

ATTORNEY OR PARTY WITHOUT ATTORNEY ( <i>Name, state bar number, and address</i> ):  <hr/> TELEPHONE NO.: _____ FAX NO.: _____ ATTORNEY FOR ( <i>Name</i> ): _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER/PLAINTIFF:  RESPONDENT/DEFENDANT:  OTHER PARENT:	
<b>STATEMENT FOR REGISTRATION OF CALIFORNIA SUPPORT ORDER</b> <input type="checkbox"/> <b>Support Order</b> <input type="checkbox"/> <b>Order for Wage or Income Withholding</b>	CASE NUMBER:

The statement of the Obligee (the person to whom support is owed) to register  a California support order  a California order for earnings or income withholding is as follows:

1. The Obligor (the parent ordered to pay support) is  Petitioner/Plaintiff  Respondent/Defendant  Other parent
2. A file stamped copy (endorsed) of the most recent support order or order for earnings or income withholding (or a copy) is attached. *(A certified copy is not required.)*
3. a.  A *Declaration of Payment History* (form FL-420) is attached.  
 b.  The arrearage balance is unknown.
4. The Obligee's mailing address is *(specify)*:
  
5. The Obligor's last known place of residence or mailing address is *(specify)*:
  
6. States and counties in which the original order for support or order for earnings or income withholding, and any modifications, are registered *(specify)*:

None, or unknown.

**NOTICE TO OBLIGOR**

**You have 20 days after the date of mailing of this *STATEMENT FOR REGISTRATION OF CALIFORNIA SUPPORT ORDER* to petition the court to cancel (vacate) this registration or petition for other relief (Fam. Code, § 5603). (See the date on the Clerk's Certificate of Mailing on page 2 of this form.)**

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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**DECLARATION**

7. 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 OBLIGEE, PERSON HAVING LEGAL CUSTODY OF MINOR OBLIGEE, OR PERSON ACTING ON BEHALF OF OBLIGEE PURSUANT TO AN ASSIGNMENT OF RIGHTS)

**NOTICE TO OBLIGOR**

8. **TO OBLIGOR** (*name*):

9. You are notified that a  California support order  California order for assignment of earnings for support has been registered with this court. A copy of the order is attached, and the mailing address of the Obligee is shown in this statement.

Date: \_\_\_\_\_ Clerk, by \_\_\_\_\_, Deputy

**CLERK'S CERTIFICATE OF MAILING**

I certify that I am not a party to this cause and that a copy of the *Statement for Registration of California Support Order (form FL-440)* with a copy of the California order were sent to the Obligor by certified mail, return receipt from the addressee only requested. The copies were enclosed in an envelope with postage fully prepaid. The envelope was addressed to the Obligor only at the address listed in item 5 on page 1 of this form, sealed, and deposited with the United States Postal Service  
at (*place*):  
on (*date*):

Date: \_\_\_\_\_ Clerk, by \_\_\_\_\_, Deputy