go to Trial
5. At CMC case may settle or be confirmed for Trial.
6. Prepare for and go to Trial
7. Prepare Judgment, Notice of Entry of Judgment, Envelopes, and Postage Stamps

## FAMILY LAW COURTHOUSES IN KERN COUNTY

### **Bakersfield:**

1215 Truxtun Avenue  
Bakersfield, CA 93301  
Branch Name: Metro-Justice Building  
(661) 868-5393

### **Delano:**

1122 Jefferson Street  
Delano, CA 93215  
Branch Name: North Kern Division – Delano Branch  
(661) 720-5800

### **Shafter:**

325 Central Valley Highway  
Shafter, CA 93263  
Branch Name: North Kern Division – Shafter/ Wasco Branch  
(661) 746-7500

### **Mojave:**

1773 Highway 58  
Mojave, CA 93501  
Branch Name: East Kern Division – Mojave Branch  
(661) 824-7100

### **Ridgecrest:**

132 East Coso Street  
Ridgecrest, CA 93555  
Branch Name: East Kern Division – Ridgecrest Branch  
(760) 384-5900

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PARTY WITHOUT ATTORNEY OR ATTORNEY STATE BAR NUMBER: NAME: FIRM NAME: YOUR NAME STREET ADDRESS: YOUR ADDRESS CITY: CITY STATE: ZIP CODE: TELEPHONE NO.: YOUR PHONE NUMBER FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name): IN PRO PER	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF KERN</b> STREET ADDRESS: MAILING ADDRESS: SEE ATTACHED LIST OF KERN COURT CITY AND ZIP CODE: ADDRESSES BRANCH NAME:	
PETITIONER: PETITIONER'S NAME RESPONDENT: RESPONDENT'S NAME	
<b>RESPONSE TO PETITION FOR CUSTODY AND SUPPORT OF MINOR CHILDREN</b>	CASE NUMBER: CASE NUMBER
<b>NOTICE: This action will not terminate a marriage or domestic partnership and will not determine a parental relationship.</b>	

1. I am the respondent. The petitioner and I are the parents of the following minor children:

<u>Child's name</u>	<u>Birthdate</u>	<u>Age</u>
CHILD'S COMPLETE NAME	DATE OF BIRTH	AGE

**YOU MUST ANSWER NUMBER 2 THAT APPLIES TO YOUR SITUATION.**

continued on Attachment 1.

2. Choose at least one box below to explain why you are using this form:

- a.  I am married to the petitioner, and no action is pending in any court for dissolution, legal separation, or nullity.
- b.  Petitioner and I have signed a voluntary declaration of parentage or paternity regarding the minor children, and no action regarding the children has been filed in any other court. A copy is attached.
- c.  Petitioner and I have legally adopted a child together.
- d.  Petitioner and I have been determined to be the parents in juvenile court or governmental child support.

Case number: \_\_\_\_\_  
 County: \_\_\_\_\_ State: \_\_\_\_\_ Country (if not the United States): \_\_\_\_\_

3. A completed *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)* (form FL-105) is attached.

4. **Child custody and visitation (parenting time).** I request the following orders:

- |  |                 |                          |                          |                          |                          |
|--|-----------------|--------------------------|--------------------------|--------------------------|--------------------------|
|  | CHECK BOXES FOR | Petitioner               | Respondent               | Joint                    | Other                    |
| a. Legal custody of children to:                 | CUSTODY AND     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Physical custody of children to:              | VISITATION      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Visitation (parenting time) of children with: |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
- d. If "Other" is checked above, name of the other person is (specify): \_\_\_\_\_

The proposed schedule for visitation (parenting time) is as follows:

**INDICATE HERE THE PROPOSED VISITATION YOU ARE REQUESTING OR ATTACH THE FORM FL-311**

See the attached form FL-311, *Child Custody and Visitation (Parenting Time) Application Attachment*.

PETITIONER: PETITIONER'S NAME RESPONDENT: RESPONDENT'S NAME	CASE NUMBER:
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4. e.  I request that the child abduction prevention orders requested on form FL-312 be approved.  
 f.  I request that the proposed holiday schedule set out in  form FL-341(C)  other be approved.  
 g.  I request that additional orders regarding child custody set out in  form FL-341(D)  other be approved.  
 h.  I request that joint legal custody orders set out in  form FL-341(E)  other be approved.  
 i.  I request that visitation (parenting time) be supervised with the following persons, with the following restrictions:

↖ NUMBER 4e-h ARE OPTIONAL. CHECK THE APPROPRIATE BOXES

Continued on Attachment 4h.

j.  Other (*specify*):

5. **Fees and cost of litigation**

- a. Attorney fees will be paid by  petitioner  respondent.  
 b.  Each party will pay their own attorney's fees.

6. **Child support.** The court may make orders for support of the children and issue an earnings assignment without further notice to either party.

7. Other (*specify*):

INDICATE HERE ANY OTHER REQUESTS NOT INCLUDED ABOVE

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

Date: DATE SIGNED

PRINT YOUR NAME \_\_\_\_\_  
(TYPE OR PRINT NAME)

▶ SIGN YOUR NAME \_\_\_\_\_  
(SIGNATURE OF RESPONDENT)

**NOTICE: Any party required to pay child support must pay interest on overdue amounts at the "legal rate," which is currently 10 percent.**

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): YOUR FIRST AND LAST NAME YOUR STREET ADDRESS CITY, STATE AND ZIP CODE  TELEPHONE NO.: YOUR PHONE NUMBER      FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): IN PRO PER	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF KERN</b> STREET ADDRESS: COURT ADDRESS MAILING ADDRESS: COURT CITY, STATE AND ZIP CODE CITY AND ZIP CODE: BRANCH NAME:	
(This section applies only to family law cases.) PETITIONER: PETITIONER'S NAME RESPONDENT: RESPONDENT'S NAME OTHER PARTY: OTHER PARTY'S NAME (DCSS CASE TYPE ONLY)	
(This section applies only to guardianship cases.) GUARDIANSHIP OF (Name): _____ Minor	CASE NUMBER:  CASE NUMBER
<b>DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)</b>	

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

a. Child's name NAME OF CHILD #1	Place of birth CITY AND STATE OF BIRTH	Date of birth DATE OF BIRTH	Sex M/F
Oldest child first  Period of residence 1/1/2012 to present  Address 1215 TRUXTUN AVE, BAKERSFIELD, CA <input type="checkbox"/> Confidential 93301	Person child lived with (name and complete current address) JANE DOE 1215 TRUXTUNE AVE. <input type="checkbox"/> Confidential BAKERSFIELD, CA 93301	Relationship MOTHER	
BIRTH to 1/1/2012  Child's residence (City, State) 1234 L STREET BAKERSFIELD, CA 93301	Person child lived with (name and complete current address) JANE DOE - SAME AS CHILD JOHN DOE: 1234 L STREET, BAKERSFIELD, CA 93301	PARENTS	
to  Child's residence (City, State) **MUST GIVE ADDRESS FOR THE LAST 5 YEARS OR SINCE BIRTH IF CHILD IS YOUNGER THAN 5 YEARS OF AGE**	Person child lived with (name and complete current address)		
to  Child's residence (City, State)	Person child lived with (name and complete current address)		
b. Child's name NAME OF CHILD #2	Place of birth CITY AND STATE OF BIRTH	Date of birth DATE OF BIRTH	Sex M/F
<input checked="" type="checkbox"/> Residence information is the same as given above for child a. (If NOT the same, provide the information below.)			
Period of residence 1/1/2012 to present  Address ADDRESS FOR CHILD #2 IF DIFFERENT FROM CHILD #1 <b>AND</b> <input type="checkbox"/> Confidential	Person child lived with (name and complete current address) NAME OF PARENT CHILD LIVES WITH <input type="checkbox"/> Confidential AND CURRENT ADDRESS	Relationship FATHER	
*CHECK THIS BOX ONLY IF CHILD #2 LIVED WITH CHILD #1 FOR ALL DATES LISTED  to  Child's residence (City, State) **MUST GIVE ADDRESS FOR THE LAST 5 YEARS OR SINCE BIRTH IF CHILD IS YOUNGER THAN 5 YEARS OF AGE**	Person child lived with (name and complete current address)		
CHECK C OR D IF NEEDED  to  Child's residence (City, State)	Person child lived with (name and complete current address)		

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

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

Proceeding	Case number	Court (name, state, location)	Court order or judgment (date)	Name of each child	Your connection to the case	Case status
a. <input type="checkbox"/> Family						
b. <input checked="" type="checkbox"/> Guardianship	BPB-XX-00XXXX	KCSC 1215 TRUXTUN AVE. BAKERSFIELD, CA 93301	N/A	NAME OF CHILD	OBJECTOR	DISMISSED
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				

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

a. Name and address of person  <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child	b. Name and address of person  <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child	c. Name and address of person  <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child
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I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: DATE OF SIGNATURE

YOUR PRINTED NAME \_\_\_\_\_ YOUR SIGNATURE \_\_\_\_\_  
 (TYPE OR PRINT 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.**

CASE NAME: LAST NAME VS LAST NAME	CASE NUMBER: CASE NUMBER
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**ATTACHMENT TO  
DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)**

<input type="checkbox"/> <b>C</b> Child's name NAME OF CHILD #3 <small>Residence information is the same as given on form FL-105/GC-120 for child a. (If NOT the same, provide the information below.)</small>		Place of birth <b>CITY AND STATE OF BIRTH</b>	Date of birth <b>DATE OF BIRTH</b>	Sex <b>M/F</b>
Period of residence 1/1/12 to present	Present address ADDRESS FOR CHILD #3 IF DIFFERENT FROM CHILD #1 <b>AND</b> <input type="checkbox"/> Confidential	Person child lived with (name and complete current address) <b>NAME OF PARENT CHILD LIVES WITH AND CURRENT ADDRESS</b> <input type="checkbox"/> Confidential		Relationship <b>FATHER</b>
*CHECK THIS BOX IF CHILD #3 LIVED WITH CHILD #1 FOR THE DATES LISTED		Child's residence (City, State)		Person child lived with (name and complete current address)
to		Child's residence (City, State)		Person child lived with (name and complete current address)
to		Child's residence (City, State)		Person child lived with (name and complete current address)
to		Child's residence (City, State)		Person child lived with (name and complete current address)
**MUST GIVE ADDRESS FOR THE LAST 5 YEARS OR SINCE BIRTH IF CHILD IS YOUNGER THAN 5 YEARS OF AGE**		Child's residence (City, State)		Person child lived with (name and complete current address)
to		Child's residence (City, State)		Person child lived with (name and complete current address)
to		Child's residence (City, State)		Person child lived with (name and complete current address)
to		Child's residence (City, State)		Person child lived with (name and complete current address)
to		Child's residence (City, State)		Person child lived with (name and complete current address)
to		Child's residence (City, State)		Person child lived with (name and complete current address)
to		Child's residence (City, State)		Person child lived with (name and complete current address)
to		Child's residence (City, State)		Person child lived with (name and complete current address)
to		Child's residence (City, State)		Person child lived with (name and complete current address)
to		Child's residence (City, State)		Person child lived with (name and complete current address)
to		Child's residence (City, State)		Person child lived with (name and complete current address)
to		Child's residence (City, State)		Person child lived with (name and complete current address)
to		Child's residence (City, State)		Person child lived with (name and complete current address)
to		Child's residence (City, State)		Person child lived with (name and complete current address)
to		Child's residence (City, State)		Person child lived with (name and complete current address)
to		Child's residence (City, State)		Person child lived with (name and complete current address)
to		Child's residence (City, State)		Person child lived with (name and complete current address)

**ATTACHMENT TO  
DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION  
AND ENFORCEMENT ACT (UCCJEA)**





PETITIONER: YOUR NAME RESPONDENT: RESPONDENT'S NAME (OTHER PARTY) OTHER PARENT/PARTY:	CASE NUMBER: LEAVE BLANK
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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):

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>
CHILD'S NAME	DATE OF BIRTH	Joint or Sole Name of Parent(s)	Joint or Sole Name of Parent(s)

2.  **Visitation (Parenting Time).**  
**Note: Unless specifically ordered, a child's holiday schedule order has priority over the regular parenting time.**

a.  Reasonable right of parenting time (visitation) to the party without physical custody (**not appropriate in cases involving domestic violence**).

b.  See the attached \_\_\_\_\_ -page document dated (specify date):

c.  The parties will go to child custody mediation or child custody recommending counseling at (specify date, time, and location):

d.  No visitation (parenting time).

e.  Visitation (parenting time). (Specify start and ending date and time. If applicable, check "start of" OR "after school.")

#2 -  Petitioner's  Respondent's  Other Parent's/Party's parenting time (visitation) will be as follows:

**CHECK THE APPROPRIATE BOXES FOR THE OTHER PARENT**

(1)  **Weekends starting (date): specify starting date**  
(Note: The first weekend of the month is the first weekend with a Saturday.)

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

from Friday at 3:00  a.m.  p.m./ If applicable, specify:  start of school  after school  
(day of week) (time)

to Sunday at 6:00  a.m.  p.m./ If applicable, specify:  start of school  after school  
(day of week) (time)

(a)  The parties will alternate the fifth weekends, with the  petitioner  respondent  other parent/party having the initial fifth weekend, which starts (date):

(b)  The  petitioner  respondent  other parent/party will have the fifth weekend in  odd  even numbered months.

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

from \_\_\_\_\_ at \_\_\_\_\_  a.m.  p.m./ If applicable, specify:  start of school  after school  
(day of week) (time)

to \_\_\_\_\_ at \_\_\_\_\_  a.m.  p.m./ If applicable, specify:  start of school  after school  
(day of week) (time)

(3)  **Weekdays starting (date): specify starting date**

from Wednesday at 3:00  a.m.  p.m./ If applicable, specify:  start of school  after school  
(day of week) (time)

to Wednesday at 6:00  a.m.  p.m./ If applicable, specify:  start of school  after school  
(day of week) (time)

(4)  Other visitation (parenting time) days and restrictions are:  listed in Attachment 2e(4)  
 as follows: **List other visitation days & times, or restrictions here or use Additional Page, form MC-020 and title it "Attachment 2e(4)"**

PETITIONER: YOUR NAME RESPONDENT: RESPONDENT'S NAME (OTHER PARTY) OTHER PARENT/PARTY:	CASE NUMBER: LEAVE BLANK
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**#3 - #10 CHECK ALL THAT APPLY**

3.  **Supervised visitation (parenting time).**
  - a. **If item 3 is checked, you must attach a declaration that shows why unsupervised visitation (parenting time) would be bad for your children. The judge is required to consider supervised visitation if one parent or party is alleging domestic violence and is protected by a restraining order.**
  - b.  The person who supervises the visitation (parenting time) must meet the requirements listed in *Declaration of Supervised Visitation Provider* (form FL-324) under Family Code § 3200.5.
  - c. I request that (*name*): \_\_\_\_\_ have supervised visitation (parenting time) 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: \_\_\_\_\_ percent; respondent: \_\_\_\_\_ percent; 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 in his or her home (or exchange location) while the children go between the car and the home (or exchange location).
  - g.  Other (*specify*): \_\_\_\_\_
  
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*): \_\_\_\_\_
  
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*): \_\_\_\_\_

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):  <b>YOUR NAME</b> <b>YOUR ADDRESS</b> <b>CITY, STATE, ZIP CODE</b> TELEPHONE NO.: YOUR PHONE NUMBER FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): <b>IN PRO PER</b>	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF KERN</b>  STREET ADDRESS: MAILING ADDRESS: <b>SEE ATTACHED LIST OF KERN</b> CITY AND ZIP CODE: <b>COURT ADDRESSES</b>  BRANCH NAME:	
PETITIONER/PLAINTIFF: <b>PETITIONER'S NAME</b>  RESPONDENT/DEFENDANT: <b>RESPONDENT'S NAME</b>  OTHER PARENT/PARTY:	CASE NUMBER: <b>CASE NUMBER</b>  (If applicable, provide):  HEARING DATE: HEARING TIME: DEPT.:
<b>PROOF OF SERVICE BY MAIL</b>	

**NOTICE: To serve temporary restraining orders you must use personal service (see form FL-330).**

1. I am at least 18 years of age, not a party to this action, and I am a resident of or employed in the county where the mailing took place.
2. My residence or business address is:

**ADDRESS OF PERSON WHO SERVED DOCUMENTS**

3. I served a copy of the following documents (specify) :  
**LIST DOCUMENTS SERVED:**  
**EXAMPLE:**  
**RESPONSE TO PETITION FOR CUSTODY AND SUPPORT OF MINOR CHILDREN (FL-270); UCCJEA (FL-105); ETC.**  
 by enclosing them in an envelope AND
  - a.  **depositing** the sealed envelope with the United States Postal Service with the postage fully prepaid.
  - b.  **placing** the envelope for collection and mailing on the date and at the place shown in item 4 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 United States Postal Service in a sealed envelope with postage fully prepaid.
4. The envelope was addressed and mailed as follows:
  - a. Name of person served: **RESPONDENT'S NAME**
  - b. Address: **RESPONDENT'S ADDRESS**  
**CITY, STATE, AND ZIP CODE**
  - c. Date mailed: **DATE MAILED**
  - d. Place of mailing (city and state): **CITY AND STATE WHERE MAILED**
5.  I served a request to modify a child custody, visitation, or child support judgment or permanent order which included an address verification declaration. (Declaration Regarding Address Verification—Postjudgment Request to Modify a Child Custody, Visitation, or Child Support Order (form FL-334) may be used for this purpose.)
6. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: **DATE SIGNED**

**NAME OF PERSON WHO SERVED DOCUMENTS**

(TYPE OR PRINT NAME)

**SIGNATURE OF PERSON WHO SERVED DOCUMENTS**

(SIGNATURE OF PERSON COMPLETING THIS FORM)