

PARTY WITHOUT ATTORNEY OR ATTORNEY <i>(name, state bar number, and address)</i> : NAME: _____ STATE BAR NO.: _____ FIRM NAME: _____ STREET ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____ TELEPHONE NO.: _____ FAX NO.: _____ E-MAIL ADDRESS: _____ 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>REQUEST FOR HEARING REGARDING REGISTRATION OF SUPPORT ORDER</b> <input type="checkbox"/> California Support Order <input type="checkbox"/> Out-of-State Support Order	CASE NUMBER: _____

**NOTICE OF HEARING**

1. A hearing on this application will be held as follows *(see instructions on how to get a hearing date)*:

a. Date:	Time:	Dept:	Div:	Room:
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b. The address of the court is  same as noted above     Other *(specify)*:

2. I request that service of the registration of support be vacated (canceled) because

- a.  I am not the Obligor named in the Letter of Transmittal Requesting Registration.
- b.  the court or tribunal that issued the order did not have personal jurisdiction over me.
- c.  the support order was obtained by fraud.
- d.  the support order has been vacated, suspended, or modified by a later order. *(Please attach a copy of the later order.)*
- e.  the order has been stayed pending appeal.
- f.  the amount of arrears in section 1 of the Letter of Transmittal Requesting Registration is incorrect. The correct amount of arrears is *(specify amount)*: \$ \_\_\_\_\_  Supporting documents attached.
- g.  some or all of the arrears are not enforceable.
- h.  Other *(specify)*:

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)
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PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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**CLERK'S CERTIFICATE OF MAILING**

I certify that I am not a party to this cause and that a true copy of the *Request for Hearing Regarding Registration of Support Order* was mailed first class, postage fully prepaid, in a sealed envelope addressed as shown below, and that the notice was mailed

at (*place*): \_\_\_\_\_, California,

on (*date*): \_\_\_\_\_

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

<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

**INFORMATION SHEET FOR REQUEST FOR HEARING  
REGARDING REGISTRATION OF CALIFORNIA SUPPORT ORDER/  
OUT-OF-STATE SUPPORT ORDER**

**(Do NOT deliver this Information Sheet to the court clerk.)**

Please follow these instructions to complete the *Request for Hearing Regarding Registration of Support Order* (form FL-575) if you do not have an attorney representing you. Your attorney, if you have one, should complete this form. You can get free help with this form from the family law facilitator in your county.

**This form should be used if you received a notice or statement of registration telling you that a support order is being registered in a California court but you do not want that support order registered. To request a hearing regarding an International Hague Convention Support Order, use form FL-594.**

You must file your completed request for hearing with the court clerk. You must also give the court clerk addressed envelopes with postage paid to mail copies of your request for hearing to the other parties. The address of the court clerk is the same as the one shown for the superior court on the notice or statement of registration you received. You may have to pay a filing fee to request a hearing. If you cannot afford to pay the filing fee, you must file an *Application for Waiver of Court Fees and Costs* (form FW-001). You can get this form from the court clerk, family law facilitator, or California Courts website at [www.courts.ca.gov](http://www.courts.ca.gov).

**INSTRUCTIONS FOR COMPLETING THE REQUEST FOR HEARING REGARDING REGISTRATION FORM (YOU CAN COMPLETE THE FORM ON A COMPUTER, BY TYPING, OR BY PRINTING IN INK):**

**Page 1, first box, top of form, left side:** Print your name, address, and phone number in this box.

**Page 1, second box, left side:** Print the name of your county and the court's address in this box. Use the same address for the court that is on the notice or statement of registration form you received.

**Page 1, third box, left side:** Print the names of Petitioner/Plaintiff, Respondent/Defendant, and Other Parent in this box. Use the same names as listed on the notice or statement of registration you received.

**Page 1, fourth box, left side:** Check the box by "California Support Order" if the order being registered was established in California, or check the box by "Out-of-State Order" if the order being registered was **NOT** established in California.

**Page 1, first box, top of form, right side:** Leave this box blank for the court's use.

**Page 1, second box, right side:** Print your case number in this box. This number is also shown on the notice or statement of registration you received.

1. Before you file your request for hearing with the court clerk you must ask the court clerk to set a hearing date for you. The court clerk will give you the information you need to complete this section.
2. In this section you are telling the court why you do not want the support order to be registered. You must check the box by your reason.
  - a. Check this box if you are not a person named in the notice or statement of registration you received.
  - b. You should check this box if the court that issued the support order did not have jurisdiction over you to issue the order. You may need legal advice to find out if this is a valid reason in your case.
  - c. Check this box if your support order was obtained by fraud. You may need legal advice to find out if this is a valid reason in your case.
  - d. You should check this box if a court has suspended or vacated your support order. You should also check this box if your support order was modified by a later order. **If the order was modified, you must attach a copy of your most recent support order to your request for hearing.**
  - e. Check this box if you have already filed an appeal to your support order and a court has stopped the order until the appeal is decided.

**Information Sheet for Request for Hearing Regarding Registration of  
Support Order (continued)**

2. f. You should check this box if you disagree with the amount of arrearage shown on the registration statement. You must write in the correct amount of the arrearage in the space provided.
- g. Check this box only if your support order was made by a court outside California and cannot be enforced due to the statute of limitations in that jurisdiction.
- h. Check this box if you have another reason to object to the registration of the support order.

You must date the form, print your name, and sign the form under penalty of perjury. When you sign the form, you are stating that the information you have provided is true and correct.

**Page 2, box on left side:** Print the names of Petitioner/Plaintiff, Respondent/Defendant, and Other Parent in this box. Use the same names as on the front page.

**Page 2, box on right side:** Print your case number in this box. Use the same number as on the front page.

The court clerk will sign and date the request for hearing form before mailing it to the Petitioner/ Plaintiff, Respondent/Defendant, and Other Parent.

You must print the name and address of the Petitioner/Plaintiff, Respondent/Defendant, and Other Parent in the brackets. The names are the same as those at the top of the page. You also must provide the court clerk with stamped envelopes addressed to each of the other parties.

If you need assistance with this form, contact an attorney or the family law facilitator in your county.