

Parentage Orientation Homework Packet (Workshop 1 of 3)

*** **This is important information you will need to fill out your legal forms. This packet will help you get information you need to file or respond to a Parentage case***

CHECKLIST of what you will need to have for Workshop #2:

- A copy of your child's or children's birth certificate
- Your copy of paystubs from the past two months
- This Homework Packet completely filled out
- **Your Photo ID – Be prepared to show your Photo ID at Workshop #2**

We anticipate that Workshop #2 will take approximately 3 hours to complete and is online only. Please be sure you have 3 uninterrupted hours as we will be helping you complete your court forms and will need your full attention. You will need to have this Homework packet filled out and in front of you during Workshop #2. You will also need to have your photo ID and the information listed above.

YOUR INFORMATION

Name: _____

Other legal names: _____

Address: _____

Phone Number: _____

INFORMATION ABOUT OTHER PARENT

Name: _____

Other legal names: _____

Address: _____

I do not know where s/he lives and do not have any way of finding out the other parent's current address

Is the other parent in the military? YES NO

If the other party is the military, you must let the court know - there are special laws that protect active duty members from having a default entered against them.

INFORMATION REGARDING MINOR CHILDREN

Names of minor children	Date of Birth	Place of Birth (City and State)
1.		
2.		
3.		
4.		

ADDRESS(ES) WHERE THE CHILDREN LIVE/LIVED:

List any prior addresses for the children for the PAST FIVE YEARS in reverse chronological order.

Address	Who do they live/lived with?	What date(s) did the child live at this address with the person(s) identified in column 2?
Current Address	<input type="checkbox"/> With me <input type="checkbox"/> Other parent <input type="checkbox"/> Both of us <input type="checkbox"/> Another person	From ___/___/___ to present
City, State	<input type="checkbox"/> With me <input type="checkbox"/> Other parent <input type="checkbox"/> Both of us <input type="checkbox"/> Another person	From _____ to _____
City, State	<input type="checkbox"/> With me <input type="checkbox"/> Other parent <input type="checkbox"/> Both of us <input type="checkbox"/> Another person	From _____ to _____
City, State	<input type="checkbox"/> With me <input type="checkbox"/> Other parent <input type="checkbox"/> Both of us <input type="checkbox"/> Another person	From _____ to _____

OTHER CASES INVOLVING CHILDREN:

Are there any other court cases pending that involve your minor children? (circle one) YES NO

If yes, what are those cases? _____

If there are any other cases involving you and the other parent or the children, please bring that information with you.

Are you and the children protected by any orders (for example, a Restraining Order)?

(circle one) YES NO If yes, what is the case number? _____

CUSTODY AND VISITATION

LEGAL CUSTODY

Who do you think should make medical, education, and other decisions for your child(ren)?

- Me (Sole)
- Other Parent (Sole)
- Other Parent and I Together (Joint)

PHYSICAL CUSTODY

With whom do you think your child(ren) should spend significant periods of time?

- Me (Sole)
- Other Parent (Sole)
- Me and Other Parent (Joint)

PARENTING TIME (VISITATION)

1. Who will have visitation with the children? Me Other Parent

2. What type of visitation? (Check one only)

- Reasonable visitation – no schedule (NOT recommended in cases involving domestic violence)
- Specific visitation schedule
- Supervised visitation**
- No visitation (If worried that children will not be safe with other parent)

Specific schedule:

(write down the visitation schedule you would like for yourself or the other party, including the days and times for pick-ups and drop-offs. For example, visitation will be every weekend starting Friday at 6:00p.m. to Sunday at 7:00 p.m.)

Will a Holiday Schedule be attached? (Circle One) YES NO

OPTIONAL – Specify who will pick up and drop off the children for visitation (Circle One):

ME OTHER PARENT SOMEONE ELSE

OPTIONAL - Specify where the drop-offs and pick-ups will take place for visitation (Location/Address):

***** CHILD SUPPORT WITH MINOR CHILDREN*****

If you and the other parent have children under age 18 (or who are 18 and still full-time students in high school), the Court can make orders for child support. To calculate child support, the Court will look at your income, the income of the other parent, and the amount of visitation you each have with each child. The Court can use either actual income or imputed income.

FILLING FEE

DO YOU NEED A FEE WAIVER? YES NO

Are you receiving public assistance? YES NO

If yes, (Circle all that apply) CalWORKS, GR, SSI, Calfresh, Medi-Cal, Other: _____

****There is a \$435 filing fee to begin or respond to a parentage case. However, you may ask the court to waive this fee by filing a request for fee waiver****

FINANCIAL INFORMATION

To complete your paperwork when you return to the Resource Center, you must gather the following information:

YOUR INCOME: (Current or most recent job information)

Occupation/ title: _____

Name of Employer: _____

Address where you work: _____

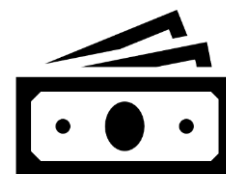
Start date: _____

End date: _____

How many hours do you work per week? _____

How much and how often are you paid? (pick one and indicate)

Hourly: \$_____ Weekly: \$_____ Bi-weekly: \$_____ By job/project: \$_____



OTHER PARENT'S INCOME:

Does the other parent work? YES NO

If the other works, how much do they get paid? _____

How do you know this?

YOUR INVESTMENT INCOME:

	Last Month	Average Monthly for the last year
Dividends/Interest		
Rental Property Income		
Trust Income		

DEDUCTIONS:

\$_____ Medical, hospital, dental health premiums paid by you

\$_____ Required retirement (NOT social security, FICA, 401k)

\$_____ Required union dues

\$_____ Necessary non-reimbursed job-related expenses

\$_____ Spousal support

\$_____ Child support for children from other relationships

MONTHLY EXPENSES

The expenses listed here are: Estimated Actual Proposed Needs

\$_____ Rent or Mortgage (Also, note any monthly renter’s insurance or repair costs)

\$_____ Health Costs not covered by Insurance (Co-pays/out-of-pocket)

\$_____ Child Care

\$_____ Groceries and Household Items

(If you receive food stamps, how much do you receive? \$_____)

\$_____ Eating Out

\$_____ Utilities (gas _____, electric_____, water _____, trash _____)

\$_____ Telephone, cell phone, email

\$_____ Laundry and cleaning supplies

\$_____ Clothes

\$_____ Education

\$_____ Entertainment, gifts, vacation

\$_____ Auto/transportation (car insurance _____, gas_____, repairs_____, bus_____)

\$_____ Insurance (Life or accident- NOT car, health, or home)

\$_____ Savings and Investment

\$_____ Charitable Contributions

MONTHLY EXPENSES FOR YOUR MINOR CHILD(REN) (If applicable):

\$_____ Child care expenses (so that you can get a job or train for a job)?

\$_____ Medical expenses not covered by insurance (e.g. co-pays)?

\$_____ Travel expenses for visitation?

\$_____ Educational or other special expenses?

Do you have health insurance available for the minor child(ren) through your job?

YES

NO

NO, but child(ren) receive(s) Medi-Cal

Insurance Company Address: _____

Monthly Cost for minor child(ren)’s insurance (is or would be): \$_____

*****CONTINUE TO NEXT PAGE*****

NOT COURT FORMS – DO NOT FILE

OTHER CURRENT MONTHLY EXPENSES (Credit card debts, car payments, etc.):

TYPE OF EXPENSE	MONTHLY PAYMENT	BALANCE OWED	DATE OF MOST RECENT PAYMENT
Car Loan	\$		
Credit Card (Name of Card): _____	\$		
Credit Card (Name of Card): _____	\$		
Medical Bill (Name of Creditor): _____	\$		
Student Loan (Name of Loan Company): _____	\$		
Other: _____	\$		
Other: _____	\$		

Is someone else helping you pay these expenses? YES NO

If yes, who? _____ How much do they pay? _____

*****CONTINUE TO NEXT PAGE*****

NOT COURT FORMS – DO NOT FILE

AVERAGE EARNED INCOME

For each of the last 12 months, write the amount of money (before taxes or deductions) that you received in each income category.

BRING YOUR PAYSTUBS FROM THE LAST TWO MONTHS or evidence of other income.

	Salary/ Wages from a job (before taxes and deductions)	Public Assistance (TANF, SSI, GA/GR)	Disability (Social Security, State Disability, Private Insurance)	Unemployment	Worker's Compensation	Self-Employment	Other (Overtime bonuses, pension, etc): _____
Last Month (month/year) ____/____							
(month/year) ____/____							
(month/ year) ____/____							
(month/ year) ____/____							
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(month/ year) ____/____							
(month/ year) ____/____							
(month/ year) ____/____							
TOTAL							
AVERAGE* (*Divide TOTAL by 12)							

*TO GET YOUR AVERAGE INCOME, DIVIDE TOTAL (in each category) by 12

NEXT STEPS

After attending the **Parentage Orientation Workshop (Part 1 of 3)**,
YOU HAVE TWO OPTIONS:

OPTION 1:

Make an appointment for the **Parentage Workshop (Part 2 of 3)** by calling our Self-Help Hotline at (213) 830-0845 to receive assistance from our center with filling out your forms.
(more information below).

Requirements for Workshop #2:

- Attend Workshop #1
- Complete this Orientation Homework packet
- Gather required documents (listed on pg. 1)
- Workshop #2 is only available online and you must join by Smartphone or a computer with video camera because you will need to show your photo ID

(NOT REQUIRED)

You may choose to create an account and complete the [Law Help Interactive](#) program before Workshop #2 so that your appointment goes quicker the day of. Be sure to save your:

USERNAME: _____

PASSWORD: _____

OR

OPTION 2:

Complete your forms on your own at your own pace.
(more information below).

OPTION 2A:

Fill out your court forms on your own using an online forms builder program called [Law Help Interactive](#), download and print the forms. *Step-by-step instructions on pages 9-14.*

OR

OPTION 2B:

Search each individual court form on the [California Courts website](#), fill out each form on your own and print.
Instructions on pages 15-17.

OPTION 2C:

Fill out your court forms on your own using an online forms builder program called [Guide and File Program](#)*, download and print the forms. *Step-by-step instructions on pages 18-19. *Available for Petitioners ONLY*

OPTION 2A:

USE LAW HELP INTERACTIVE TO FILL OUT FORMS.

STEP 1: Go to www.google.com, search “SELF HELP KIOSK,” and click on search result “SELF HELP – LA COURT” OR go directly to:
<http://www.lacourt.org/laselfhelp/UI/index.aspx?model=1>

STEP 2: Click on “**LawHelp Interactive Programs**”



STEP 3: Click on “**Self Help Workshops and Clinics**”



STEP 4: Click on **“Paternity”**



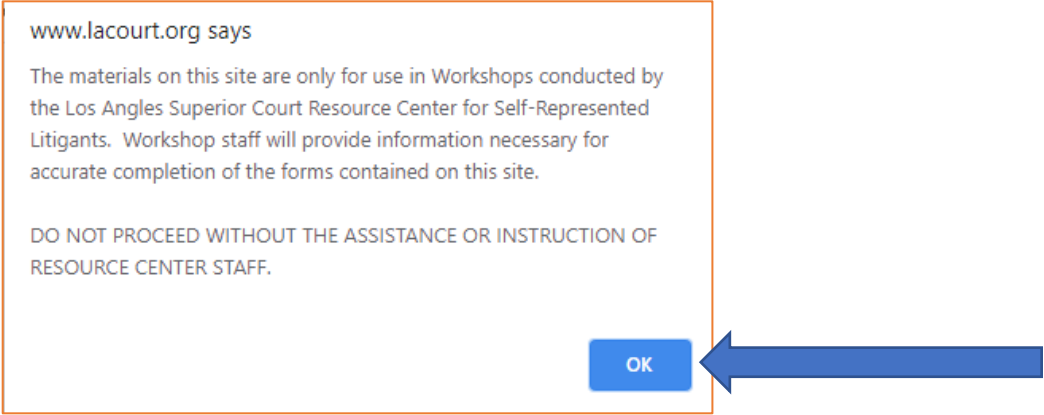
STEP 5: **PLEASE READ THE FOLLOWING CAREFULLY**

- If you are filing a **Petition** (starting a new case), click on **“Paternity Workshop Series for Petitioners”** (blue arrow below)
- If you are filing a **Response**, click on **“Paternity Workshop for Respondents”** (purple arrow below)

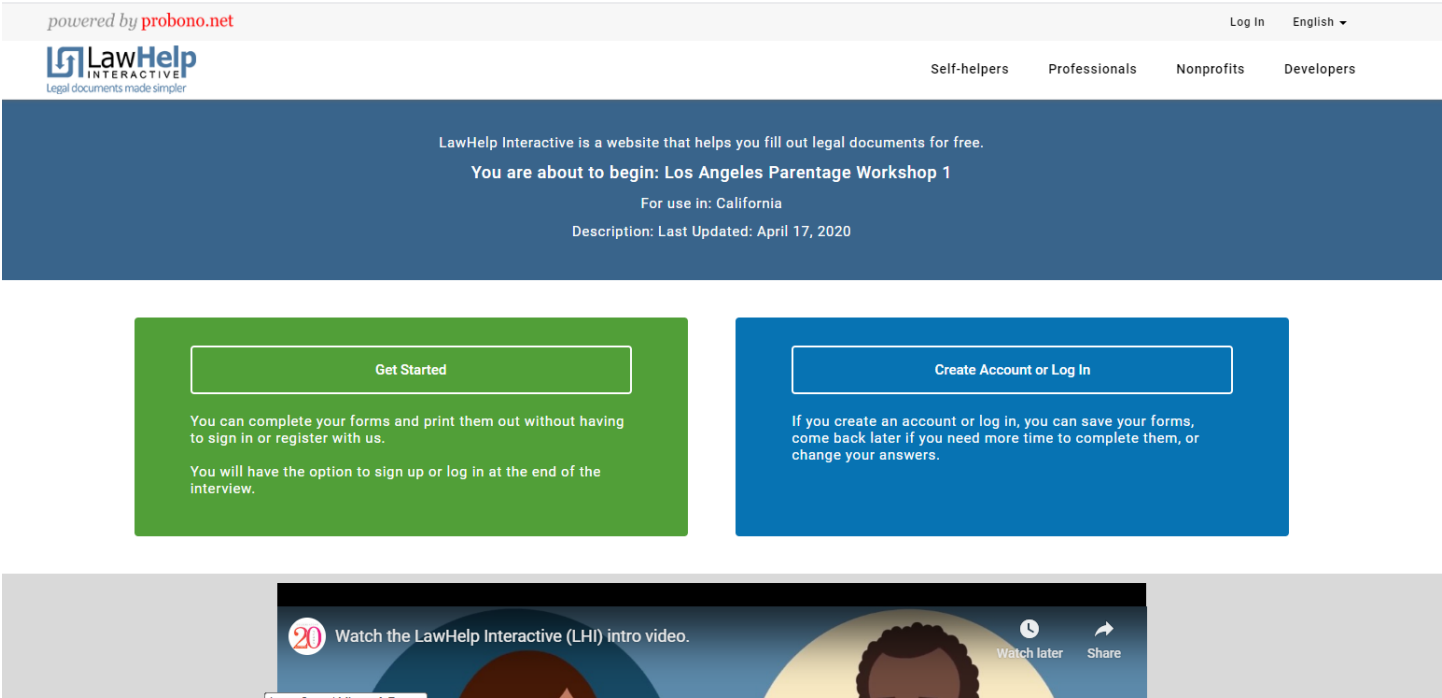


****THE FOLLOWING STEPS WILL BE THE SAME WHETHER YOU ARE FILING A PETITION OR RESPONSE****

STEP 6: You will see the following pop up, click on **OK** then click **START**



STEP 7: Click on **“Create Account or Log In”** (the blue button on the right)



NOT COURT FORMS – DO NOT FILE

STEP 8: Under Sign Up, put your state, first name, last name, email, create a username, password, click on a security questions, provide an answer, check of the box next to terms and conditions, and click on Create Account

*****Make sure you write down your username and password for future purposes*****

powered by **probono.net** Log In English ▾

LawHelp
INTERACTIVE
Legal documents made simpler

Self-helpers Professionals Nonprofits Developers

Log In ✕

* Username * Password **Submit**

[Forgot Password?](#)

Sign Up

* Select an Account Type ▾ Which type should I pick? * Select State ▾ * First Name * Last Name

* Email Address * Username * Password * Re-Type Password Password rules

* Select a Security Question ▾ * Answer

20 Watch the LawHelp Interactive (LHI) intro video. Watch later Share

STEP 9: Click on **“Get Started”**

powered by **probono.net** petspatcentral0120 Log Out English ▾

LawHelp
INTERACTIVE
Legal documents made simpler

My Answers Connect Account Information

LawHelp Interactive is a website that helps you fill out legal documents for free.

You are about to begin: Los Angeles Parentage Workshop 1

For use in: California

[Description:](#) Last Updated: April 17, 2020

Important! If your session is inactive for more than 2 hours, it will end. Be sure to save your answers and log out when you finish working.

Get Started ←

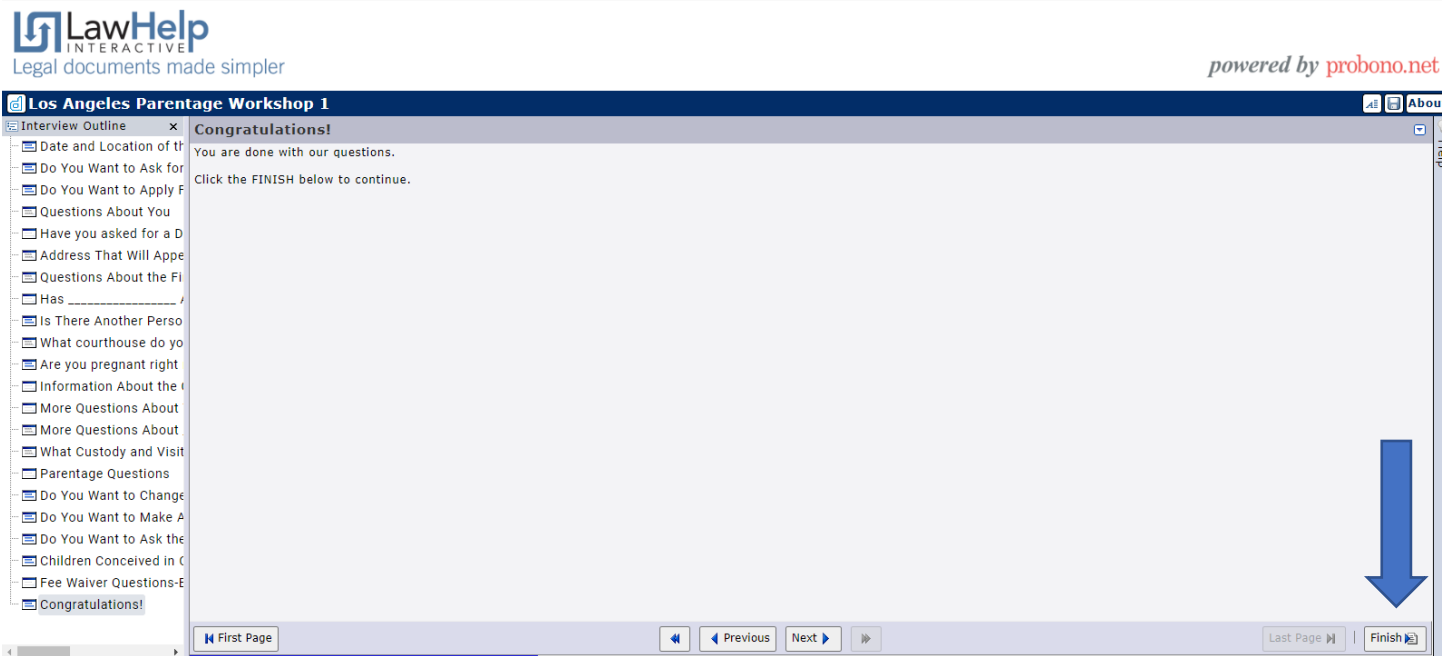
Saved Answers Shared Answers

You can use one of the answer files below to autofill the new form. Click the file name of the answers you want to use and the new form will open with as many answers prefilled as possible.

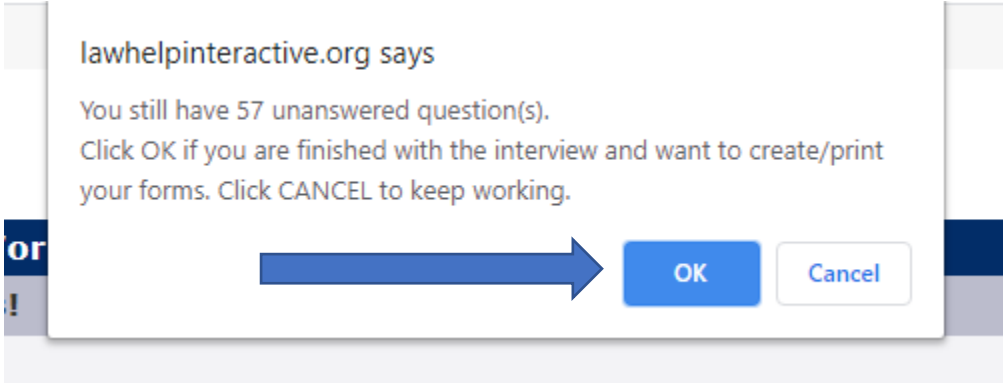
These are your saved answers. Select the file name you want to use to autofill the new form. The form will open and you can get started.

NOT COURT FORMS – DO NOT FILE

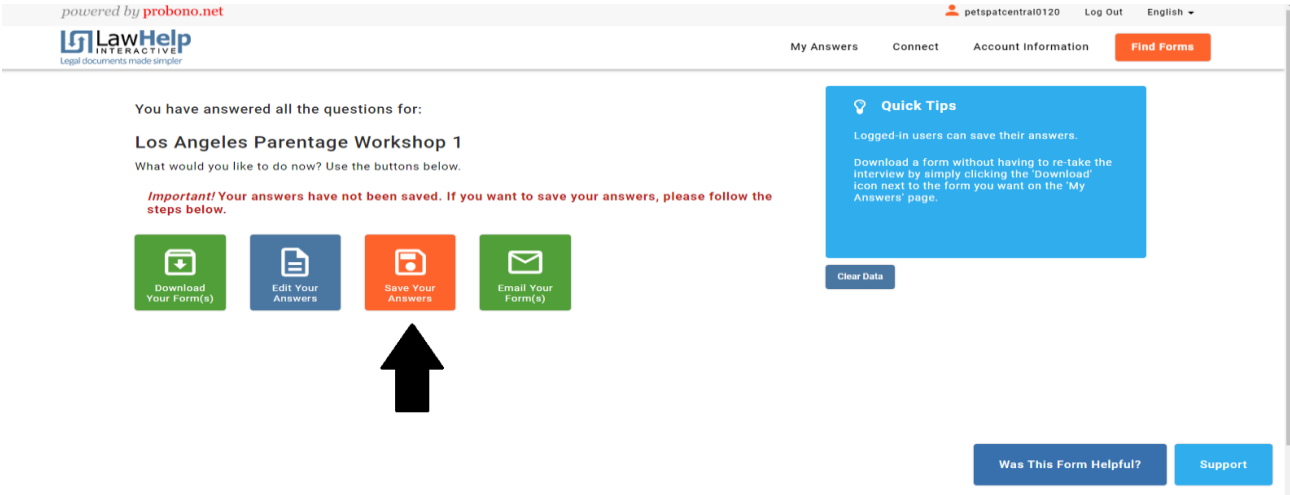
STEP 10: Using this completed ticket, answer all the questions until you reach the "Congratulations" tab, then click **FINISH** on the bottom right corner.



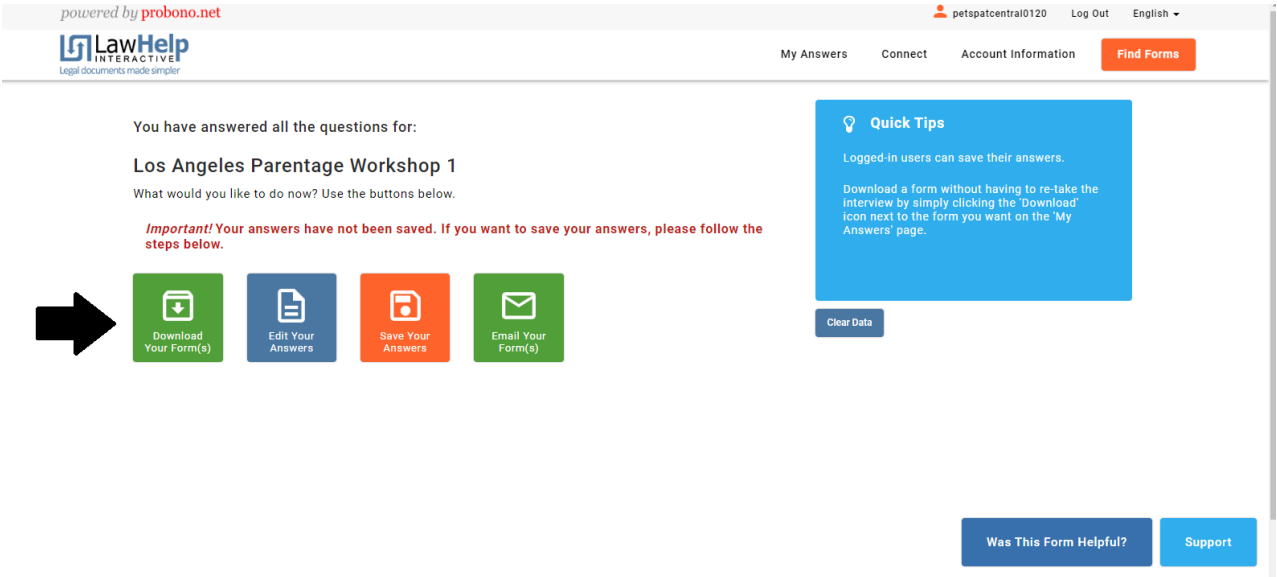
STEP 11: You will see a Pop up indicating that you have unanswered questions, DO NOT BE ALARMED, click **OK**



STEP 12: Click on **Save Your Answers**, insert first and last name on the top line then click Save Answers



STEP 13: Then click on **Download Your Forms**



STEP 14: Now that you have downloaded your forms, print and review them.

OPTION 2B:

SEARCH THE FORMS AT THE CALIFORNIA COURTS WEBSITE BY FORM NUMBER AS LISTED BELOW, FILL OUT AND PRINT.

CALIFORNIA COURT FORMS WEBSITE: <https://www.courts.ca.gov/forms.htm>

IF YOU ARE A **PETITIONER** (AND STARTING A NEW CASE), COMPLETE THE “FORMS FOR PARENTAGE PETITION” BELOW.

IF YOU ARE A **RESPONDENT** (AND RESPONDING TO A CASE THAT WAS ALREADY STARTED), COMPLETE THE “FORMS FOR PARENTAGE RESPONSE” BELOW.

*** For video instructions on how to fill out some of the Parentage forms, English only please search the following link: <https://www.courts.ca.gov/11298.htm?rdeLocaleAttr=en>

*****CONTINUE TO NEXT PAGE*****

FORMS FOR PARENTAGE PETITION

- FW-001 (Fee Waiver) (if applicable)
 - Signed by Petitioner on pg. 1

- FW-003 (Order on Court Fee Waiver) (if applicable)

- FL-210 (Summons)

- FAM 020 (Family Law Case Cover Sheet)
 - Signed by Petitioner on pg. 3

- FL-200 (Petition to Determine Parental Relationship) and Attachments
 - Signed by Petitioner on pg. 2
 - Copy of Birth Certificate or Voluntary Declaration of Paternity (if available)
 - FL-311 (Child Custody and Visitation Application) (if specific schedule)
 - Attach if needed: FL-312, FL-341a, FL-341b, FL-341c, FL-341d, FL-341e
 - Declaration if requesting supervised/no visitation (can use MC-031 for declaration)

- FL-105 (Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act)
 - Signed by Petitioner on pg. 2

- FL-150 (Income and Expense Declaration)
 - Signed by Petitioner on pg. 1
 - ***Attach a copy of your paystubs for the last two months***
 - AND/OR ***A recent profit and loss statement if you are self-employed or own any rental property***

- FL-115 (Proof of Service of Summons)
 - Signed by the third party that serves the other parent.

- Forms to be served on Respondent
 - Conformed (filed) copies of FL-210, FAM 020, FL-200 and any applicable attachments (FL-311, FL-312, FL-341a/b/c/d/e, declaration on MC-031), FL-105, FL-150
 - Set of Blank Response documents for Respondent's Copies: FL-220, FL-150, FL-335, FL-311, FL-105

FORMS FOR PARENTAGE RESPONSE

- FW-001 (Fee Waiver) (if applicable)
 - Signed by Respondent on pg. 1

- FW-003 (Order on Court Fee Waiver) (if applicable)

- FL-220 (Response to Petition to Establish Parental Relationship) and Attachments
 - Signed by Respondent on pg. 2
 - Copy of Birth Certificate or Voluntary Declaration of Paternity (if available)
 - FL-311 (Child Custody and Visitation Application)
 - Attach if needed: FL-312, FL-341a, FL-341b, FL-341c, FL-341d, fl-341e
 - Declaration if requesting supervised/no visitation (can use MC-031 for declaration)

- FL-105 (Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act)
 - Signed by Respondent on pg. 2

- FL-150 (Income and Expense Declaration)
 - Signed by Respondent on pg. 1
 - ***Attach a copy of your paystubs for the last two months***
 - AND/OR ***A recent profit and loss statement if you are self-employed or own any rental property***

- FL-335 (Proof of Service by mail)
 - Signed by third party mailing copies to the other parent

- 1 Manila Envelope addressed to Petitioner’s address on Summons. Return Address is Respondent’s.

- Forms to be served on Petitioner
 - Conformed (filed) or nonconformed (unfiled) copies of FL-220 and any applicable attachments (FL-311, FL-312, FL-341a/b/c/d/e, declaration on MC-031), FL-105, FL-150

OPTION 2C:

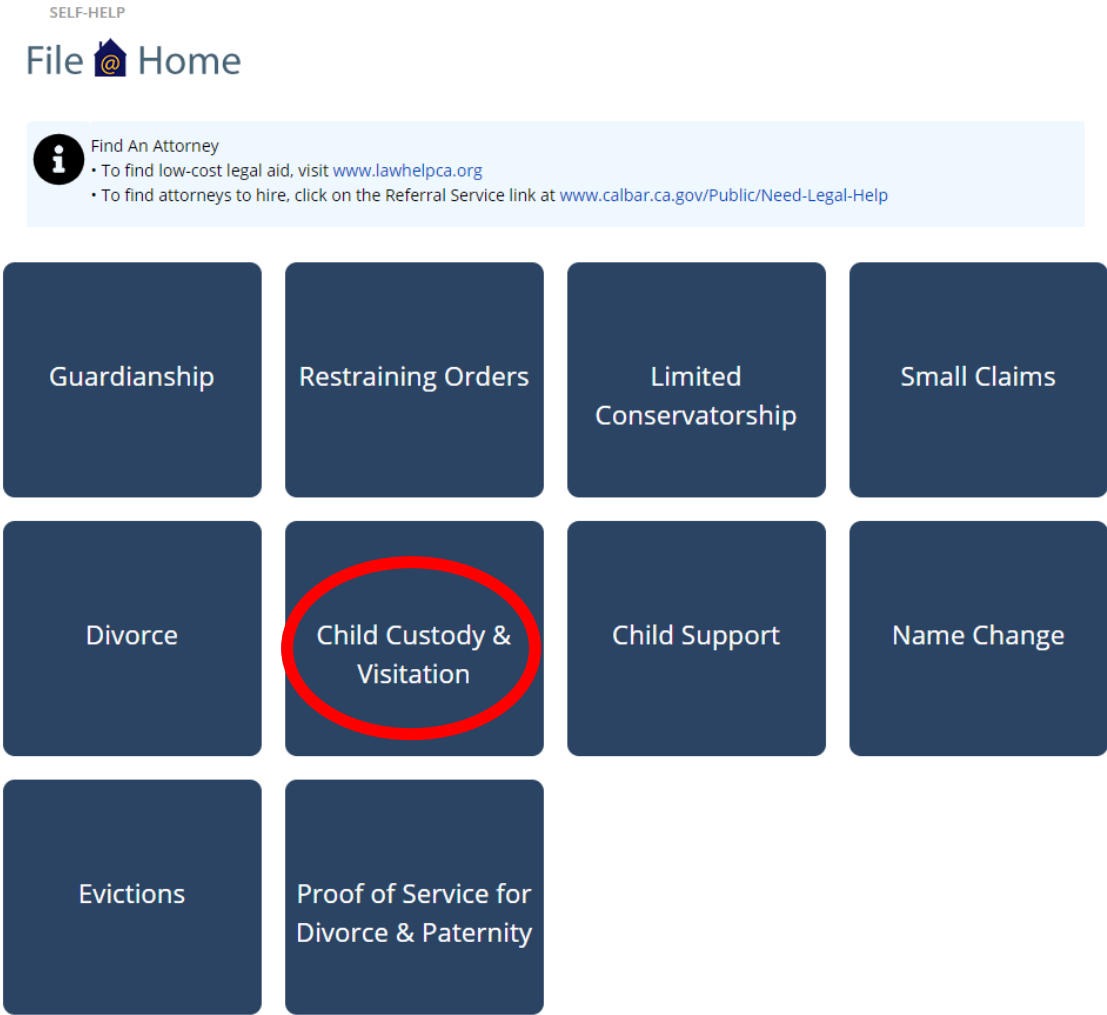
USE THE GUIDE AND FILE PROGRAM TO COMPLETE YOUR FORMS*

**available for Petitioners ONLY*

STEP 1: Go to www.lacourt.org, scroll down and look for the File at Home icon on the left hand side. Please note the program works best using the Google Chrome browser.



STEP 2: Click on the icon and you will see tiles. Click on the one that says "Child Custody & Visitation"



STEP 3: When you click on the tile, a new window will open. Click on the “Open Paternity Interview” tile.

Child Custody/Visitation



STEP 4: The program provides video instructions about how to use the interviews and generate documents. You may want to sign up to save your work.

