

**FAMILY LAW FACILITATOR  
SELF-HELP CENTER**

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

**1** You will need the following forms:

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

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

**2** You can get copies of the forms on-line at [www.courtinfo.ca.gov/forms](http://www.courtinfo.ca.gov/forms)

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

| <b>Your Case Information</b>   |                     |              |
|--|---------------------|--------------|
| <b>Petitioner/Plaintiff:</b><br><b>Other Parent:</b><br><b>Respondent/Defendant:</b> | <b>Case Number:</b> |              |
| <b>Requested Court Date:</b>   | <b>Time:</b>        | <b>Dept:</b> |
| <b>Current Orders:</b>   |                     |              |

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

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

## How to fill out

# REQUEST FOR ORDERS (FL-300)

## DIRECTIONS

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

| FL-300   |  |
|--|--|
| ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):  |  |
| FOR COURT USE ONLY   |  |
| 1  |  |
| TELEPHONE NO.: _____ FAX NO. (optional): _____   |  |
| E-MAIL ADDRESS (optional): _____   |  |
| ATTORNEY FOR Name:   |  |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF Napa   |  |
| STREET ADDRESS: 825 BROWN St.  |  |
| MAILING ADDRESS:   |  |
| CITY AND ZIP CODE: Napa, CA 94559  |  |
| BRANCH NAME:   |  |
| PETITIONER/PLAINTIFF:  |  |
| RESPONDENT/DEFENDANT:  |  |
| OTHER PARTY/PARTY:   |  |
| 2  |  |
| REQUEST FOR ORDER <input type="checkbox"/> MODIFICATION <input type="checkbox"/> Temporary Emergency Court Order   |  |
| <input type="checkbox"/> Child Custody <input type="checkbox"/> Visitation <input type="checkbox"/> Spousal Support <input type="checkbox"/> Other (specify): _____  |  |
| <input type="checkbox"/> Child Support <input type="checkbox"/> Spousal Support <input type="checkbox"/> Other (specify): _____  |  |
| <input type="checkbox"/> Attorney Fees and Costs   |  |
| CASE NUMBER: 3   |  |
| 4  |  |
| 1. TO (name): 5  |  |
| 2. A hearing on this Request for Order will be held as follows: If child custody or visitation is an issue in this proceeding, Family Code section 3170 requires mediation before or at the same time as the hearing (see item 7.) |  |
| a. Date: 6 Time: _____ Dept.: _____ Room: _____  |  |
| b. Address of court <input type="checkbox"/> same as noted above <input type="checkbox"/> other (specify): _____   |  |
| 3. Attachments to be served with this Request for Order:   |  |
| a. <input type="checkbox"/> A blank Responsive Declaration (form FL-320)   |  |
| b. <input type="checkbox"/> Completed Income and Expense Declaration (form FL-150) and a blank Income and Expense Declaration  |  |
| c. <input type="checkbox"/> Completed Financial Statement (Simplified) (form FL-155) and a blank Financial Statement (Simplified)  |  |
| d. <input type="checkbox"/> Points and authorities   |  |
| e. <input type="checkbox"/> Other (specify): _____   |  |
| Date: 7  |  |
| (TYPE OR PRINT NAME) _____ (SIGNATURE) _____   |  |
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- 3 Write in the case number.
- 4 Check the “Child Custody” and “Visitation” boxes. Check the “Modification” box if you want to change an existing order.
- 5 Write in the name of the person you are taking to court.
- 6 Fill in the court date, time and department.

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

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

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

FL-300

|   |              |
|---|--------------|
| PETITIONER/PLAINTIFF:<br>RESPONDENT/DEFENDANT:<br>OTHER PARENT/PARTY: | CASE NUMBER: |
|---|--------------|

**1**

**REQUEST FOR ORDER AND SUPPORTING DECLARATION**

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

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

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

**3**

d.  As requested in form

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

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

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

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

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

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

(1)  Criminal: County/state:      (3)  Juvenile: County/state:  
 Case No. (if known):      Case No. (if known):

(2)  Family: County/state:      (4)  Other: County/state:  
 Case No. (if known):      Case No. (if known):

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

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

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

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

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**REQUEST FOR ORDER**

Northwest  
ESSENTIAL FORMS™

## How to fill out

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

#### DIRECTIONS

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

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

**2** Check whether you are the Petitioner or Respondent.

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

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

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

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

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

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

|  |          |              |
|--|----------|--------------|
| PETITIONER/PLAINTIFF:<br>RESPONDENT/DEFENDANT:<br>OTHER PARTY/PARTY: | <b>1</b> | CASE NUMBER: |
|--|----------|--------------|

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

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



# How to fill out

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

### DIRECTIONS

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

Leave the rest of the form Blank.

## How to fill out

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

#### DIRECTIONS

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

|                                |  |              |
|--------------------------------|--|--------------|
| PETITIONER/PLAINTIFF: <b>1</b> |  | CASE NUMBER: |
| RESPONDENT/DEFENDANT:          |  |              |
| OTHER PARENT/PARTY:            |  |              |

9.  I request that time for service of the Request for Order and accompanying papers be shortened so that these documents may be served no less than (specify number) days before the time set for the hearing. I need to have this order shortening time because of the facts specified in item 10 or the attached declaration.

10.  FACTS IN SUPPORT of orders requested and change of circumstances for any modification are (specify):

**2**  Contained in the attached declaration. (You may use Attached Declaration (form MC-031) for this purpose. The attached declaration must not exceed 10 pages in length unless permission to file a longer declaration has been obtained from the court.)

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

Date: **3**

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

\_\_\_\_\_  
(SIGNATURE OF APPLICANT)

 **Request 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](http://www.courts.ca.gov/forms) for Request for Accommodations by Persons With Disabilities and Response (form MC-410). (Civil Code, § 54.8.)

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

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

1.  CHILD CUSTODY
  - a.  I consent to the order requested.
  - b.  I do not consent to the order requested but I consent to the following order:
  
2.  CHILD VISITATION
  - a.  I consent to the order requested.
  - b.  I do not consent to the order requested but I consent to the following order:
  
3.  CHILD SUPPORT
  - a.  I consent to the order requested.
  - b.  I consent to guideline support.
  - c.  I do not consent to the order requested, but I consent to the following order:
    - (1)  Guideline
    - (2)  Other (specify):
  
4.  SPOUSAL SUPPORT
  - a.  I consent to the order requested.
  - b.  I do not consent to the order requested.
  - c.  I consent to the following order:
  
5.  ATTORNEY FEES AND COSTS
  - a.  I consent to the order requested.
  - b.  I do not consent to the order requested.
  - c.  I consent to the following order:

Page 1 of 2

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

RESPONSIVE DECLARATION TO ORDER TO SHOW CAUSE OR NOTICE OF MOTION

www.courtinfo.ca.gov

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

## DIRECTIONS

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

|   |                     |
|---|---------------------|
| <p>PETITIONER/PLAINTIFF:</p> <p>RESPONDENT/DEFENDANT:</p> | <p>CASE NUMBER:</p> |
|---|---------------------|

6.  PROPERTY RESTRAINT
  - a.  I consent to the order requested.
  - b.  I do not consent to the order requested.
  - c.  I consent to the following order:
  
7.  PROPERTY CONTROL
  - a.  I consent to the order requested.
  - b.  I do not consent to the order requested.
  - c.  I consent to the following order:
  
8.  OTHER RELIEF
  - a.  I consent to the order requested.
  - b.  I do not consent to the order requested.
  - c.  I consent to the following order:
  
9.  SUPPORTING INFORMATION
 

contained in the attached declaration.

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

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

Date:

(TYPE OR PRINT NAME) (SIGNATURE OF DECLARANT)

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

RESPONSIVE DECLARATION TO ORDER TO SHOW CAUSE OR NOTICE OF MOTION

Page 2 of 2



**FAMILY LAW FACILITATOR  
SELF-HELP CENTER**

**REQUEST FOR ORDER  
CHILD CUSTODY & VISITATION**

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

Fill out the forms using the attached Samples & Instructions. You can get additional copies of the forms at [www.courtinfo.ca.gov](http://www.courtinfo.ca.gov)

Make 2 copies.

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

Wait approximately 2 days for the judge to sign the order

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

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

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

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

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

Attend orientation/mediation at Family Court Services as directed.

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

**File**

**Serve**

**File the  
Proof**