MADERA COUNTY SUPERIOR COURT STATE OF CALIFORNIA

ORDER TO SHOW CAUSE AND AFFIDAVIT FOR CONTEMPT PACKET

The purpose of this packet is to ask the Court for a hearing date to request that the other party be found in contempt of a court order. It is not to modify or ask for a court order. A contempt proceeding is criminal in nature. If the court finds the other party in contempt the court could impose possible penalties that include jail, community service and/or fines.

Inside this packet you will find the following forms: FL-410 Order to Show Cause and Affidavit for Contempt, FL-411 Affidavit of Facts Constitution Contempt (Financial and Injunctive Orders), FL-412 Affidavit of Facts Constituting Contempt (Domestic Violence/Custody and Visitation). Locate your old documents for your case and follow the information as to who is listed on those forms ex: if you are listed as the Respondent then you will remain as the Respondent. The Petitioner and Respondent never change; the Petitioner is the person who started the case in the beginning and will remain as the petitioner.

Pursuant to Rule 5.1.40 of the local Rules of Court: Any party electing to proceed on a criminal contempt in a Family Law Case not arising from child support or domestic violence, must list each violation with a number indicating the count, specify which order was violated, how the order was violated and when the order was violated. (Effective 7/1/19)

1. Fill out your forms

Carefully read pages 3 and 4 on FL-410 *Order to Show Cause and Affidavit for Contempt* before completing your forms.

2. You will need copies

Once your forms are completed you will need at least 2 copies of FL-410 *Order to Show Cause and Affidavit for Contempt* and any attachments you are including such as FL-411 or FL-412. One copy will be for you; another copy will be for the other party. The original is for the court.

3. File your forms with the court clerk

Take your forms to the Civil Division (located on the 4th Floor). Once the judge signs your papers, the clerk will keep the original and return the copies to you file stamped with a hearing date. You will have to pay a filing fee. If you cannot afford the fee, you can ask for a fee waiver.

4. Serve your papers on the other parent

Have someone (NOT you) serve the other party with a copy of your papers before your court date. Generally, your papers **MUST** be served **in person at least 16 court days before your court date**.

5. File your Proof of Service

Have your server fill out a proof of service (you can use *Proof of Personal Service* form FL-330) and give it to you so you can file it with the court. It is very important that your server fills out the Proof of Service correctly. If possible, have your family law facilitator/self-help center review it to make sure it was filled out properly.

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ATTORNEY OR PARTY WITHOUT ATTORNEY (name, State Bar number, and address):		FOR COURT USE ONLY
TELEPHONE NO.: FAX NO. (optional):		
E-MAIL ADDRESS (optional):		
ATTORNEY FOR (name): In Pro Per		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF MADERA STREET ADDRESS: 200 South G Street		
MAILING ADDRESS: Same		
city and zip code: Madera, CA 93637		
BRANCH NAME: Civil Division		
PETITIONER/PLAINTIFF:		
RESPONDENT/DEFENDANT:		
OTHER PARTY/PARENT:		
ORDER TO SHOW CAUSE AND		CASE NUMBER:
AFFIDAVIT FOR CONTEMPT		
NOTICE!		¡AVISO!
A contempt proceeding is criminal in nature. If the court finds you in		lesacato es de índole criminal. Si la corte le
contempt, the possible penalties include jail sentence, community		ato, las sanciones posibles incluyen penas
service, and fine.	de prisión y de servicio a	ia comunidad, y muitas.
You are entitled to the services of an attorney, who should be	Usted tiene derecho a los	s servicios de un abogado, a quien debe
consulted promptly in order to assist you. If you cannot afford an	-	ra obtener ayuda. Si no puede pagar a un
attorney, the court may appoint an attorney to represent you.	=	nombrar a un abogado para que le
1. TO CITEE (name of names you allow here violated the and well)	represente.	
1. TO CITEE (name of person you allege has violated the orders):		
2. YOU ARE ORDERED TO APPEAR IN THIS COURT AS FOLLOW	NS TO GIVE ANY LEGA	REASON WHY THIS COURT
SHOULD NOT FIND YOU GUILTY OF CONTEMPT, PUNISH YO		
FORTH IN THE AFFIDAVIT BELOW AND ANY ATTACHED AFF		
REQUIRE YOU TO PAY, FOR THE BENEFIT OF THE MOVING		•
PROCEEDING.	, -	
a. Date: Time:	Dept.:	Rm.:
b. Address of court: same as noted above other (spe	oifu):	
b. Address of court: same as noted above other (spe	city).	
Date:		
24.0.		JUDICIAL OFFICER
AFFIDAVIT SUPPORTING ORDER	TO SHOW CAUSE FO	R CONTEMPT
3. An Affidavit of Facts Constituting Contempt (form FL-411 or	FL-412) is attached.	
4. Citee has willfully disobeyed certain orders of this court as set for	rth in this affidavit and any	attached affidavits.
5. a. Citee had knowledge of the order in that		
(1) citee was present in court at the time the order was m	nade.	
(2) citee was served with a copy of the order.		
(3) citee signed a stipulation upon which the order was b	ased.	
(4) other (specify):		
Continued on Attachment 5a(4).		
b. Citee was able to comply with each order when it was disobey	red	
Based on the instances of disobedience described in this affidavi		
a. I have not previously filed a request with the court that the		rt.
b. I have previously filed a request with the court that the cit		
	1 - (-)	- /
Continued on Attachment 6b.		

PETITIONER/PLAINTIFF:	CASE NUMBER:		
RESPONDENT/DEFENDANT:			
OTHER PARTY/PARENT:			
7. Citee has previously been found in contempt of a court order (specify case, court, date):			
 Continued on Attachment 7. Each order disobeyed and each instance of disobedience is described as follows: a. Orders for child support, spousal support, family support, attorney fees, and cour attached Affidavit of Facts Constituting Contempt (form FL-411)) b. Domestic violence restraining orders and child custody and visitation orders (see Constituting Contempt (form FL-412)) c. Injunctive or other order (specify which order was violated, how the order was violated): 	attached Affidavit of Facts		
Continued on Attachment 8c. d. Other material facts, including facts indicating that the violation of the orders was (specify):	s without justification or excuse		
Continued on Attachment 8d. e. I am requesting that attorney fees and costs be awarded to me for the costs of processing to the costs of processing that attorney fees and costs be awarded to me for the costs of processing that attorney fees and costs be awarded to me for the costs of processing the costs of processi	ursuing this contempt action. (A		
WARNING: IF YOU PURSUE THIS CONTEMPT ACTION, IT MAY AFFECT THE A ATTORNEY TO PROSECUTE THE CITEE CRIMINALLY FOR THE SAME VIOLAT			
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)		

INFORMATION SHEET FOR ORDER TO SHOW CAUSE AND AFFIDAVIT FOR CONTEMPT

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

Please follow these instructions to complete the *Order to Show Cause and Affidavit for Contempt* (form FL-410) if you do not have an attorney to represent you. Your attorney, if you have one, should complete this form, as well as the *Affidavit of Facts Constituting Contempt* (form FL-411). You may wish to consult an attorney for assistance. Contempt actions are very difficult to prove. An attorney may be appointed for the citee.

INSTRUCTIONS FOR COMPLETING THE ORDER TO SHOW CAUSE AND AFFIDAVIT FOR CONTEMPT (TYPE OR PRINT FORM IN INK):

If the top section of the form has already been filled out, skip down to number 1 below. If the top section of the form is blank, you must provide this information.

<u>Front page, first box, top of form, left side:</u> Print your name, address, telephone number, and fax number, if any, in this box. If you have a restraining order and wish to keep your address confidential, you may use any address where you can receive mail. **You can be legally served court papers at this address.**

<u>Front page</u>, <u>second box</u>, left side: Print the name of the county where the court is located and insert the address and any branch name of the court building where you are seeking to obtain a contempt order. You may get this information from the court clerk. This should be the same court in which the original order was issued.

<u>Front page, third box, left side</u>: Print the names of the Petitioner, Respondent, and Other Party/Parent (if any) in this box. Use the same names as appear on the most recent court order disobeyed.

Front page, first box, top of form, right side: Leave this box blank for the court's use.

<u>Front page, second box, right side:</u> Print the court case number in this box. This number is also shown on the most recent court order disobeyed.

- Item 1: Insert the name of the party who disobeyed the order ("the citee").
- <u>Item 2:</u> The court clerk will provide the hearing date and location.
- <u>Item 3:</u> Either check the box in item 3 and attach an *Affidavit of Facts Constituting Contempt* (form FL-411 for financial orders or form FL-412 for domestic violence, or custody and visitation orders), or leave the box in item 3 blank but check and complete item 8.
- Item 5: Check the box that describes how the citee knew about the order that has been disobeyed.
- <u>Item 6:</u> a. Check this box if you have not previously applied for a contempt order.
 - b. Check this box if you have previously applied for a contempt order and briefly explain when you requested the order and results of your request. If you need more space, check the box that says "continued on Attachment 6b" and attach a separate sheet to this order to show cause.
- Item 7: Check this box if the citee has previously been found in contempt by a court of law. Briefly explain when the citee was found in contempt and for what. If there is not enough space to write all the facts, check the box that says "continued on Attachment 7" and attach a separate sheet to this order to show cause.
- <u>Item 8:</u> a. Check this box if the citee has disobeyed orders for child support, custody, visitation, spousal support, family support, attorney fees, and court or litigation costs. Refer to item 1a on *Affidavit of Facts Constituting Contempt* (form FL-411).
 - b. Check this box if the citee has disobeyed domestic violence orders or child custody and visitation orders. Refer to *Affidavit of Facts Constituting Contempt* (form FL-412).



Information Sheet (continued)

- Item 8: c. If you are completing this item, use facts personally known to you or known to the best of your knowledge. State the facts in detail. If there is not enough space to write all the facts, check the box that says "continued on Attachment 8c" and attach a separate sheet to this order to show cause, including facts indicating that the violation of the orders was without justification or excuse.
 - d. Use this item to write other facts that are important to this order. If you are completing this item, insert facts personally known to you, or known to the best of your knowledge. State facts in detail. If there is not enough space to write all the facts, check the box that says "Continued on Attachment 8d" and attach a separate sheet to the order to show cause.
 - e. If you request attorney fees and/or costs for pursuing this contempt action, check this box. Attach a copy of your *Income and Expense Declaration* (form FL-150).

Type or print and sign your name at the bottom of page 2.

If you checked the boxes in item 3 and item 8a or 8b, complete the appropriate *Affidavit of Facts Constituting Contempt* (form FL-411), following the instructions for the affidavit above.

Make at least three copies of the *Order to Show Cause and Affidavit for Contempt* (form FL-410) and any supporting *Affidavit of Facts Constituting Contempt* (form FL-411 or FL-412) and the *Income and Expense Declaration* (form FL-150) for the court clerk, the citee, and yourself. If the district attorney or local child support agency is involved in your case, you must provide a copy to the district attorney or local child support agency.

Take the completed form(s) to the court clerk's office. The clerk will provide hearing date and location in item 2, obtain the judicial officer's signature, file the originals, and return the copies to you.

Have someone who is at least 18 years of age, who is not a party, serve the order and any attached papers on the disobedient party. For example, a process server or someone you know may serve the papers. **You may not serve the papers yourself. Service must be personal; service by mail is insufficient.** The papers must be served at least 16 court days before the hearing. The person serving papers must complete a *Proof of Personal Service* (form FL-330) and give the original to you. Keep a copy for yourself and file the original *Proof of Personal Service* (form FL-330) with the court.

If you need assistance with these forms, contact an attorney or the Family Law Facilitator in your county.



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PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	ONCE NOMBER.
OTHER PARENT/PARTY:	

AFFIDAVIT OF FACTS CONSTITUTING CONTEMPT Financial and Injunctive Orders Attachment to Order to Show Cause and Affidavit for Contempt (form FL-410)

1. Orders for child support, spousal support, family support, attorney fees, and court and litigation costs (separately itemize each default on installment payments):

acraan on m	otammont paymontoj:				
DATE DUE	TYPE OF ORDER AND DATE FILED	PAYABLE TO	AMOUNT ORDERED	AMOUNT PAID	AMOUNT DUE
Contin	ued on Attachment 1.		TOTAL AMOUNT	TOTAL AMOUNT	TOTAL AMOUNT
	contempt counts alleged (including a	all attachments):	ORDERED	PAID	DUE
Child sup					
Spousal Family si	upport:				
Attorney Court an	fees: d other costs:				
Total			\$	\$	\$
2. Other	orders (specify which order was viola	nted, how the order was violated	l, and when the v	iolation occurred):	
				Continued on A	Attachment 2
3. Other	material facts (specify):				Attacriment 2.
				Continued on	Attachment 2
I declare under r	penalty of perjury under the laws of th	ne State of California that the fo	regoing is true an		Attachment 3.
Date:	serious or porjury arraor and laws of a	. 2 2 3 4 5 5 Gamorina and are the following			
		<u> </u>			
	(TYPE OR PRINT NAME)			(SIGNATURE)	

PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	
OTHER PARENT:	

	AFFIDAVIT OF FACTS CONSTITUTING CONTEMPT Domestic Violence/Custody and Visitation Attachment to Order to Show Cause and Affidavit for Contempt (form FL-410)		
1.		The Citee has violated the restraining order issued on (date): harassing, attacking, striking, threatening, sexually assaulting, battering, telephoning, stalking, destroying the personal property of, disturbing the peace of, keeping under supublic places and thoroughfares of me or any other person protected by the restraining violated, how the order was violated, and when the violation occurred):	by contacting, molesting, sending any messages to, following, irveillance, or blocking movements in
			Continued on Attachment 1.
2.		The Citee has violated the restraining order issued on (date): staying away from the residence as ordered by the court. (Specify how the order was v occurred):	by not moving from and iolated and when the violation
			Continued on Attachment 2.
3.		The Citee has violated the restraining order issued on (date): (specify): yards away from me, the other protected persons, my reschool or place of child care, my vehicle, or other (specify): (Specify which order was violated, how the order was violated, and when the violation	
			Continued on Attachment 3.
4.		The Citee has violated the restraining order issued on (date): or her firearm(s) as ordered by the court. (Specify which order was violated, how the or violation occurred):	by not relinquishing his rder was violated, and when the
			Continued on Attachment 4.
5.		The Citee has violated the restraining order issued on (date): court-ordered batterer's treatment/anger management class (specify how the order was	by failure to complete s violated):
			Continued on Attachment 5.
6.		The Citee has violated order issued on (date): visitation order (specify which order was violated, how the order was violated, and whe	by violating the following custody or n the violation occurred):
			Continued on Attachment 6.
7.		The Citee has violated the order issued on (date): order was violated and how the order was violated):	by violating other orders (specify which
_	leclar ate:	e under penalty of perjury under the laws of the State of California that the foregoing is t	Continued on Attachment 7. rue and correct.
_		(TYPE OR PRINT NAME)	(SIGNATURE)

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SHORT TITLE:		CASE NUMBER:
_		
	ATTAQUINENT (Alonghan)	

ATTACHMENT (Number): _____ (This Attachment may be used with any Judicial Council form.)

(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)

Page ____ of ____ (Add pages as required)



INFORMATION SHEET FOR PROOF OF PERSONAL SERVICE

Use these instructions to complete the *Proof of Personal Service* (form FL-330).

A person at least 18 years of age or older must serve the documents. There are two ways to serve documents: (1) personal delivery and (2) by mail. See the *Proof of Service by Mail* (form FL-335) if the documents are being served by mail. The person who serves the documents must complete a proof of service form for the documents being served. **You cannot serve documents if you are a party to the action.**

INSTRUCTIONS FOR THE PERSON WHO SERVES THE DOCUMENTS (TYPE OR PRINT IN BLACK INK)

You must complete a proof of service for each package of documents you serve. For example, if you serve the respondent and the other parent, you must complete two proofs of service; one for the respondent and one for the other parent.

Complete the top section of the proof of service forms as follows:

First box, left side: In this box print the name, address, and phone number of the person for whom you are serving the documents.

Second box, **left side:** Print the name of the county in which the legal action is filed and the court's address in this box. Use the same address for the court that is on the documents you are serving.

Third box, left side: Print the names of the petitioner/plaintiff, respondent/defendant, and other parent in this box. Use the same names listed on the documents you are serving.

First box, top of form, right side: Leave this box blank for the court's use.

Second box, right side: Print the case number in this box. This number is also stated on the documents you are serving. **Third box, right side:** Print the hearing date, time, and department. Use the same information that is on the documents you are serving.

- 1. You are stating that you are over the age of 18 and that you are neither a party of this action nor a protected person listed in any of the orders.
- 2. Print the name of the party to whom you handed the documents.
- 3. List the name of each document that you delivered to the party.
- . a. Write in the date that you delivered the documents to the party.
 - b. Write in the time of day that you delivered the documents to the party.
 - c. Print the address where you delivered the documents.
- Check the box that applies to you. If you are a private person serving the documents for a party, check box "a."
- 6. Print your name, address, and telephone number. If applicable, include the county in which you are registered as a process server and your registration number.
- 7. You must check this box if you are not a California sheriff or marshal. You are stating under penalty of perjury that the information you have provided is true and correct.
- 8. Do not check this box unless you are a California sheriff or marshal.

Print your name, fill in the date, and sign the form.

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



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ATTORNEY OR PARTY WITHOUT ATTORNEY OR GOVERNMENTAL AGENCY (under Family Code, §§ 17400, 17406) (Name, State Bar number, and address).	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO.:	
ATTORNEY FOR (Name): In Pro Per	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF MADERA	
STREET ADDRESS: 200 South G Street MAILING ADDRESS: SAME	
city and zip code: Madera, CA 93637	
BRANCH NAME: Civil Division	
PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	
	(If applicable, provide): HEARING DATE:
OTHER PARENT/PARTY:	HEARING TIME:
PROOF OF PERSONAL SERVICE	DEPT.:
d. Laws at least 40 years and make a substitute this station and the station a	and of the condens
 I am at least 18 years old, not a party to this action, and not a protected person listed in a Person served (name): 	iny of the orders.
3. I served copies of the following documents (specify):	
 4. By personally delivering copies to the person served, as follows: a. Date: b. Time: c. Address: 	
5. I am a. not a registered California process server. b. a registered California process server. c. an employee or independent contractor of a registered California process server. c. an employee or independent contractor of a registered California process server.	
6. My name, address, and telephone number, and, if applicable, county of registration and n	number (specify):
7. I declare under penalty of perjury under the laws of the State of California that the for a lam a California sheriff or marshal and I certify that the foregoing is true and correct. Date:	
(TYPE OR PRINT NAME OF PERSON WHO SERVED THE PAPERS) (SIGNAT	TURE OF PERSON WHO SERVED THE PAPERS)

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