

DATE OF THIS HEARING	TIME	DEPARTMENT	FOR COURT USE ONLY
NAME, ADDRESS AND TELEPHONE NUMBER OF PETITIONER'S ATTORNEY or PETITIONER			
BAR NO:			
NAME, ADDRESS AND TELEPHONE NUMBER OF RESPONDENT'S ATTORNEY or RESPONDENT			
BAR NO:			
TITLE OF CASE :		CASE NUMBER:	
		, PETITIONER	
		, RESPONDENT	

STIPULATION AND ORDER ON REQUEST FOR ORDER (FAMILY LAW)

- | | |
|---|--|
| <input type="checkbox"/> Petitioner (Husband/Wife/Mother/Father/Other) not present. | <input type="checkbox"/> Pendente Lite |
| <input type="checkbox"/> Respondent (Husband/Wife/Mother/Father/Other) not present. | <input type="checkbox"/> Modification |

THE PARTIES HEREBY STIPULATE AND AGREE TO THE ITEMS CHECKED BELOW AND THAT THE COURT SHALL MAKE THE FOLLOWING:

- Temporary order pending the trial of this action or further order of the Court.
- Order of modification.

1. CHILD CUSTODY AND VISITATION

- Custody and visitation have been agreed to by the parties. See attached Mediation Report (Mediation Date: _____).
- Custody of the minor child/ren shall be ordered as follows, and such arrangements are in the best interests of the minor child/ren:

Child's Name:	Date of Birth:

Petitioner's Initials _____
Respondent's Initials _____

STIPULATION AND ORDER
ON REQUEST FOR ORDER (FAMILY LAW)

Form SB12039

rev 11/05/12

Page 1 of 9

Child's Name: (continued)	Date of Birth:

LEGAL CUSTODY

- JOINT LEGAL CUSTODY** of the minor child/ren shall be awarded to both parties, with:
 - BOTH PARTIES TO SHARE the physical care, custody and control of the minor child/ren reasonably between them in such a manner as to insure that the minor child/ren maintain frequent and continuing contact with both parents.
- SOLE LEGAL CUSTODY** of the minor child/ren shall be awarded to _____.
- Additional Joint Legal Custody Provisions as stated in the Attached Form FL-341(E)

PHYSICAL CUSTODY

- SOLE PHYSICAL CUSTODY** shall be awarded to _____.
- JOINT PHYSICAL CUSTODY** shall be shared between both parties.
- Additional Physical Custody Provisions as stated in the Attached Form FL-341(D)

AND

VISITATION AS FOLLOWS:

- PRIMARY PHYSICAL CUSTODY** to _____, with the right of **REASONABLE** visitation to _____ as follows:

OR

- As contained in the attached Family Court Services report, consisting of _____ pages with mediation date of ____/____/_____.

OR

Petitioner's Initials _____
 Respondent's Initials _____

SPECIFIC VISITATION as follows:

Holiday Schedule as stated in the Attached Form FL-341(C)

OTHER ORDERS RE: MINOR CHILDREN

Neither party shall remove the child/ren from the following geographic areas _____ without prior written consent of the other party or prior order of the Court first having been obtained except for vacation periods.

Neither party shall use or make, nor allow any other persons to use or make, any disparaging, or derogatory remarks about the absent parent in the presence of said child/ren.

Each party shall keep the other party informed of his or her current address and telephone number and those of the child/ren and shall notify the other within _____ days of any change of address or telephone number.

_____ shall not consume any alcoholic beverages, narcotic, or restricted dangerous drug (except upon prescription) within _____ hours of visitation or during the visitation with the minor children.

Neither party shall discuss the facts of this case with the minor child/ren.

Party receiving physical custody shall be responsible for the child's/ren's transportation on the custody exchanges.

Transportation for visitation shall be as follows:

Transport TO visit provided by _____ Transport FROM visit provided by _____.

Drop Off & Pickup will be at _____.

Petitioner's Initials _____
Respondent's Initials _____

Other: _____

2. CHILD SUPPORT

_____ Petitioner _____ Respondent shall pay to the other party as and for child support the sum of \$_____ per month. The allocation of support per child is as stated in the attached Child Support Calculation.

Child Support shall be:

- due one-half on the first and one-half on the fifteenth day of each month
- due on the first of the month
- due on the _____ day of each month

commencing _____ and continuing until further order of the Court or until the child marries, dies, is emancipated, reaches age 19, or reaches age 18 and is not a full-time high school student, whichever occurs first.

GUIDELINE: A printout of a computer calculation and findings **is attached** and incorporated in this order. The amount of support per the guideline formula is \$_____.

The amount of child support is set forth as calculated under the guideline.

OR

WE AGREE TO NON-GUIDELINE CHILD SUPPORT. The child support agreed to by the parties is below or above guideline. Pursuant to Family Code Section 4065(a), the parties declare that they have been fully informed of their rights concerning child support. Neither party is acting out of duress or coercion. Neither party is receiving public assistance and no application for public assistance is pending. The needs of the children will be adequately met by this agreed-upon amount of child support; the agreement is in the best interests of the children involved. Application of the guideline amount would be unjust or inappropriate in this case. If the order is below the guideline, no change of circumstances will be required to

Petitioner's Initials _____
Respondent's Initials _____

modify this order. If the order is above the guideline, a change of circumstances will be required to modify this order.

Health insurance coverage for the minor children of the parties shall be maintained by the petitioner respondent if available at no or reasonable cost through their respective places of employment or self-employment. Both parties are ordered to cooperate in the presentation, collection and reimbursement of any health-care claims. Any health expenses not paid by insurance shall be shared: _____% Petitioner _____% Respondent

The parent ordered to provide health insurance must seek continuation of coverage for the child after the child attains the age when the child is no longer considered eligible for coverage as a dependent under the insurance contract, if the child is incapable of self-sustaining employment because of a physically or mental disabling injury, illness, or condition and is chiefly dependent upon the parent providing health insurance for support and maintenance when health insurance coverage is available at no cost or at a reasonable cost to the parent or parents, as applicable.

ARREARS. _____Petitioner _____ Respondent shall pay to the other party the child support arrears in the principal sum of \$_____ for the period of ___/___/___ to ___/___/___.

These arrears shall be paid as follows:

CHILD CARE COSTS

_____ Petitioner _____ Respondent shall pay reasonable child care costs related to employment or necessary job training in the amount of \$_____, per month:

Each party shall pay one-half.

Petitioner's Initials _____
Respondent's Initials _____

Form SB12039

_____ % Petitioner _____ % Respondent

\$_____ Petitioner \$_____ Respondent

RESERVED. The Court's jurisdiction to award child support is reserved.

NOT APPLICABLE. Child Support is not a subject of this stipulation.

3. SPOUSAL SUPPORT

WAIVER. Petitioner Respondent freely, knowingly and intelligently waives spousal support forever. The Court's jurisdiction to award spousal support to that/those parties shall be terminated. The Court shall have no jurisdiction to award spousal support, and therefore no support can be ordered regardless of future hardship. The Parties agree and the Court finds that the Party/Parties waiving spousal support have considered the factors listed in Family Code Section 4320.

ZERO SUPPORT/RESERVED – LONG-TERM MARRIAGE. Neither party shall receive spousal support from the other. The court reserves jurisdiction over this issue for the benefit of either party as this was a long-term marriage.

SPOUSAL SUPPORT PAYMENTS. Petitioner Respondent shall pay spousal support to the other Party the sum of \$_____ per month,

due one-half on the first and one-half on the fifteenth day of each month

due on the first of the month

due on the _____ day of each month

commencing _____ and continuing until _____. Spousal support shall terminate upon the death of either party or the remarriage of the supported party, or further order of the Court, whichever occurs first.

SPECIAL ORDERS re SPOUSAL SUPPORT:

Petitioner's Initials _____
Respondent's Initials _____

Form SB12039

NOTICE: It is the goal of this State that each party must make reasonable good faith efforts to become self-supporting as provided for in Family Code section 4320. The failure to make reasonable good faith efforts may be one of the factors considered by the Court as a basis for modifying or terminating support.

RESERVED. The Court's jurisdiction to award spousal support to Petitioner Respondent is reserved for later determination upon Request for Order.

NOT APPLICABLE. Spousal Support is not a subject of this stipulation.

4. ATTORNEY'S FEES, LITIGATION EXPENSES AND COURT COSTS

The issue of attorney's fees for either party is reserved until further order of the Court.

_____ shall pay directly to _____ counsel as attorney's fees, expenses of litigation and Court costs the sum of \$ _____, payable in installments of \$ _____ per _____ payable on the _____ and _____ days of each month commencing _____ and continuing until paid in full. If any _____ installment payments are not paid when due, the entire unpaid balance will become immediately due and payable and shall bear interest at the legal rate from date of default.

Each of the parties shall pay his/her own attorney's fees, expenses of litigation and Court costs, excepting those previously ordered.

NOT APPLICABLE. Attorney Fees are not a subject of this stipulation.

5. OTHER ORDERS

Additional orders _____

Petitioner's Initials _____
Respondent's Initials _____

Check here if additional pages attached for Other Additional Orders.

All other issues are reserved until time of trial next hearing date.

This matter is continued to _____ at a.m. p.m. for further hearing on
 all issues the following issues only:

Counsel for Petitioner Respondent to prepare a formal order.

This stipulation covers all matters in dispute in the Request for Order. This Order when signed is the formal Order. No further documents are necessary.

This stipulation shall be deemed incorporated in and made a part of the minute order by reference thereto, and as though the same were fully set forth therein.

SIGNATURE OF PARTIES

We have read the entire stipulation and agreement. We understand it fully and request the Court to make our stipulation and agreement the Court's order. We understand that willful failure to comply

Petitioner's Initials _____
Respondent's Initials _____

with the provisions of this order will be a contempt of Court and may be punished by fine and imprisonment. We waive all further notice of this order.

The foregoing is agreed to by:

X _____
Petitioner Date

X _____
Respondent Date

Approved as conforming to the agreement of the parties:

(Petitioner’s Attorney, if any)

(Respondent’s Attorney, if any)

IT IS SO ORDERED THIS _____ day of _____, _____.

PURSUANT TO FAMILY CODE SECTION 3048 (A)

- This Court exercises jurisdiction under the Uniform Child Custody and Jurisdiction Enforcement Act (part 3 of the California Family code, commencing with section 3400)
- Notice and opportunity to be heard were given under Family Code Section 3425.
- Violation of the order may subject the party in violation to civil or criminal penalties, or both.
- The habitual residence of the children is the United States of America

JUDGE OF THE SUPERIOR COURT

NOTICE TO PARTIES WITHOUT ATTORNEYS

If this stipulation is reached as a temporary order pre-trial, this order shall remain in effect until further order of the Court. If you wish notice of the trial date and to present information to the Court at time of trial, you must have filed a Response to the Petition.

If other agencies require a copy, counsel will be directed to prepare and forward same or prepare and file a formal order and serve all opposing parties.

Petitioner’s Initials _____
Respondent’s Initials _____