

PARTY WITHOUT ATTORNEY OR ATTORNEY STATE BAR NUMBER: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT:	
DECLARATION FOR DEFAULT OR UNCONTESTED JUDGMENT	CASE NUMBER:

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 request that proof will be by this declaration and that I will not appear before the court unless I am ordered by the court to appear.
3. All the information in the *Petition to Determine Parental Relationship* *Response*
 Petition for Custody and Support of Minor Children *Response* is true and correct.
4. Respondent and/or Petitioner is/are the parent(s) of the minor children.
5. A voluntary declaration of parentage or paternity form has has not been signed regarding these children (*attach a copy if available*).
6. **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 stipulated (agreed in writing) that the matter may proceed as an uncontested matter without notice, and the stipulation is attached.
7. **CHILD SUPPORT** should be ordered as set forth in the proposed *Judgment* (form FL-250).
 - a. Petitioner Respondent is presently receiving public assistance (TANF); thus all support should be made payable to the local child support agency at (*specify address*):

b. NOTE: If a support order is requested, submit a completed *Income and Expense Declaration* (form FL-150), or *Financial Statement (Simplified)* (form FL-155), unless a current form is on file. Include your best estimate of the other party's gross monthly income.
8. **ATTORNEY FEES** should be ordered as set forth in the proposed *Judgment* (form FL-250).
9. **CHILD CUSTODY** should be ordered as set forth in the proposed *Judgment* (form FL-250).
10. **CHILD VISITATION (PARENTING TIME)** should be ordered as set forth in the proposed *Judgment* (form FL-250).
11. **REASONABLE EXPENSES OF PREGNANCY AND BIRTH** should be ordered as set forth in the proposed *Judgment* (form FL-250).
12. **NAMES OF THE CHILDREN** should be changed as set forth in the proposed *Judgment* (form FL-250).
13. 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.
14. I have read and understand the *Advisement and Waiver of Rights Re: Determination of Parental Relationship* (form FL-235), which is signed and attached to this declaration.
15. **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)