



<b>Cover Sheet:</b>	<b>Response to Petition to Establish Parental Relationship</b>
<b>Effective Date:</b>	September 4, 2018
<b>Last Revision Date:</b>	January 1, 2025
<b>Purpose:</b>	These forms are used to respond to a Petition to Establish Parental Relationship. This case can be used to obtain orders for establishing parentage, child custody, child support and changing a child's name.
<b>Assistance:</b>	Parties who are acting as their own attorneys may receive help from the Self Help Center to complete these forms. You may contact the Self Help Center through the Court's website, by creating an e-Correspondence account, or visit the Self Help Center in person, Monday through Thursday and Friday mornings.
<b>Required Forms:</b>	All forms are Judicial Council forms, unless otherwise indicated: <ul style="list-style-type: none"><li>• Response to Petition to Establish Parental Relationship, FL-220</li><li>• Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA), FL-105</li><li>• Family Law Case Participant Enrollment Form (Party), local form FL/E-LP-665</li><li>• Proof of Service By Mail, FL-335</li></ul>
<b>Filing Fee:</b>	There is a \$435 fee to file these documents. The current fee schedule may be found on the Court's website at: <a href="https://www.saccourt.ca.gov/fees/docs/fee-schedule.pdf">https://www.saccourt.ca.gov/fees/docs/fee-schedule.pdf</a> .
<b>Copies:</b>	Make two copies of the completed forms. The Court will file and keep the original and will endorse and return the copies to you.
<b>Before You File:</b>	One copy of the completed Response must be served on the Petitioner by mail. Make one copy of the completed Proof of Service by Mail and file the original and copy with your Response.
<b>Filing:</b>	All forms must be typewritten or printed in blue or black ink. (See California Rules of Court, Rules 2.100-2.119).  Mail or place completed forms in the court drop-box located at the Family Court at 3341 Power Inn Road, Sacramento, CA 95826. Drop box hours are 8:00 am to 5:00 pm Monday through Friday, excluding Court holidays.  Forms may also be filed in person between the hours of 8:30 am and 4:00 pm. You must make an appointment online or obtain a ticket from Reception to file in person.
<b>Next Steps:</b>	Filing these forms is the first step only. Seek legal assistance to determine the next steps to complete your case.

PARTY WITHOUT ATTORNEY OR ATTORNEY NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	<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: RESPONDENT:	
<b>RESPONSE TO PETITION TO DETERMINE PARENTAL RELATIONSHIP</b>	CASE NUMBER:

1. The petitioner
  - a.  is a parent of the children in item 2.
  - b.  is not a parent of the children in item 2.
  - c.  is the child or the child's personal representative *(specify court and date of appointment)*:
  - d.  Other *(specify)*:
  
2. The children are
 

a. <u>Child's name</u>	<u>Birthdate</u>	<u>Age</u>
------------------------	------------------	------------

  
 b.  a child who is not yet born.
  
3. The respondent
  - a.  lives in the state of California.
  - b.  was in California when the children listed in item 2 were conceived.
  - c.  does not live in the state of California.
  - d.  was not in California when the children listed in item 2 were conceived.
  - e.  Other *(specify)*:
  
4. The children
  - a.  live or are found in this county.
  - b.  are children of a parent who is deceased, and proceedings for administration of the estate have been or could be started in this county.
  
5. The respondent is
  - a.  the parent of the children listed in item 2 above.
  - b.  not certain if the respondent is the parent of the children listed in item 2 above.
  - c.  not the parent of the children listed in item 2 above.
  - d.  Other *(specify)*:
  
6. Additional statements
  - a.  Parentage has been determined by a voluntary declaration of parentage or paternity. *(Attach a copy if available.)*
  - b.  Parentage has been established in another case  governmental child support  Other *(specify)*:
  - c.  Public assistance is being provided to the children.
  
7. A completed *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)*

PETITIONER: RESPONDENT:	CASE NUMBER:
----------------------------	--------------

The respondent asks that the court make the determinations listed below.

8. PARENT-CHILD RELATIONSHIP (check all that apply):

- a.  Respondent  Petitioner is the parent of the children listed in item 2.
- b.  Respondent  Petitioner is not the parent of the children listed in item 2.
- c.  Respondent requests genetic testing to determine whether the  Petitioner  Respondent is the parent of the children listed in item 2.

9. CHILD CUSTODY AND VISITATION (PARENTING TIME)

- |  | Petitioner               | Respondent               | Joint                    | Other                    |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Legal custody of children to .....                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Physical custody of children to .....                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Child visitation (parenting time) be granted to ..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
- As requested in  form  form  form  
 form  form
- d. The facts in support of the requested custody and visitation (parenting time) orders are (specify):  
 Contained in the attached

10. REASONABLE EXPENSES OF PREGNANCY AND BIRTH:

Reasonable expenses of pregnancy and birth to be paid by as follows:	Petitioner <input type="checkbox"/>	Respondent <input type="checkbox"/>	Joint <input type="checkbox"/>
--	--	--	-----------------------------------

11. FEES AND COSTS OF LITIGATION

	Petitioner	Respondent	Joint
a. Attorney fees to be paid by	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Expert fees, guardian ad litem fees, and other costs of the action or pretrial proceedings to be paid by	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. NAME CHANGE

Children's names be changed, according to Family Code section 7638, as follows (specify old and new names):

13. OTHER ORDERS REQUESTED (specify):

14. CHILD SUPPORT

The court may make orders for support of the children and issue an earnings assignment without further notice to either party.

I have read the restraining order on the back of the *Summons* (form FL-210) and I understand it applies to me.

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 RESPONDENT)
-------------------------------	--	------------------------------------

**NOTICE: If you have a child from this relationship, the court is required to order child support based upon the income of both parents. Support normally continues until the child is 18. You should supply the court with information about your finances. Otherwise, the child support order will be based upon information supplied by the other parent. Any party required to pay child support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent.**

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NUMBER:  NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: EMAIL ADDRESS: ATTORNEY FOR (name):	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
<i>(This section applies to cases other than probate guardianships.)</i>	
PETITIONER: RESPONDENT: OTHER PARTY: CHILD'S NAME (Juvenile cases only):	
<i>(This section applies only to probate guardianship cases.)</i>	
GUARDIANSHIP OF (name):  <div style="text-align: right;">Minor</div>	CASE NUMBER:
<b>DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)</b>	

1. I am (check one):  a party to this proceeding to determine custody of a child  the authorized representative of the agency, which is a party to this proceeding to determine custody of a child.

2. There are (specify number): \_\_\_\_\_ minor children who are subject to this proceeding, as follows (list oldest child first):

Full Name	Date of birth	Place of birth (city and state)
a.		
b.		
c.		
d.		

Check this box if you need to list more children. (On form \_\_\_\_\_ or a separate piece of paper, write "FL-105, Attachment 2, Additional Children" at the top, provide all requested information for each additional child, and attach to this form.)

3. a.  Check this box if there is only one child or if all of the children listed in item 2 have lived together for the past five years. (Provide the current address of the child listed in item 2a and their residence history for the past five years. If the current address is confidential under Family Code section 3429, check the box and provide only the state of residence.)

Dates of residence (Month/Year)		Residence (City, State)	Person child lived with and complete current address	Relationship
From:	To present			
		<input type="checkbox"/> Confidential (list state only)	<input type="checkbox"/> Confidential (list state only)	
From:	To:			
From:	To:			
From:	To:			
From:	To:			

Additional addresses are listed on Attachment 3a. (Form \_\_\_\_\_ may be used for this purpose.)

b.  Check this box if there is more than one child and all the children have not lived together for the past five years. (Attach form FL-105(A)/GC-120(A) and list each other child's current address and their residence history for the past five years.)

CASE NAME:	CASE NUMBER:
------------	--------------

4. Do you have information about, or have you participated as a party or as a witness or in some other capacity in, another court case or custody or visitation proceeding, in California or elsewhere, concerning a child subject to this proceeding?  
 Yes     No    *(If yes, attach a copy of the orders if you have one and provide the following information):*

Proceeding	Case number	Court <i>(name, state or tribe, location)</i>	Court order or judgment <i>(date)</i>	Name of each child	Your connection to the case	Case status
a. <input type="checkbox"/> Family						
b. <input type="checkbox"/> Probate Guardianship						
c. <input type="checkbox"/> Other						

Proceeding	Case Number	Court <i>(name, state or tribe, location)</i>
d. <input type="checkbox"/> Juvenile		
e. <input type="checkbox"/> Adoption		

5.  One or more domestic violence restraining/protective orders are now in effect. *(Attach a copy of the orders if you have one and provide the following information):*

Court	County	State or Tribe	Case Number <i>(if known)</i>	Orders expire <i>(date)</i>
a. <input type="checkbox"/> Criminal				
b. <input type="checkbox"/> Family				
c. <input type="checkbox"/> Juvenile				
d. <input type="checkbox"/> Other				

6. Do you know of any person who is not a party to this proceeding who has physical custody of or claims to have rights to custody of or visitation with any child in this case?     Yes     No    *(If yes, provide the following information):*

<p>a. Name and address of person:</p> <div style="border: 1px solid black; height: 50px; width: 100%;"></div>	<p>b. Name and address of person:</p> <div style="border: 1px solid black; height: 50px; width: 100%;"></div>	<p>c. Name and address of person:</p> <div style="border: 1px solid black; height: 50px; width: 100%;"></div>
<input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights	<input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights	<input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights
<p>Name of each child:</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<p>Name of each child:</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<p>Name of each child:</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>

7.  Number of pages attached: \_\_\_\_\_

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: \_\_\_\_\_

(NAME OF DECLARANT)

▶

(SIGNATURE OF DECLARANT)

**NOTICE TO DECLARANT: You have a continuing duty to inform this court if you obtain any information about a custody proceeding in a California court or any other court concerning a child subject to this proceeding.**

# Important Notice about Access to Your Case

---

Court orders, minute orders, and child custody mediation reports are available online using our Public Case Access System. Access to court orders and minute orders provides you with information on what the court ordered in your case. Access to child custody mediation reports is necessary so that you know what child custody, visitation, or other suggestions the mediator recommended to the court.

To get secure access to your case online, you must complete and submit to the court the attached Family Law Case Participant Enrollment Form - Party, along with a copy of your driver's license, to create or update an account on our Public Case Access System. A separate form must be filed for each case or when you change your email address.

Once you complete the form, you may submit it in person at the courthouse at the public service counter or use the Drop Box. You may also submit it by US Mail at 3341 Power Inn Road, Sacramento, CA 95826.

Submitting the form as soon as possible is important because it may take two to five days to be processed from the date of receipt.

Once your access is set up you will receive an email letting you know that you are subscribed to your case. If you do not receive an email notifying you that you are subscribed to your case during the timeframes identified above, please inform the court using our Contact Us page at:

<https://www.saccourt.ca.gov/contact.aspx>

**CONFIDENTIAL**

<p>CASE PARTICIPANT NAME: STREET ADDRESS: CITY/STATE/ZIP CODE: TELEPHONE NO.: E-MAIL ADDRESS (<i>must be legible</i>)</p>	<i>FOR COURT USE ONLY</i>
<p><b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SACRAMENTO</b> STREET ADDRESS: 3341 Power Inn Road CITY AND ZIP CODE: Sacramento, CA 95826 BRANCH NAME: William R. Ridgeway Family Relations Courthouse</p>	
<p>PETITIONER/PLAINTIFF:  RESPONDENT/DEFENDANT:  CLAIMANT:</p>	
<p><b>FAMILY LAW CASE PARTICIPANT ENROLLMENT FORM (PARTY)</b></p>	CASE NUMBER:

You may access orders for law and motion hearings, and mediation reports prepared by Family Court Services using the court's online Public Case Access System. Access is available at no charge from the time the court creates your case subscription.

**INSTRUCTIONS**

To setup your account you must:

- File this form with the court with a copy of your **driver license or a state or federal issued photo identification card**.
- A separate form must be filed for each of your Family Law cases.
- Once the court has created your subscription to your case, you will receive a confirming email. You must follow the instructions in that email to complete the process.
- Once your subscription is completed, you will receive an email notification each time an order or report is added to your case.

I, \_\_\_\_\_, request that the court create an account and/or subscription to my Family Law case.

I declare that my private email address is (*must be legible*):

\_\_\_\_\_

(Please use Ø for zero, 1 for one and clearly differentiate i, L, S, 5, 3, and 8's)

I understand if I change my e-mail address I must file a new enrollment form with the court.

I acknowledge that confidential mediation reports contain private information that is not part of the public court file. I understand that without a court order, I must not disclose any contents of the Report to anyone (including any minor children) other than the parties to my case (Petitioner/Respondent/Claimant), their attorneys and court professionals. I acknowledge that the court may impose a penalty for any unauthorized disclosure of any content of the Family Court Services report.

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):  <hr style="width: 20px; margin-left: 0;"/>  TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	<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/PARTY:	CASE NUMBER:  (If applicable, provide): HEARING DATE: HEARING TIME: DEPT.:
<b>PROOF OF SERVICE BY MAIL</b>	

**NOTICE: To serve temporary restraining orders you must use personal service (see form FL-330).**

1. I am at least 18 years of age, not a party to this action, and I am a resident of or employed in the county where the mailing took place.
2. My residence or business address is:
  
3. I served a copy of the following documents (*specify*):

by enclosing them in an envelope AND

- a.  **depositing** the sealed envelope with the United States Postal Service with the postage fully prepaid.
- b.  **placing** the envelope for collection and mailing on the date and at the place shown in item 4 following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service in a sealed envelope with postage fully prepaid.

4. The envelope was addressed and mailed as follows:
  - a. Name of person served:
  - b. Address:
  
  - c. Date mailed:
  - d. Place of mailing (*city and state*):

5.  I served a request to modify a child custody, visitation, or child support judgment or permanent order which included an address verification declaration. (*Declaration Regarding Address Verification—Postjudgment Request to Modify a Child Custody, Visitation, or Child Support Order* (form FL-334) may be used for this purpose.)

6. 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 PERSON COMPLETING THIS FORM)