Clear This Form

Dissolution
(Judgment)

Information About You:

First and Middle Names: Last Name:

Street Address:

City: State: Zip Code:

Telephone No.:

Type of Case:

Divorce: ___ Legal Separation: ___ Annulment: ___

Case Number:

Information About Your Spouse:

First and Middle Names: Last Name:

Street:

City: State: Zip Code:

Courthouse:

___ 351 North Arrowhead Avenue, San Bernardino, CA 92415

___ 8303 Haven Avenue, Rancho Cucamonga, CA 91730

___ 14455 Civic Drive, Victorville, CA 92392

___ 235 East Mountain View, Barstow, CA 92311

___ 6527 White Feather Road, Joshua Tree, CA 92252

___ 477 Summit Blvd., Big Bear, CA 92315

___ 1111 Bailey Street, Needles, CA 92363

Click the Button Before Continuing.

Information about Your Children (With Your Spouse):

Name:	Date of Birth:
_____	_____
_____	_____
_____	_____
_____	_____

_____ One (or more) of our children were born before the date of our marriage.

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address):*	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO. *(Optional):* E-MAIL ADDRESS *(Optional):* ATTORNEY FOR *(Name):* IN PRO PER	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT:	
REQUEST TO ENTER DEFAULT	CASE NUMBER:

1. **To the clerk:** Please enter the default of the respondent who has failed to respond to the petition.

2. A completed *Income and Expense Declaration* (form FL-150) or *Financial Statement (Simplified)* (form FL-155)
   ☑ is attached ☐ is not attached.
   A completed *Property Declaration* (form FL-160) ☑ is attached ☐ is not attached
   because *(check at least one of the following):*
   (a) ☐ there have been no changes since the previous filing.
   (b) ☐ the issues subject to disposition by the court in this proceeding are the subject of a written agreement.
   (c) ☐ there are no issues of child, spousal, or partner support or attorney fees and costs subject to determination by the court.
   (d) ☐ the petition does not request money, property, costs, or attorney fees. (Fam. Code, § 2330.5.)
   (e) ☐ there are no issues of division of community property.
   (f) ☐ this is an action to establish parental relationship.

Date:

(TYPE OR PRINT NAME) (SIGNATURE OF [ATTORNEY FOR] PETITIONER)

3. **Declaration**
   a. ☐ No mailing is required because service was by publication or posting and the address of the respondent remains unknown.
   b. ☐ A copy of this *Request to Enter Default,* including any attachments and an envelope with sufficient postage, was provided to the court clerk, with the envelope addressed as follows *(address of the respondent's attorney or, if none, the respondent's last known address):*

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)

FOR COURT USE ONLY

☐ *Request to Enter Default* mailed to the respondent or the respondent's attorney on *(date):*
☐ Default entered as requested on *(date):*
☐ Default **not** entered. Reason:

Clerk, by _____, Deputy

Form Adopted for Mandatory Use
Judicial Council of California
FL-165 [Rev. January 1, 2005]

REQUEST TO ENTER DEFAULT
(Family Law—Uniform Parentage)

Code of Civil Procedure, §§ 585, 587;
Family Code, § 2335.5
www.courtinfo.ca.gov

American LegalNet, Inc.
www.USCourtForms.com

CASE NAME *(Last name, first name of each party):*	CASE NUMBER:

4. **Memorandum of costs**
   a. ☑ Costs and disbursements are waived.
   b. Costs and disbursements are listed as follows:
      (1) ☐ Clerk's fees ..... $.....
      (2) ☐ Process server's fees ..... $.....
      (3) ☐ Other *(specify):* ..... $.....
      ..... $.....
      ..... $.....
      ..... $ _____
      TOTAL ..... $.....
   c. I am the attorney, agent, or party who claims these costs. To the best of my knowledge and belief, the foregoing items of cost are correct and have been necessarily incurred in this cause or proceeding.

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)

5. **Declaration of nonmilitary status.** The respondent is not in the military service of the United States as defined in section 511 et seq. of the Servicemembers Civil Relief Act (50 U.S.C. Appen. § 501 et seq.), and is not entitled to the benefits of such act.

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)

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address):*	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO. *(Optional):* E-MAIL ADDRESS *(Optional):* ATTORNEY FOR *(Name):* IN PRO PER	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT:	
DECLARATION FOR DEFAULT OR UNCONTESTED ☐ **DISSOLUTION** ☐ **LEGAL SEPARATION**	CASE NUMBER:

(NOTE: Items 1 through 16 apply to both dissolution and legal separation proceedings.)

1. I declare that if I appeared in court and were sworn, I would testify to the truth of the facts in this declaration.
2. I agree that my case will be proven by this declaration and that I will not appear before the court unless I am ordered by the court to do so.
3. All the information in the ☑ *Petition* ☐ *Response* is true and correct.
4. **Default or uncontested** *(Check a or b.)*
   a. ☑ The default of the respondent was entered or is being requested, and I am not seeking any relief not requested in the petition. **OR**
   b. ☐ The parties have agreed that the matter may proceed as an uncontested matter without notice, and the agreement is attached or is incorporated in the attached settlement agreement or stipulated judgment.
5. **Settlement agreement** *(Check a or b.)*
   a. ☐ The parties have entered into ☐ **an agreement** ☐ **a stipulated judgment** regarding their property their marriage or domestic partnership rights, including support, the original of which is or has been submitted to the court. I request that the court approve the agreement. **OR**
   b. ☑ **There is no agreement or stipulated judgment,** and the following statements are true *(check at least one, including item (2) if a community estate exists):*
      (1) ☐ There are no community or quasi-community assets or community debts to be disposed of by the court.
      (2) ☐ The community and quasi-community assets and debts are listed on the attached **completed** current *Property Declaration* (form FL-160), which includes an estimate of the value of the assets and debts that I propose to be distributed to each party. The division in the proposed *Judgment (Family Law)* (form FL-180) is a fair and equal division of the property and debts, or if there is a negative estate, the debts are assigned fairly and equitably.
6. **Declaration of disclosure** *(Check a, b, or c.)*
   a. ☐ Both the petitioner and respondent have filed, or are filing concurrently, a *Declaration Regarding Service of Declaration of Disclosure* (form FL-141) and an *Income and Expense Declaration* (form FL-150).
   b. ☑ This matter is proceeding by default. I am the petitioner in this action and have filed a proof of service of the preliminary *Declaration of Disclosure* (form FL-140) with the court. I hereby waive receipt of the final *Declaration of Disclosure* (form FL-140) from the respondent.
   c. ☐ This matter is proceeding as an uncontested action. Service of the final *Declaration of Disclosure* (form FL-140) is mutually waived by both parties. A waiver provision executed by both parties under penalty of perjury is contained in the settlement agreement or proposed judgment or another, separate stipulation.
7. ☐ **Child custody** should be ordered as set forth in the proposed *Judgment (Family Law)* (form FL-180).
8. ☐ **Child visitation** should be ordered as set forth in the proposed *Judgment (Family Law)* (form FL-180).
9. **Spousal, partner, and family support** *(If a support order or attomey fees are requested, submit a completed* Income and Expense Declaration *(form FL-150) unless a current form is on file. Include your best estimate of the other party's income. Check at least one of the following.)*
   a. ☐ I knowingly give up forever any right to receive spousal or partner support.
   b. ☐ I ask the court to reserve jurisdiction to award spousal or partner support in the future to *(name):*
   c. ☑ Spousal support should be ordered as set forth in the proposed *Judgment (Family Law)* (form FL-180).
   d. ☐ Family support should be ordered as set forth in the proposed *Judgment (Family Law)* (form FL-180).

PETITIONER: RESPONDENT:	CASE NUMBER:

10. ☐ **Child support** should be ordered as set forth in the proposed *Judgment (Family Law)* (form FL-180).

11. a. I ☐ am receiving ☐ am not receiving ☐ intend to apply for public assistance for the child or children listed in the proposed order.

    b. To the best of my knowledge, the other party ☐ is ☐ is not receiving public assistance.

12. ☐ The petitioner ☐ respondent is presently receiving public assistance, and all support should be made payable to the local child support agency at the address set forth in the proposed judgment. A representative of the local child support agency has signed the proposed judgment.

13. If there are minor children, check and complete item a and item b or c:

    a. My gross (before taxes) monthly income is *(specify)*: $

    b. ☐ The estimated gross monthly income of the other party is *(specify)*: $

    c. ☐ I have no knowledge of the estimated monthly income of the other party for the following reasons *(specify):*

    d. ☐ I request that this order be based on the ☐ petitioner's ☐ respondent's earning ability. The facts in support of my estimate of earning ability are *(specify):*

    ☐ Continued on Attachment 13d.

14. ☐ **Parentage** of the children of the petitioner and respondent born prior to their marriage or domestic partnership should be ordered as set forth in the proposed *Judgment (Family Law)* (form FL-180). A declaration regarding parentage is attached.

15. ☐ **Attorney fees** should be ordered as set forth in the proposed *Judgment (Family Law)* (form FL-180).

16. ☐ The petitioner ☐ respondent requests restoration of his or her former name as set forth in the proposed *Judgment (Family Law)* (form FL-180).

17. There are irreconcilable differences that have led to the irremediable breakdown of the marriage or domestic partnership, and there is no possibility of saving the marriage or domestic partnership through counseling or other means.

18. This declaration may be reviewed by a commissioner sitting as a temporary judge, who may determine whether to grant this request or require my appearance under Family Code section 2336.

STATEMENTS IN THIS BOX APPLY ONLY TO DISSOLUTIONS—Items 19 through 21

19. If this is a dissolution of marriage or of a domestic partnership created in another state, the petitioner and/or the respondent has been a resident of this county for at least three months and of the state of California for at least six months continuously and immediately preceding the date of the filing of the petition for dissolution of marriage or domestic partnership.

20. I ask that the court grant the request for a judgment for dissolution of marriage or domestic partnership based upon irreconcilable differences and that the court make the orders set forth in the proposed *Judgment (Family Law)* (form FL-180) submitted with this declaration.

21. ☐ This declaration is for the termination of **marital or domestic partner status only.** I ask the court to reserve jurisdiction over all issues whose determination is not requested in this declaration.

THIS STATEMENT APPLIES ONLY TO LEGAL SEPARATIONS

22. I ask that the court grant the request for a judgment for legal separation based upon irreconcilable differences and that the court make the orders set forth in the proposed *Judgment (Family Law)* (form FL-180) submitted with this declaration.

    I understand that a judgment of legal separation does not terminate a marriage or domestic partnership and that I am still married or a partner in a domestic partnership.

23. ☐ Other *(specify):*

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)

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, state bar number, and address):*	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO.: ATTORNEY FOR *(Name):*	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT:	
DECLARATION REGARDING SERVICE OF DECLARATION OF DISCLOSURE AND INCOME AND EXPENSE DECLARATION ☑ **Petitioner's** ☑ **Preliminary** ☐ **Respondent's** ☐ **Final**	CASE NUMBER:

1. I am the ☐ Attorney for ☑ Petitioner ☐ Respondent in this matter.

2. ☑ Petitioner's ☐ Respondent's *Preliminary Declaration of Disclosure* and *Income and Expense Declaration* was served on:
   ☐ Attorney for ☐ Petitioner ☑ Respondent by: ☐ personal service ☐ mail ☐ other *(specify):*

   on *(date):*

3. ☐ Petitioner's ☐ Respondent's *Final Declaration of Disclosure* and *Income and Expense Declaration* was served on:
   ☐ Attorney for ☐ Petitioner ☐ Respondent by: ☐ personal service ☐ mail ☐ other *(specify):*

   on *(date):*

4. ☐ Service of the *Final Declaration of Disclosure* has been waived under Family Code section 2105, subdivision (d).

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)

Note:
File this document with the court.
Do not file a copy of either the *Preliminary* or *Final Declaration of Disclosure* with this document.

Form Adopted for Mandatory Use
Judicial Council of California
FL-141 [Rev. January 1, 2003]

DECLARATION REGARDING SERVICE OF DECLARATION OF DISCLOSURE
(Family Law)

Family Code, §§ 2104, 2106, 2112
www.courtinfo.ca.gov

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address):*	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO. *(Optional):* E-MAIL ADDRESS *(Optional):* ATTORNEY FOR *(Name):* IN PRO PER	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT:	
☑ **PETITIONER'S** ☐ **RESPONDENT'S** ☐ **COMMUNITY AND QUASI-COMMUNITY PROPERTY DECLARATION** ☑ **SEPARATE PROPERTY DECLARATION**	CASE NUMBER:

INSTRUCTIONS

When this form is attached to the *Petition* or *Response,* values and your proposal regarding division need not be completed. Do not list community, including quasi-community, property with separate property on the same form. Quasi-community property must be so identified. For additional space, use *Continuation of Property Declaration* (form FL-161).

ITEM NO. BRIEF DESCRIPTION	GROSS FAIR MARKET VALUE	AMOUNT OF DEBT	NET FAIR MARKET VALUE	PROPOSAL FOR DIVISION Award to: PETITIONER	RESPONDENT
1. REAL ESTATE	$	$	$	$	$
2. HOUSEHOLD FURNITURE, FURNISHINGS, APPLIANCES					
3. JEWELRY, ANTIQUES, ART, COIN COLLECTIONS, etc.					
4. VEHICLES, BOATS, TRAILERS					

Form Adopted for Mandatory Use
Judicial Council of California
FL-160 [Rev. January 1, 2007]

PROPERTY DECLARATION
(Family Law)

Family Code, §§ 115, 2500–2660
www.courtinfo.ca.gov

American LegalNet, Inc.
www.Forms*Workflow*.com

ITEM NO. BRIEF DESCRIPTION	GROSS FAIR MARKET VALUE	AMOUNT OF DEBT	NET FAIR MARKET VALUE	PROPOSAL FOR DIVISION Award to: PETITIONER	RESPONDENT
5. SAVINGS, CHECKING, CREDIT UNION, CASH	$	$	$	$	$
6. LIFE INSURANCE (CASH VALUE)					
7. EQUIPMENT, MACHINERY, LIVESTOCK					
8. STOCKS, BONDS, SECURED NOTES					
9. RETIREMENT, PENSION, PROFIT-SHARING, ANNUITIES					
10. ACCOUNTS RECEIVABLE, UNSECURED NOTES, TAX REFUNDS					
11. PARTNERSHIPS, OTHER BUSINESS INTERESTS					
12. OTHER ASSETS AND DEBTS					
13. TOTAL FROM CONTINUATION SHEET					
14. TOTALS					

15. ☐ A *Continuation of Property Declaration* (form FL-161) is attached and incorporated by reference.

I declare under penalty of perjury under the laws of the State of California that, to the best of my knowledge, the foregoing is a true and correct listing of assets and obligations and the amounts shown are correct.

Date:

(TYPE OR PRINT NAME)

(SIGNATURE)

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address):*	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO. *(Optional):* E-MAIL ADDRESS *(Optional):* ATTORNEY FOR *(Name):* IN PRO PER	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT:	
☑ **PETITIONER'S** ☐ **RESPONDENT'S** ☑ **COMMUNITY AND QUASI-COMMUNITY PROPERTY DECLARATION** ☐ **SEPARATE PROPERTY DECLARATION**	CASE NUMBER:

INSTRUCTIONS

When this form is attached to the *Petition* or *Response,* values and your proposal regarding division need not be completed. Do not list community, including quasi-community, property with separate property on the same form. Quasi-community property must be so identified. For additional space, use *Continuation of Property Declaration* (form FL-161).

ITEM NO. BRIEF DESCRIPTION	GROSS FAIR MARKET VALUE	AMOUNT OF DEBT	NET FAIR MARKET VALUE	PROPOSAL FOR DIVISION Award to: PETITIONER	RESPONDENT
1. REAL ESTATE	$	$	$	$	$
2. HOUSEHOLD FURNITURE, FURNISHINGS, APPLIANCES					
3. JEWELRY, ANTIQUES, ART, COIN COLLECTIONS, etc.					
4. VEHICLES, BOATS, TRAILERS					

Form Adopted for Mandatory Use
Judicial Council of California
FL-160 [Rev. January 1, 2007]

PROPERTY DECLARATION
(Family Law)

Family Code, §§ 115, 2500–2660
www.courtinfo.ca.gov

American LegalNet, Inc.
www.Forms*Workflow*.com

ITEM NO. BRIEF DESCRIPTION	GROSS FAIR MARKET VALUE	AMOUNT OF DEBT	NET FAIR MARKET VALUE	PROPOSAL FOR DIVISION Award to: PETITIONER	RESPONDENT
5. SAVINGS, CHECKING, CREDIT UNION, CASH	$	$	$	$	$
6. LIFE INSURANCE (CASH VALUE)					
7. EQUIPMENT, MACHINERY, LIVESTOCK					
8. STOCKS, BONDS, SECURED NOTES					
9. RETIREMENT, PENSION, PROFIT-SHARING, ANNUITIES					
10. ACCOUNTS RECEIVABLE, UNSECURED NOTES, TAX REFUNDS					
11. PARTNERSHIPS, OTHER BUSINESS INTERESTS					
12. OTHER ASSETS AND DEBTS					
13. TOTAL FROM CONTINUATION SHEET					
14. TOTALS					

15. ☐ A *Continuation of Property Declaration* (form FL-161) is attached and incorporated by reference.

I declare under penalty of perjury under the laws of the State of California that, to the best of my knowledge, the foregoing is a true and correct listing of assets and obligations and the amounts shown are correct.

Date:

(TYPE OR PRINT NAME)

(SIGNATURE)

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address):*	*FOR COURT USE ONLY*
TELEPHONE NO.: E-MAIL ADDRESS *(Optional):* ATTORNEY FOR *(Name):* IN PRO PER	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/CLAIMANT:	
INCOME AND EXPENSE DECLARATION	CASE NUMBER:

1. **Employment** *(Give information on your current job or, if you're unemployed, your most recent job.)*

Attach copies of your pay stubs for last two months (black out social security numbers).

a. Employer:
b. Employer's address:
c. Employer's phone number:
d. Occupation:
e. Date job started:
f. If unemployed, date job ended:
g. I work about hours per week.
h. I get paid $ gross (before taxes) ☐ per month ☐ per week ☐ per hour.

(If you have more than one job, attach an 8½-by-11-inch sheet of paper and list the same information as above for your other jobs. Write "Question 1—Other Jobs" at the top.)

2. **Age and education**
   a. My age is *(specify):*
   b. I have completed high school or the equivalent: ☐ Yes ☐ No If no, highest grade completed *(specify):*
   c. Number of years of college completed *(specify):* ☐ Degree(s) obtained *(specify):*
   d. Number of years of graduate school completed *(specify):* ☐ Degree(s) obtained *(specify):*
   e. I have: ☐ professional/occupational license(s) *(specify):*
   ☐ vocational training *(specify):*

3. **Tax information**
   a. ☐ I last filed taxes for tax year *(specify year):*
   b. My tax filing status is ☐ single ☐ head of household ☐ married, filing separately
   ☐ married, filing jointly with *(specify name):*
   c. I file state tax returns in ☐ California ☐ other *(specify state):*
   d. I claim the following number of exemptions (including myself) on my taxes *(specify):*

4. **Other party's income.** I estimate the gross monthly income (before taxes) of the other party in this case at *(specify):* $
This estimate is based on *(explain):*

(If you need more space to answer any questions on this form, attach an 8½-by-11-inch sheet of paper and write the question number before your answer.) Number of pages attached: _____

I declare under penalty of perjury under the laws of the State of California that the information contained on all pages of this form and any attachments is true and correct.

Date:

(TYPE OR PRINT NAME) (SIGNATURE OF DECLARANT)

Form Adopted for Mandatory Use
Judicial Council of California
FL-150 [Rev. January 1, 2007]

Family Code, §§ 2030–2032, 2100–2113, 3552, 3620–3634, 4050–4076, 4300–4339
www.courtinfo.ca.gov

American LegalNet, Inc.
www.Forms*Workflow*.com

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/CLAIMANT:	CASE NUMBER:

Attach copies of your pay stubs for the last two months and proof of any other income. Take a copy of your latest federal tax return to the court hearing. *(Black out your social security number on the pay stub and tax return.)*

5. **Income** *(For average monthly, add up all the income you received in each category in the last 12 months and divide the total by 12.)*

	Last month	Average monthly
a. Salary or wages (gross, before taxes)	$	
b. Overtime (gross, before taxes)	$	
c. Commissions or bonuses	$	
d. Public assistance (for example: TANF, SSI, GA/GR) ☐ currently receiving	$	
e. Spousal support ☐ from this marriage ☐ from a different marriage	$	
f. Partner support ☐ from this domestic partnership ☐ from a different domestic partnership	$	
g. Pension/retirement fund payments	$	
h. Social security retirement (not SSI)	$	
i. Disability: ☐ Social security (not SSI) ☐ State disability (SDI) ☐ Private insurance	$	
j. Unemployment compensation	$	
k. Workers' compensation	$	
l. Other (military BAQ, royalty payments, etc.) *(specify):*	$	

6. **Investment income** *(Attach a schedule showing gross receipts less cash expenses for each piece of property.)*

a. Dividends/interest	$	
b. Rental property income	$	
c. Trust income	$	
d. Other *(specify):*	$	

7. **Income from self-employment, after business expenses for all businesses** $ _____ _____

I am the ☐ owner/sole proprietor ☐ business partner ☐ other *(specify):*

Number of years in this business *(specify):*

Name of business *(specify):*

Type of business *(specify):*

Attach a profit and loss statement for the last two years or a Schedule C from your last federal tax return. Black out your social security number. If you have more than one business, provide the information above for each of your businesses.

8. ☐ **Additional income.** I received one-time money (lottery winnings, inheritance, etc.) in the last 12 months *(specify source and amount):*

9. ☐ **Change in income.** My financial situation has changed significantly over the last 12 months because *(specify):*

10. **Deductions**

	Last month
a. Required union dues	$
b. Required retirement payments (not social security, FICA, 401(k), or IRA)	$
c. Medical, hospital, dental, and other health insurance premiums *(total monthly amount)*	$
d. Child support that I pay for children from other relationships	$
e. Spousal support that I pay by court order from a different marriage	$
f. Partner support that I pay by court order from a different domestic partnership	$
g. Necessary job-related expenses not reimbursed by my employer *(attach explanation labeled "Question 10g")*	$

11. **Assets**

	Total
a. Cash and checking accounts, savings, credit union, money market, and other deposit accounts	$
b. Stocks, bonds, and other assets I could easily sell	$
c. All other property, ☐ real and ☐ personal *(estimate fair market value minus the debts you owe)*	$

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/CLAIMANT:	CASE NUMBER:

12. **The following people live with me:**

Name	Age	How the person is related to me? *(ex: son)*	That person's gross monthly income	Pays some of the household expenses?
a.				☐ Yes ☐ No
b.				☐ Yes ☐ No
c.				☐ Yes ☐ No
d.				☐ Yes ☐ No
e.				☐ Yes ☐ No

13. **Average monthly expenses** ☐ Estimated expenses ☐ Actual expenses ☐ Proposed needs

a. Home:

(1) ☐ Rent or ☐ mortgage. . . $ _____

If mortgage:

(a) average principal: $ _____

(b) average interest: $ _____

(2) Real property taxes . . . . . $ _____

(3) Homeowner's or renter's insurance (if not included above) . . . . . $ _____

(4) Maintenance and repair . . . . . $ _____

b. Health-care costs not paid by insurance. . . $ _____

c. Child care . . . . . $ _____

d. Groceries and household supplies. . . . . $ _____

e. Eating out. . . . . $ _____

f. Utilities (gas, electric, water, trash) . . . . . $ _____

g. Telephone, cell phone, and e-mail . . . . . $ _____

h. Laundry and cleaning . . . . . $ _____

i. Clothes . . . . . $ _____

j. Education . . . . . $ _____

k. Entertainment, gifts, and vacation. . . . . $ _____

l. Auto expenses and transportation (insurance, gas, repairs, bus, etc.) . . . . . $ _____

m. Insurance (life, accident, etc.; do not include auto, home, or health insurance). . . $ _____

n. Savings and investments. . . . . $ _____

o. Charitable contributions. . . . . $ _____

p. Monthly payments listed in item 14 *(itemize below in 14 and insert total here).* . $ _____

q. Other *(specify):* . . . . . $ _____

r. **TOTAL EXPENSES** (a–q) *(do not add in the amounts in a(1)(a) and (b))* $ _____

s. **Amount of expenses paid by others** $ _____

14. **Installment payments and debts not listed above**

Paid to	For	Amount	Balance	Date of last payment
		$	$	
		$	$	
		$	$	
		$	$	
		$	$	
		$	$	

15. **Attorney fees** *(This is required if either party is requesting attorney fees.):*

a. To date, I have paid my attorney this amount for fees and costs *(specify):* $

b. The source of this money was *(specify):*

c. I still owe the following fees and costs to my attorney *(specify total owed):* $

d. My attorney's hourly rate is *(specify):* $

I confirm this fee arrangement.

Date:

(TYPE OR PRINT NAME OF ATTORNEY) (SIGNATURE OF ATTORNEY)

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/CLAIMANT:	CASE NUMBER:

CHILD SUPPORT INFORMATION
(NOTE: Fill out this page only if your case involves child support.)

16. **Number of children**
    a. I have *(specify number):* children under the age of 18 with the other parent in this case.
    b. The children spend percent of their time with me and percent of their time with the other parent.
    (If you're not sure about percentage or it has not been agreed on, please describe your parenting schedule here.)

17. **Children's health-care expenses**
    a. ☐ I do ☐ I do not have health insurance available to me for the children through my job.
    b. Name of insurance company:
    c. Address of insurance company:

    d. The monthly cost for the **children's** health insurance is or would be *(specify):* $
    (Do not include the amount your employer pays.)

18. **Additional expenses for the children in this case** — Amount per month
    a. Child care so I can work or get job training. . . . . $ _____
    b. Children's health care not covered by insurance . . . . . $ _____
    c. Travel expenses for visitation . . . . . $ _____
    d. Children's educational or other special needs *(specify below):* . . . . . $ _____

19. **Special hardships.** I ask the court to consider the following special financial circumstances *(attach documentation of any item listed here, including court orders):*

	Amount per month	For how many months?
a. Extraordinary health expenses not included in 18b.	$ _____	_____
b. Major losses not covered by insurance (examples: fire, theft, other insured loss)	$ _____	_____
c. (1) Expenses for my minor children who are from other relationships and are living with me	$ _____	_____
(2) Names and ages of those children *(specify):*		
(3) Child support I receive for those children.	$ _____	

The expenses listed in a, b, and c create an extreme financial hardship because *(explain):*

20. **Other information I want the court to know concerning support in my case** *(specify):*

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address)* :	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO. *(Optional)*: E-MAIL ADDRESS *(Optional)*: ATTORNEY FOR *(Name)*: IN PRO PER	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
MARRIAGE OF PETITIONER: RESPONDENT:	
JUDGMENT ☐ **DISSOLUTION** ☐ **LEGAL SEPARATION** ☐ **NULLITY** ☐ **Status only** ☐ **Reserving jurisdiction over termination of marital or domestic partnership status** ☐ **Judgment on reserved issues** **Date marital or domestic partnership status ends:**	CASE NUMBER:

1. ☐ This judgment ☐ contains personal conduct restraining orders ☐ modifies existing restraining orders.
   The restraining orders are contained on page(s) of the attachment. They expire on *(date)*:

2. This proceeding was heard as follows: ☑ Default or uncontested ☑ By declaration under Family Code section 2336
   ☐ Contested
   a. Date: Dept.: Room:
   b. Judicial officer *(name)*: ☐ Temporary judge
   c. ☐ Petitioner present in court ☐ Attorney present in court *(name)*:
   d. ☐ Respondent present in court ☐ Attorney present in court *(name)*:
   e. ☐ Claimant present in court *(name)*: ☐ Attorney present in court *(name)*:
   f. ☐ Other *(specify name)*:

3. The court acquired jurisdiction of the respondent on *(date)*:
   a. ☑ The respondent was served with process.
   b. ☐ The respondent appeared.

THE COURT ORDERS, GOOD CAUSE APPEARING

4. a. ☑ Judgment of dissolution is entered. Marital or domestic partnership status is terminated and the parties are restored to the status of single persons
   (1) ☐ on *(specify date)*:
   (2) ☐ on a date to be determined on noticed motion of either party or on stipulation.
   b. ☐ Judgment of legal separation is entered.
   c. ☐ Judgment of nullity is entered. The parties are declared to be single persons on the ground of *(specify)*:
   d. ☐ This judgment will be entered nunc pro tunc as of *(date)*:
   e. ☐ Judgment on reserved issues.
   f. The ☐ petitioner's ☐ respondent's former name is restored to *(specify)*:
   g. ☐ Jurisdiction is reserved over all other issues, and all present orders remain in effect except as provided below.
   h. ☐ This judgment contains provisions for child support or family support. Each party must complete and file with the court a *Child Support Case Registry Form* (form FL-191) within 10 days of the date of this judgment. The parents must notify the court of any change in the information submitted within 10 days of the change, by filing an updated form. The *Notice of Rights and Responsibilities—Health Care Costs and Reimbursement Procedures and Information Sheet on Changing a Child Support Order* (form FL-192) is attached.

Form Adopted for Mandatory Use
Judicial Council of California
FL-180 [Rev. January 1, 2007]

JUDGMENT
(Family Law)

Family Code, §§ 2024, 2340, 2343, 2346
www.courtinfo.ca.gov

American LegalNet, Inc.
www.Forms*Workflow*.com

CASE NAME *(Last name, first name of each party):*	CASE NUMBER:

4. *(Cont'd.)*
   i. ☐ A settlement agreement between the parties is attached.
   j. ☐ A written stipulation for judgment between the parties is attached.
   k. ☐ The children of this marriage or domestic partnership.
      (1) ☐ The children of this marriage or domestic partnership are:
      Name Birthdate
      (2) ☐ Parentage is established for children of this relationship born prior to the marriage or domestic partnership.
   l. ☐ Child custody and visitation are ordered as set forth in the attached
      (1) ☐ settlement agreement, stipulation for judgment, or other written agreement.
      (2) ☐ *Child Custody and Visitation Order Attachment* (form FL-341).
      (3) ☐ *Stipulation and Order for Custody and/or Visitation of Children* (form FL-355).
      (4) ☐ other *(specify):*
   m. ☐ Child support is ordered as set forth in the attached
      (1) ☐ settlement agreement, stipulation for judgment, or other written agreement.
      (2) ☐ *Child Support Information and Order Attachment* (form FL-342).
      (3) ☐ *Stipulation to Establish or Modify Child Support and Order* (form FL-350).
      (4) ☐ other *(specify):*
   n. ☐ Spousal or partner support is ordered as set forth in the attached
      (1) ☐ settlement agreement, stipulation for judgment, or other written agreement.
      (2) ☐ *Spousal, Partner, or Family Support Order Attachment* (form FL-343).
      (3) ☐ other *(specify):*

      NOTICE: It is the goal of this state that each party will make reasonable good faith efforts to become self-supporting as provided for in Family Code section 4320. The failure to make reasonable good faith efforts may be one of the factors considered by the court as a basis for modifying or terminating spousal or partner support.
   o. ☐ Property division is ordered as set forth in the attached
      (1) ☐ settlement agreement, stipulation for judgment, or other written agreement.
      (2) ☐ *Property Order Attachment to Judgment* (form FL-345).
      (3) ☐ other *(specify):*
   p. ☐ Other *(specify):*

Each attachment to this judgment is incorporated into this judgment, and the parties are ordered to comply with each attachment's provisions.

Jurisdiction is reserved to make other orders necessary to carry out this judgment.

Date:

JUDICIAL OFFICER

5. Number of pages attached: _____

☐ SIGNATURE FOLLOWS LAST ATTACHMENT

NOTICE

Dissolution or legal separation may automatically cancel the rights of a spouse or domestic partner under the other spouse's or domestic partner's will, trust, retirement plan, power of attorney, pay-on-death bank account, transfer-on-death vehicle registration, survivorship rights to any property owned in joint tenancy, and any other similar thing. It does not automatically cancel the rights of a spouse or domestic partner as beneficiary of the other spouse's or domestic partner's life insurance policy. You should review these matters, as well as any credit cards, other credit accounts, insurance policies, retirement plans, and credit reports, to determine whether they should be changed or whether you should take any other actions.

A debt or obligation may be assigned to one party as part of the dissolution of property and debts, but if that party does not pay the debt or obligation, the creditor may be able to collect from the other party.

An earnings assignment may be issued without additional proof if child, family, partner, or spousal support is ordered.

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

SHORT TITLE:	CASE NUMBER:

ATTACHMENT *(Number):* _____ **Page** _____ **of** _____

(This Attachment may be used with any Judicial Council form.) *(Add pages as required)*

(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)

Form Approved for Optional Use
Judicial Council of California
MC-025 [Rev. January 1, 2007]

ATTACHMENT
to Judicial Council Form

www.courtinfo.ca.gov

American LegalNet, Inc.
www.Forms*Workflow*.com

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address):*	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO. *(Optional):* E-MAIL ADDRESS *(Optional):* ATTORNEY FOR *(Name):* IN PRO PER	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT:	
NOTICE OF ENTRY OF JUDGMENT	CASE NUMBER:

You are notified that the following judgment was entered on *(date):*

1. ☑ Dissolution
2. ☐ Dissolution—status only
3. ☐ Dissolution—reserving jurisdiction over termination of marital status or domestic partnership
4. ☐ Legal separation
5. ☐ Nullity
6. ☐ Parent-child relationship
7. ☐ Judgment on reserved issues
8. ☐ Other *(specify):*

Date:

Clerk, by _____, Deputy

—NOTICE TO ATTORNEY OF RECORD OR PARTY WITHOUT ATTORNEY—

Under the provisions of Code of Civil Procedure section 1952, if no appeal is filed the court may order the exhibits destroyed or otherwise disposed of after 60 days from the expiration of the appeal time.

STATEMENT IN THIS BOX APPLIES ONLY TO JUDGMENT OF DISSOLUTION

Effective date of termination of marital or domestic partnership status *(specify):*

WARNING: Neither party may remarry or enter into a new domestic partnership until the effective date of the termination of marital or domestic partnership status, as shown in this box.

CLERK'S CERTIFICATE OF MAILING

I certify that I am not a party to this cause and that a true copy of the *Notice of Entry of Judgment* was mailed first class, postage fully prepaid, in a sealed envelope addressed as shown below, and that the notice was mailed

at *(place):* , California, on *(date):*

Date: Clerk, by _____, Deputy

Name and address of petitioner or petitioner's attorney

Name and address of respondent or respondent's attorney

ATTORNEY OR UNREPRESENTED PARTY (NAME AND ADDRESS): TELEPHONE NO.:	FOR COURT USE ONLY
ATTORNEY(S) FOR: IN PRO PER	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO ☐ 351 North Arrowhead Avenue, San Bernardino, CA 92415-0210 ☐ 8303 Haven Avenue, Rancho Cucamonga, CA 91730 ☐ 14455 Civic Drive, Victorville, CA 92392 ☐ 235 East Mountain View, Barstow, CA 92311 ☐ 6527 White Feather Road, Star Route 1, Box 60, Joshua Tree, CA 92252 ☐ 216 Brookside Avenue, Redlands, CA 92373 ☐ 17780 Arrow Highway, Fontana, CA 92335 ☐ 13260 Central Avenue, Chino, CA 91710	
PLAINTIFF(S) PETITIONER:	
DEFENDANT(S) RESPONDENT:	
REQUEST TO SET UNCONTESTED MATTER	CASE NUMBER:

NOTE: Counsel shall file this form with the Clerk of the Court at least 10 days prior to the desired date.

TO THE CLERK OF THE COURT: Request is hereby made that the within matter for *(check appropriate block)*

☐ Dissolution ☐ Nullity ☐ Legal Separation ☐ Adoption ☐ Free From Custody
☐ Compromise of Minor's Disputed Claim ☐ Change of Name
☐ Declaration and Order for Appearance of Judgment Debtor
☐ Other: _____

Character of Action; if Eminent Domain, include parcel number

which is uncontested and ready for hearing to be set on the uncontested matters calendar for hearing on:

a. Date: Time: ☐ Dept.: ☐ Div. ☐ Room:
b. Address:

This may be heard as an uncontested matter because:

☑ Petition/Complaint and Summons was served on _____

☑ Default of _____ was entered on _____ .

☐ Appearance and Waiver was filed by _____ on _____ .

☐ Response and Waiver was filed by _____ on _____ .

☐ Other _____

_____

Please note your suggested hearing date(s). (Monday through Thursday only.) _____

_____ .

Dated _____

_____
Signature of Attorney

PLEASE FILE IN DUPLICATE
Your copy of this request will be returned with the hearing date completed by the Clerk.

ACIS Code
37192(02)
39000

J in F
OK TO SET

Print This Form **Clear This Form**