

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.

3. ☐ CHILD SUPPORT
- a. I have completed and filed a current *Income and Expense Declaration* ( ) 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:

- Code of Civil Procedure, § 1005  
Cal. Rules of Court, rule 5.92  
[courts.ca.gov](http://courts.ca.gov)

PETITIONER: RESPONDENT: 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 ) 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 ) 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. ☐ 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:
  
8. ☐ 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:
  
9. ☐ 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. ☐

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: \_\_\_\_\_

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

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 \_\_\_\_\_  
 (SIGNATURE OF DECLARANT)