

PARTY WITHOUT ATTORNEY OR ATTORNEY: STATE BAR NO.: NAME: <b>John Smith</b> FIRM NAME: <b>n/a</b> STREET ADDRESS: <b>500 First Avenue</b> CITY: <b>San Diego</b> STATE: <b>CA</b> ZIP CODE: <b>92101</b> TELEPHONE NO.: <b>619-555-5555</b> FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name): <b>Self-Represented Litigant</b>	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF San Diego</b> STREET ADDRESS: <b>1100 Union Street</b> MAILING ADDRESS: <b>Same</b> CITY AND ZIP CODE: <b>San Diego, CA 92101</b> BRANCH NAME: <b>Central Division</b>	
PETITIONER: <b>Sally Smith</b> RESPONDENT: <b>John Smith</b> OTHER PARENT/PARTY:	
<b>RESPONSIVE DECLARATION TO REQUEST FOR ORDER</b>	CASE NUMBER:
HEARING DATE: <b>June 1, 2022</b> TIME: <b>9:00 a.m.</b> DEPARTMENT OR ROOM: <b>E-5</b>	

Read *Information Sheet: Responsive Declaration to Request for Order* (form [FL-320-INFO](#)) for more information about this form.

1.  RESTRAINING ORDER INFORMATION
  - a.  No domestic violence restraining/protective orders are now in effect between the parties in this case.
  - b.  I agree that one or more domestic violence restraining/ protective orders are now in effect between the parties in this case.
  
2.  CHILD CUSTODY
  - VISITATION (PARENTING TIME)
    - a.  I consent to the order requested for child custody (legal and physical custody)
    - b.  I consent to the order requested for visitation (parenting time).
    - c.  I do not consent to the order requested for  child custody  visitation (parenting time)
      - but I consent to the following order:  
See attached declaration
  
3.  CHILD SUPPORT
  - a. I have completed and filed a current *Income and Expense Declaration* (form [FL-150](#)) or, if eligible, a current *Financial Statement (Simplified)* (form [FL-155](#)) to support my responsive declaration.
  - b.  I consent to the order requested.
  - c.  I consent to guideline support.
  - d.  I do not consent to the order requested  but I consent to the following order:
  
4.  SPOUSAL OR DOMESTIC PARTNER SUPPORT
  - a. I have completed and filed a current *Income and Expense Declaration* (form [FL-150](#)) to support my responsive declaration.
  - b.  I consent to the order requested.
  - c.  I do not consent to the order requested  but I consent to the following order:

PETITIONER: Sally Smith RESPONDENT: John Smith OTHER PARENT/PARTY:	CASE NUMBER:
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5.  PROPERTY CONTROL

- a.  I consent to the order requested.
- b.  I do not consent to the order requested  but I consent to the following order:

6.  ATTORNEY'S FEES AND COSTS

- a. I have completed and filed a current *Income and Expense Declaration* (form FL-150) to support my responsive declaration.
- b. I have completed and filed with this form a *Supporting Declaration for Attorney's Fees and Costs Attachment* (form FL-158) or a declaration that addresses the factors covered in that form.
- c.  I consent to the order requested.
- d.  I do not consent to the order requested  but I consent to the following order:

7.  DOMESTIC VIOLENCE ORDER

- a.  I consent to the order requested.
- b.  I do not consent to the order requested  but I consent to the following order:

8.  OTHER ORDERS REQUESTED

- a.  I consent to the order requested.
- b.  I do not consent to the order requested  but I consent to the following order:

9.  TIME FOR SERVICE / TIME UNTIL HEARING

- a.  I consent to the order requested.
- b.  I do not consent to the order requested  but I consent to the following order:

10.  FACTS TO SUPPORT my responsive declaration are listed below. The facts that I write and attach to this form cannot be longer than 10 pages, unless the court gives me permission.  Attachment 10.  
 See attached declaration

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

Date: Date of signing

John Smith \_\_\_\_\_



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(TYPE OR PRINT NAME)

(SIGNATURE OF DECLARANT)