

SAMPLE FORMS 2022

1. SC-100 Plaintiff's Claim:	
• Individual v. Individual Page 2 through Page 4-----	6
• Individual v. LLC-----	9
• DBA v. Individual-----	10
i. SC-103 Fictitious Business Name-----	11
• Individual v. DBA-----	12
• Individual v. Corporation-----	13
• Individual v. State of CA (Public Entity)-----	14
• Individual v. County of LA (Public Entity)-----	15
• Individual v. City of LA (Public Entity)-----	16
i. List of Public Entities-----	17
• Auto Accident-----	18
i. Auto Accident SC-100A-----	19
• Individual v. Minor-----	20
• Individual v. Partnership-----	21
• Individual v. Trust-----	22
• Individual v. Homeowners Association/Request for Record-----	23
• Individual v. Registrar of the CSLB SC-100-----	24
i. SC-100a Individual v. Contractor-----	25
ii. Naming the Registrar as a Defendant, Info Sheet-----	26
• Incompetent v. Individual-----	27
• Deceased v. Caltrans (State of CA Dept. of Transportation)-----	28
2. FW-001-Request to Waive Court Fees:	
• 5a) Receives Financial Assistance Mentioned (only do page 1)-----	29
• 5b) Monthly Gross Income is Equal/Less Than the Amounts Listed:	
i. Page 1 of 2-----	30
ii. Page 2 of 2 (only do #7-9)-----	31
• 5c) Does NOT Qualifying with 5a or 5b, but Needs a Waiver:	
i. Page 1 of 2-----	32
ii. Page 2 of 2 (do the entire page)-----	33
3. FW-003-Order on Court Fee Waiver-----	34
4. SC-120 Defendants Claim-----	35
5. SC-120a Other Plaintiffs or Defendants-----	37
6. SC-500 - Plaintiff Claim (COVID-19 Rental Debt)-----	38
• SC-500A Other Plaintiffs or Defendants-----	41
• SC-500 Info Sheet-----	42
7. SC-109 Authorization to Appear-----	45
8. SCLA-010-Request for Certified Mail-----	46
9. SC-101-Attorney Fee Dispute-----	47
10. CIV-010-Application and Order for Appointment of Guardian Ad Litem:	
• Applicant is Parent for Minor Child	

SAMPLE FORMS 2022

i. Page 1 of 2-----	48
ii. Page 2 of 2-----	49
• Applicant is Minor 14 Years of Age or Older	
i. Page 1 of 2-----	50
ii. Page 2 of 2-----	51
• Applicant is Interested Person for Incompetent Person	
i. Page 1 of 2-----	52
ii. Page 2 of 2-----	53
11. MC-005-Facsimile Transmission Cover Sheet-----	54
12. MC-410-Request for Accommodations by Persons with Disabilities-----	55
13. SCLA-014-Application and Order for Transfer-----	56
14. SC-104-Proof of Service:	
• Personal Service	
i. Page 1 of 2-----	57
ii. Page 2 of 2-----	58
• Substituted Service	
i. Page 1 of 2-----	59
ii. Page 2 of 2-----	60
• DBA Sample	
i. Page 1 of 2-----	61
ii. Page 2 of 2-----	62
15. SC-104B What is "Proof of Service"-----	63
16. SC-104C How to Serve a Business or Public Entity-----	65
17. SC-112A-Proof of Service by Mail-----	67
• Instruction Sheet-----	68
18. CIV-110-Request for Dismissal:	
• Page 1 of 2-----	69
• Page 2 of 2-----	70
19. SC-150-Request to Postpone Trial-----	71
• SC-150-Instruction Sheet-----	72
20. MC-030-Declaration-----	73
21. MC-040-Notice of Change of Address or Other Contact Information:	
• Page 1 of 2-----	74
• Page 2 of 2-----	75
22. LACIV-015-Affidavit of Prejudice Peremptory Challenge to Judicial Officer-----	76
23. Military Members-Request for Stay of Legal Proceedings-----	77
24. VL-110-Request to File New Litigation by Vexatious Litigant-----	78
25. SC-108-Request to Correct or Cancel Judgement and Answer:	
• Clerical Error	
i. Request-----	79
ii. Answer-----	80

SAMPLE FORMS 2022

- Legal Error
 - i. Request-----81
 - ii. Answer-----82
- 26. SC-105-Request for Court Order and Answer:
 - Motion for Reconsideration
 - i. Request-----83
 - ii. Answer-----84
 - Motion to Vacate Dismissal-----85
 - Motion for Clarification-----86
 - Motion to Amend Name (Individual)-----87
 - Motion to Amend Name (Corporations)-----88
 - Motion to Amend Name (DBA)-----89
 - Motion for an Assignment Order of Rents-----90
 - Motion for an Assignment Order for Commission-----91
 - Motion to Modify Judgement Resulting from Auto Accident-----92
 - Motion to Garnish Non-Debtor Spouse’s Wages-----93
 - Motion to Serve through Secretary of State-----94
 - Motion Court Retains Jurisdiction After Mediation-----95
- 27. SC-140-Notice of Filing Notice of Appeal-----96
- 28. LACIV-037-Application & Order to Withdraw Exhibits-----97
- 29. SC-135-Notice of Motion to Vacate (Cancel) Judgement-----98
- 30. EJ-125-Application and Order for Appearance and Examination (Debtor):
 - Page 1 of 2-----99
 - Page 2 of 2-----100
- 31. EJ-125-Application and Order for Appearance and Examination (Third Party):
 - Page 1 of 2-----101
 - Page 2 of 2-----102
- 32. LACIV-057-Affidavit for Appearance & Examination of a 3rd Person-----103
- 33. SC-134-Order to Produce Statement of Assets and to Appear for Examination:
 - SC-134 for an Individual-----104
 - SC-134 for a Business-----105
- 34. SC-107-Small Claims Subpoena and Declaration:
 - Judgment Debtor, Order to Appear in Person
 - i. Page 1 of 3-----106
 - ii. Page 2 of 3-----107
 - iii. Page 3 of 3-----108
 - Custodian of Records, Not Required to Appear in Person
 - i. Page 1 of 3-----109
 - ii. Page 2 of 3-----110
 - iii. Page 3 of 3-----111
- 35. SUBP-025-Notice to Consumer or Employee and Objection:

SAMPLE FORMS 2022

• Page 1 of 2-----	112
• Proof of Service for Consumer Page 2 of 2-----	113
• Proof of Service for Third Party Page 2 of 2-----	114
36. EJ-185-Notice of Lien-----	115
37. SC-145-Request to Pay Judgment to Court-----	116
38. SC-220-Request to Make Payments-----	117
• Instruction Sheet-----	118
39. EJ-165-Financial Statement:	
• Page 1 of 2-----	119
• Page 2 of 2-----	120
40. SC-221-Response to Request to Make Payments-----	121
41. SC-223-Declaration of Default in Payment of Judgement-----	122
• Information Sheet-----	123
• How to Calculate Interest Instruction Sheet-----	124
42. SC-224-Response to Declaration of Default in Payment of Judgment-----	125
• Information Sheet-----	126
43. EJ-001 Abstract of Judgment-----	127
44. EJ-130-Writ of Execution-----	128
45. EJ-130-Writ of Execution with Part of Attachment 20:	
• Page 1 of 2-----	129
• Page 2 of 2-----	130
• LACIV-101-Writ of Execution-Attachment 20-----	131
46. LACIV-106-Application & Order Regarding Lost Writ:	
• Litigant Lost Their Writ-----	132
• Levying Officer/Sheriff Lost The Writ-----	133
47. MC-012-Memorandum of Costs After Judgment	
• Page 1 of 2-----	134
• Page 2 of 2-----	135
• Information Sheet Page 1 of 2-----	136
• Information Sheet Page 2 of 2-----	137
48. WG-001-App. for Earnings Withholding Order (Wage Garnishment)-----	138
49. EJ-160-Claim of Exemption (Enforcement of Judgment)-----	139
50. WG-006-Claim of Exemption (Wage Garnishment)-----	140
51. EJ-155-Exemptions from the Enforcement of Judgments:	
• Page 1 of 2-----	141
• Page 2 of 2-----	142
52. EJ-156 Current Dollar Amount of Exemptions from Enforcement:	
• Page 1 of 2-----	143
• Page 2 of 2-----	144
53. EJ-170-Notice of Opposition to Claim of Exemption	
• Enforcement of Judgment-----	145

SAMPLE FORMS 2022

54. WG-009-Notice of Opposition to Claim of Exemption	
• Wage Garnishment-----	146
55. EJ-175-Notice of Hearing on Claim of Exemption:	
• Page 1 of 2-----	147
• Page 2 of 2-----	148
56. EJ-190-Application for and Renewal of Judgment:	
• Page 1 of 2-----	149
• Page 2 of 2-----	150
57. EJ-195-Notice of Renewal of Judgment-----	151
58. EJ-100-Acknowledgment of Satisfaction of Judgment-----	152
59. SC-290-Acknowledgment of Satisfaction of Judgment, Small Claims-----	153
• Instruction Sheet-----	154
60. SCLA-003-Declaration of Debtor Regarding Satisfaction of Judgment-----	155
61. LACIV-040-Clerk’s Certificate of Entry of Satisfaction of Judgment-----	156
62. DL-30-Certificate of Facts RE Unsatisfied Judgment-----	157
• Instruction Sheet-----	158
63. DL-17-Notice of Unsatisfied Judgment of \$750 or Less-----	159
• Instruction Sheet-----	160
64. Government Claim-Judicial Branch:	
• Page 1 of 2-----	161
• Page 2 of 2-----	162
65. Complaint about a California Judge, Court Commissioner or Referee-----	163
66. Sheriff Instruction Sheets (these are NOT court forms, provided by Sheriff):	
• Los Angeles County Sheriff Instruction Sheet-----	164
• Sacramento County Sheriff Instruction Sheet-----	165
67. EJ-105 Application for Entry of Judgment on Sister-State Judgment:	
• Page 1 of 2-----	166
• Page 2 of 2-----	167
68. EJ-110 Notice of Entry of Judgment on Sister-State Judgment	
• Page 1 of 2-----	168
• Page 2 of 2-----	169

SPANISH TRANSLATED FORMS

• SC 100 Plaintiff’s Claim.....	170
• FW 001 Fee Waiver.....	173
• SC 150 Request to Postpone.....	175
• SC 135 Motion to Vacate.....	176
• SC-104 Proof of Service.....	177

Filing Fee:
 \$0,000.00 - \$1,500.00 = \$30
 \$1,500.01 - \$5,000.00 = \$50
 \$5,000.01 - \$10,000.00 = \$75
 If have filed more than If cases = \$100

- File with Court then erve
 - Cannot be sserved by the Plaintiff

Plaintiff (list names):

Case Number:

1 The plaintiff (the person, business, or public entity that is suing) is:

Name: Jane Doe Phone: 213-000-0000
 Street address: 123 Main Street Los Angeles CA 90012
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

If more than one plaintiff, list next plaintiff here:

Name: _____ Phone: _____
 Street address: _____
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

- Check here if more than two plaintiffs and attach form [SC-100A](#).
- Check here if either plaintiff listed above is doing business under a fictitious name and attach form [SC-103](#).
- Check here if any plaintiff is a "licensee" or "deferred deposit originator" (payday lender) under Financial Code sections 23000 et seq.

2 The defendant (the person, business, or public entity being sued) is:

Name: John Smith Phone: 213-000-0000
 Street address: 456 White Oak Ave Los Angeles CA 90018
Street City State Zip
 Mailing address (if different): _____
Street City State Zip

If the defendant is a corporation, limited liability company, or public entity, list the person or agent authorized for service of process here:

Name: _____ Job title, if known: _____
 Address: _____
Street City State Zip

- Check here if your case is against more than one defendant and attach form [SC-100A](#).
- Check here if any defendant is on active military duty and write defendant's name here: _____

3 The plaintiff claims the defendant owes \$ 1,200. (Explain below and on next page.)

(Note: A claim for COVID-19 rental debt cannot be made on this form. Use form [SC-500, Plaintiff's Claim and ORDER to Go to Small Claims Court \(COVID-19 Rental Debt\)](#).)

- a. Why does the defendant owe the plaintiff money?
John Smith borrowed \$1,200.00 from me and never paid me back.



Plaintiff (list names):

Case Number:

- 3 b. When did this happen? (Date): 1/13/2018
 If no specific date, give the time period: Date started: _____ Through: _____
- c. How did you calculate the money owed to you? (Do not include court costs or fees for service.)
Promissory note signed by John Smith
- _____
- _____

Check here if you need more space. Attach one sheet of paper or form MC-031 and write "SC-100, Item 3" at the top.

4 You must ask the defendant (in person, in writing, or by phone) to pay you before you sue. If your claim is for possession of property, you must ask the defendant to give you the property. Have you done this?

Yes No If no, explain why not:

5 Why are you filing your claim at this courthouse?

This courthouse covers the area (check the one that applies):

- a. (1) Where the defendant lives or does business. (4) Where a contract (written or spoken) was made, signed, performed, or broken by the defendant or where the defendant lived or did business when the defendant made the contract.
- (2) Where the plaintiff's property was damaged.
- (3) Where the plaintiff was injured.
- b. Where the buyer or lessee signed the contract, lives now, or lived when the contract was made, if this claim, is about an offer or contract for personal, family, or household goods, services, or loans. (Code Civ. Proc., § 395(b).)
- c. Where the buyer signed the contract, lives now, or lived when the contract was made, if this claim is about a retail installment contract (like a credit card). (Civ. Code, § 1812.10.)
- d. Where the buyer signed the contract, lives now, or lived when the contract was made, or where the vehicle is permanently garaged, if this claim is about a vehicle finance sale. (Civ. Code, § 2984.4.)
- e. Other (specify): _____

6 List the zip code of the place checked in 5 above (if you know): 90018

7 Is your claim about an attorney-client fee dispute? Yes No
 If yes, and if you have had arbitration, fill out form SC-101, attach it to this form, and check here:

8 Are you suing a public entity? Yes No
 If yes, you must file a written claim with the entity first. A claim was filed on (date): _____
 If the public entity denies your claim or does not answer within the time allowed by law, you can file this form.



Plaintiff (list names):

Case Number:

9 Have you filed more than 12 other small claims within the last 12 months in California?

Yes No If yes, the filing fee for this case will be higher.

10 Is your claim for more than \$2,500? Yes No

If you answer yes, you also confirm that you have not filed, and you understand that you may not file, more than two small claims cases for more than \$2,500 in California during this calendar year.

11 I understand that by filing a claim in small claims court, I have no right to appeal this claim.

I declare under penalty of perjury under the laws of the State of California that the information above and on any attachments to this form is true and correct.

Date: 5/24/2018

Jane Doe Plaintiff types or prints name here

Jane Doe Plaintiff signs here

Date:

Second plaintiff types or prints name here

Second plaintiff signs here



Requests for Accommodations

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least five days before the trial. For these and other accommodations, contact the clerk's office for form MC-410, Disability Accommodation Request. (Civ. Code, § 54.8.)



Plaintiff (list names):

Filing Fee:
\$0,000.00 - \$1,500.00 = \$30
\$1,500.01 - \$5,000.00 = \$50
\$5,000.01 - \$10,000.00 = \$75
If have filed more than If cases = \$100

- Serve the Agent for Service or Officer
- Will be Substitute Service

Case Number:

1 The plaintiff (the person, business, or public entity that is suing) is:

Name: Jane Doe Phone: 213-000-0000

Street address: 123 Main Street Los Angeles CA 90012
Street City State Zip

Mailing address (if different):
Street City State Zip

Email address (if available):

If more than one plaintiff, list next plaintiff here:

Name: Phone:

Street address:
Street City State Zip

Mailing address (if different):
Street City State Zip

Email address (if available):

- Check here if more than two plaintiffs and attach form SC-100A.
Check here if either plaintiff listed above is doing business under a fictitious name and attach form SC-103.
Check here if any plaintiff is a "licensee" or "deferred deposit originator" (payday lender) under Financial Code sections 23000 et seq.

2 The defendant (the person, business, or public entity being sued) is:

Name: Granny's Bakery, LLC Phone: 213-000-0000

Street address: 456 White Oak Ave Los Angeles CA 90018
Street City State Zip

Mailing address (if different):
Street City State Zip

If the defendant is a corporation, limited liability company, or public entity, list the person or agent authorized for service of process here:

Name: Nancy Bruin Job title, if known: Agent for Service of Process

Address: 900 Black Oak Ave CA 90018
Street City State Zip

- Check here if your case is against more than one defendant and attach form SC-100A.
Check here if any defendant is on active military duty and write defendant's name here:

3 The plaintiff claims the defendant owes \$ 1,500. (Explain below and on next page.)

(Note: A claim for COVID-19 rental debt cannot be made on this form. Use form SC-500, Plaintiff's Claim and ORDER to Go to Small Claims Court (COVID-19 Rental Debt).)

- a. Why does the defendant owe the plaintiff money?
Plaintiff paid for a wedding cake that was never delivered to the party.



Plaintiff (list names):

Filing Fee:
\$0,000.00 - \$1,500.00 = \$30
\$1,500.01 - \$5,000.00 = \$50
\$5,000.01 - \$10,000.00 = \$75
If have filed more than If cases = \$100

Case Number: _____

1 The plaintiff (the person, business, or public entity that is suing) is:

Name: Jane Doe DBA Acapulco Restaurant Phone: 213-000-0000
Street address: 123 Main Street Los Angeles CA 90012
Mailing address (if different):
Email address (if available):

If more than one plaintiff, list next plaintiff here:

Name: _____ Phone: _____
Street address: _____
Mailing address (if different): _____
Email address (if available): _____

- Check here if more than two plaintiffs and attach form SC-100A.
Check here if either plaintiff listed above is doing business under a fictitious name and attach form SC-103.
Check here if any plaintiff is a "licensee" or "deferred deposit originator" (payday lender) under Financial Code sections 23000 et seq.

2 The defendant (the person, business, or public entity being sued) is:

Name: John Smith Phone: 213-000-0000
Street address: 456 White Oak Ave Los Angeles CA 90018
Mailing address (if different):

If the defendant is a corporation, limited liability company, or public entity, list the person or agent authorized for service of process here:

Name: _____ Job title, if known: _____
Address: _____

- Check here if your case is against more than one defendant and attach form SC-100A.
Check here if any defendant is on active military duty and write defendant's name here:

3 The plaintiff claims the defendant owes \$ 1,800. (Explain below and on next page.)

(Note: A claim for COVID-19 rental debt cannot be made on this form. Use form SC-500, Plaintiff's Claim and ORDER to Go to Small Claims Court (COVID-19 Rental Debt).)

a. Why does the defendant owe the plaintiff money?

The defendant did not pay the plaintiff for catering a dinner party at the defendant's home.



Plaintiff (list names):

Filing Fees:
 \$0.00 - \$1,500.00 = \$30.00
 \$1,500.01 - \$5,000.00 = \$50.00
 \$5,000.01 - \$10,000.00 = \$75.00
 If have filed more than 12 cases = \$100.00

- Substitute service may be done on an employee

Case Number: _____

1 The plaintiff (the person, business, or public entity that is suing) is:

Name: Jane Doe Phone: 213-000-0000
 Street address: 123 Main Street Los Angeles CA 90012
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

If more than one plaintiff, list next plaintiff here:

Name: _____ Phone: _____
 Street address: _____
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

- Check here if more than two plaintiffs and attach form [SC-100A](#).
- Check here if either plaintiff listed above is doing business under a fictitious name and attach form [SC-103](#).
- Check here if any plaintiff is a "licensee" or "deferred deposit originator" (payday lender) under Financial Code sections 23000 et seq.

2 The defendant (the person, business, or public entity being sued) is:

Name: John Smith Individually and DBA John's Towing Service Phone: 213-000-0000
 Street address: 456 White Oak Ave Los Angeles CA 90018
Street City State Zip
 Mailing address (if different): _____
Street City State Zip

If the defendant is a corporation, limited liability company, or public entity, list the person or agent authorized for service of process here:

Name: _____ Job title, if known: _____
 Address: _____
Street City State Zip

- Check here if your case is against more than one defendant and attach form [SC-100A](#).
- Check here if any defendant is on active military duty and write defendant's name here: _____

3 The plaintiff claims the defendant owes \$ 3,400. (Explain below and on next page.)

(Note: A claim for COVID-19 rental debt cannot be made on this form. Use form [SC-500, Plaintiff's Claim and ORDER to Go to Small Claims Court \(COVID-19 Rental Debt\)](#).)

a. Why does the defendant owe the plaintiff money?

The tow company damaged my car.



Plaintiff (list names):

Filing Fees:
 \$0.00 - \$1,500.00 = \$30.00
 \$1,500.01 - \$5,000.00 = \$50.00
 \$5,000.01 - \$10,000.00 = \$75.00
 If have filed more than 12 cases = \$100.00

- Serve Agent for Service or Officer
 - Will be Substitute Service

Case Number: _____

1 The plaintiff (the person, business, or public entity that is suing) is:

Name: Jane Doe Phone: 213-000-0000
 Street address: 123 Main Street Los Angeles CA 90012
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

If more than one plaintiff, list next plaintiff here:

Name: _____ Phone: _____
 Street address: _____
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

- Check here if more than two plaintiffs and attach form [SC-100A](#).
- Check here if either plaintiff listed above is doing business under a fictitious name and attach form [SC-103](#).
- Check here if any plaintiff is a "licensee" or "deferred deposit originator" (payday lender) under Financial Code sections 23000 et seq.

2 The defendant (the person, business, or public entity being sued) is:

Name: Places to Go, Inc Phone: 213-000-0000
 Street address: 456 White Oak Ave Los Angeles CA 90018
Street City State Zip
 Mailing address (if different): _____
Street City State Zip

If the defendant is a corporation, limited liability company, or public entity, list the person or agent authorized for service of process here:

Name: CT Corporation System Job title, if known: Agent for Service of Process
 Address: 818 W. 7th St., Ste. 930 Los Angeles CA 90017
Street City State Zip

- Check here if your case is against more than one defendant and attach form [SC-100A](#).
- Check here if any defendant is on active military duty and write defendant's name here: _____

3 The plaintiff claims the defendant owes \$ 2,000. (Explain below and on next page.)

(Note: A claim for COVID-19 rental debt cannot be made on this form. Use form [SC-500, Plaintiff's Claim and ORDER to Go to Small Claims Court \(COVID-19 Rental Debt\)](#).)

a. Why does the defendant owe the plaintiff money?

I paid the defendent for round trip tickets, but when the tickets arrived they were only one way tickets.



Filing Fees:
 \$0.00 - \$1,500.00 = \$30.00
 \$1,500.01 - \$5,000.00 = \$50.00
 \$5,000.01 - \$10,000.00 = \$75.00
 If have filed more than 12 cases = \$100.00

- File a State Claim for Damages initially

Plaintiff (list names):

Case Number:

1 The plaintiff (the person, business, or public entity that is suing) is:

Name: Jane Doe Phone: 213-000-0000
 Street address: 123 Main Street Los Angeles CA 90012
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

If more than one plaintiff, list next plaintiff here:

Name: _____ Phone: _____
 Street address: _____
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

- Check here if more than two plaintiffs and attach form [SC-100A](#).
- Check here if either plaintiff listed above is doing business under a fictitious name and attach form [SC-103](#).
- Check here if any plaintiff is a "licensee" or "deferred deposit originator" (payday lender) under Financial Code sections 23000 et seq.

2 The defendant (the person, business, or public entity being sued) is:

Name: State of California Phone: _____
 Street address: 300 S. Spring St., Room 1700 Los Angeles CA 90012
Street City State Zip
 Mailing address (if different): _____
Street City State Zip

If the defendant is a corporation, limited liability company, or public entity, list the person or agent authorized for service of process here:

Name: Office of the Attorney General Job title, if known: Attorney General
 Address: 300 S. Spring St., Room 1700 Los Angeles CA 90012
Street City State Zip
 Check here if your case is against more than one defendant and attach form [SC-100A](#).
 Check here if any defendant is on active military duty and write defendant's name here: _____

3 The plaintiff claims the defendant owes \$ 5,000. (Explain below and on next page.)

(Note: A claim for COVID-19 rental debt cannot be made on this form. Use form [SC-500, Plaintiff's Claim and ORDER to Go to Small Claims Court \(COVID-19 Rental Debt\)](#).)

- a. Why does the defendant owe the plaintiff money?
My car was damaged during a high speed chase by the Los Angeles Sheriff's Department



Filing Fees:
 \$0.00 - \$1,500.00 = \$30.00
 \$1,500.01 - \$5,000.00 = \$50.00
 \$5,000.01 - \$10,000.00 = \$75.00
 If have filed more than 12 cases = \$100.00

- File County Claim for Damages initially

Plaintiff (list names):

Case Number: _____

1 The plaintiff (the person, business, or public entity that is suing) is:

Name: Jane Doe Phone: 213-000-0000
 Street address: 123 Main Street Los Angeles CA 90012
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

If more than one plaintiff, list next plaintiff here:

Name: _____ Phone: _____
 Street address: _____
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

- Check here if more than two plaintiffs and attach form [SC-100A](#).
- Check here if either plaintiff listed above is doing business under a fictitious name and attach form [SC-103](#).
- Check here if any plaintiff is a "licensee" or "deferred deposit originator" (payday lender) under Financial Code sections 23000 et seq.

2 The defendant (the person, business, or public entity being sued) is:

Name: County of Los Angeles Phone: _____
 Street address: 500 W. Temple St., Room 383, Hall of Admin. Los Angeles CA 90012
Street City State Zip
 Mailing address (if different): _____
Street City State Zip

If the defendant is a corporation, limited liability company, or public entity, list the person or agent authorized for service of process here:

Name: Clerk of the Board, Executive Office, BOS Job title, if known: Clerk of the Board
 Address: 500 W. Temple St., Room 383, Hall of Admin. Los Angeles CA 90012
Street City State Zip

- Check here if your case is against more than one defendant and attach form [SC-100A](#).
- Check here if any defendant is on active military duty and write defendant's name here: _____

3 The plaintiff claims the defendant owes \$ 5,000. (Explain below and on next page.)

(Note: A claim for COVID-19 rental debt cannot be made on this form. Use form [SC-500, Plaintiff's Claim and ORDER to Go to Small Claims Court \(COVID-19 Rental Debt\)](#).)

a. Why does the defendant owe the plaintiff money?
My car was damaged during a high speed chase by the Los Angeles Sheriff's Department



Filing Fees:
\$0.00 - \$1,500.00 = \$30.00
\$1,500.01 - \$5,000.00 = \$50.00
\$5,000.01 - \$10,000.00 = \$75.00
If have filed more than 12 cases = \$100.00

- File a City Claim for Damages initially

Plaintiff (list names):

Case Number: _____

1 The plaintiff (the person, business, or public entity that is suing) is:

Name: Jane Doe Phone: 213-000-0000
Street address: 123 Main Street Los Angeles CA 90012
Street City State Zip
Mailing address (if different): _____
Street City State Zip
Email address (if available): _____

If more than one plaintiff, list next plaintiff here:

Name: _____ Phone: _____
Street address: _____
Street City State Zip
Mailing address (if different): _____
Street City State Zip
Email address (if available): _____

- Check here if more than two plaintiffs and attach form [SC-100A](#).
- Check here if either plaintiff listed above is doing business under a fictitious name and attach form [SC-103](#).
- Check here if any plaintiff is a "licensee" or "deferred deposit originator" (payday lender) under Financial Code sections 23000 et seq.

2 The defendant (the person, business, or public entity being sued) is:

Name: City of Los Angeles Phone: _____
Street address: 200 N. Main St., Room 395 Los Angeles CA 90012
Street City State Zip
Mailing address (if different): _____
Street City State Zip

If the defendant is a corporation, limited liability company, or public entity, list the person or agent authorized for service of process here:

Name: City Clerk Job title, if known: City Clerk
Address: 200 N. Main St., Room 360 Los Angeles CA 90012
Street City State Zip

- Check here if your case is against more than one defendant and attach form [SC-100A](#).
- Check here if any defendant is on active military duty and write defendant's name here: _____

3 The plaintiff claims the defendant owes \$ 5,000. (Explain below and on next page.)

(Note: A claim for COVID-19 rental debt cannot be made on this form. Use form [SC-500, Plaintiff's Claim and ORDER to Go to Small Claims Court \(COVID-19 Rental Debt\)](#).)

- a. Why does the defendant owe the plaintiff money?
My car was damaged during a high speed chase by the Los Angeles Police Department



SUING A PUBLIC ENTITY: Name on Entity on SC-100

<p>City of Los Angeles (A Public Entity) Who to Serve: City Clerk's Office Address to Serve: 200 N. Spring St., Room 395, Los Angeles, CA 90012</p>
<p>Los Angeles County (A Public Entity) Who to Serve: Kenneth Hahn Hall of Administration Address to Serve: 500 W. Temple St., Room 383, Los Angeles, CA 90012 Subpoenas are served to Room 648</p>
<p>State of California (A Public Entity) Who to Serve: Office of the Attorney General Address to Serve: 300 S. Spring St., Room 1700, Los Angeles, CA 90012</p>
<p>Los Angeles Police Department (A Public Entity) Who to Serve: City Clerk's Office Address to Serve: 200 N. Spring St., Room 395, Los Angeles, CA 90012</p>
<p>Los Angeles Department Of Water And Power (A Public Entity) Who to Serve: Claims Section Address to Serve: 111 N. Hope St., Room 1555, Los Angeles, CA 90012</p>
<p>Los Angeles County Sheriff (A Public Entity) Who to Serve: Civil Litigation Unit Address to Serve: 4900 S. Eastern Ave., City of Commerce, CA 90040</p>
<p>California State University (A Public Entity) Who to Serve: Office of the Chancellor Address to Serve: 401 Golden Shore, 5th Floor, Long Beach, CA 90802</p>
<p>Los Angeles Unified School District (A Public Entity) Who to Serve: Jefferson Crain, Executive Office of the Board Address to Serve: 333 S. Beaudry Ave, 24th Floor, Los Angeles, CA 90017</p>
<p>Metro-Link (A Public Entity) Who to Serve: Greg Graves (Risk Management) Address to Serve: 700 S. Flower St., 26th Floor, Los Angeles, CA 90017</p>
<p>Metropolitan Transportation Authority (MTA) (A Public Entity) Who to Serve: Board Secretary's Office, Los Angeles County Metropolitan Transportation Authority Address to Serve: One Gateway Plaza, M/S 99-3-1, Los Angeles, CA 90012-2952</p>
<p>University of California (A Public Entity) Who to Serve: Regents of University of California Attn: Office General Council Address to Serve: 1111 Franklin St, 8th Floor, Oakland, CA 94607-5200</p>
<p>University of California, Los Angeles (UCLA) (A Public Entity) Who to Serve: Regents of University of California Attn: UCLA Medical Center Address to Serve: 10920 Wilshire Blvd., #430, Los Angeles, CA 90024</p>

Filing Fees:
 \$0.00 - \$1,500.00 = \$30.00
 \$1,500.01 - \$5,000.00 = \$50.00
 \$5,000.01 - \$10,000.00 = \$75.00
 If have filed more than 12 cases = \$100.00

- Only sue Driver and Registered Owner

Plaintiff (list names):

Case Number:

1 The plaintiff (the person, business, or public entity that is suing) is:

Name: Jane Doe (Registered Owner) or (R/O) Phone: 213-000-0000
 Street address: 123 Main Street Los Angeles CA 90012
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

If more than one plaintiff, list next plaintiff here:

Name: _____ Phone: _____
 Street address: _____
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

- Check here if more than two plaintiffs and attach form [SC-100A](#).
- Check here if either plaintiff listed above is doing business under a fictitious name and attach form [SC-103](#).
- Check here if any plaintiff is a "licensee" or "deferred deposit originator" (payday lender) under Financial Code sections 23000 et seq.

2 The defendant (the person, business, or public entity being sued) is:

Name: John Smith (Registered Owner) or (R/O) Phone: _____
 Street address: 456 White Oak Ave Los Angeles CA 90012
Street City State Zip
 Mailing address (if different): _____
Street City State Zip

If the defendant is a corporation, limited liability company, or public entity, list the person or agent authorized for service of process here:

Name: _____ Job title, if known: _____
 Address: _____
Street City State Zip

- Check here if your case is against more than one defendant and attach form [SC-100A](#).
- Check here if any defendant is on active military duty and write defendant's name here: _____

3 The plaintiff claims the defendant owes \$ 5,000. (Explain below and on next page.)

(Note: A claim for COVID-19 rental debt cannot be made on this form. Use form [SC-500, Plaintiff's Claim and ORDER to Go to Small Claims Court \(COVID-19 Rental Debt\)](#).)

a. Why does the defendant owe the plaintiff money?
My car was damaged and I was injured in a car accident caused by the defendant.



SC-100A

Other Plaintiffs or Defendants

Case Number: _____

This form is attached to form SC-100, item 1 or 2.

1 If more than two plaintiffs (person, business, or entity suing), list their information below:

Other plaintiff's name: _____
Street address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Mailing address (if different): _____

City: _____ State: _____ Zip: _____

Is this plaintiff doing business under a fictitious name? Yes No If yes, attach form SC-103.

Other plaintiff's name: _____

Street address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Mailing address (if different): _____

City: _____ State: _____ Zip: _____

Is this plaintiff doing business under a fictitious name? Yes No If yes, attach form SC-103.

Check here if more than 4 plaintiffs and fill out and attach another form SC-100A.

2 If more than one defendant (person, business, or entity being sued), list their information below:

Other defendant's name: **Mary Jones (Driver) or (D)**

Street address: **1234 White Lane** Phone: _____

City: **Los Angeles** State: **CA** Zip: **90018**

Mailing address (if different): _____

City: _____ State: _____ Zip: _____

If this defendant is a corporation, limited liability company, or public entity, list the person or agent authorized for service of process:

Name: _____ Job title, if known: _____

Address: _____

City: _____ State: _____ Zip: _____

Check here if your case is against more than two defendants, and fill out and attach another form SC-100A.

3 Is your claim for more than \$2,500? Yes No

If yes, I have not filed, and understand that I cannot file, more than two small claims cases for more than \$2,500 in California during this calendar year.

4 I understand that by filing a claim in small claims court, I have no right to appeal this claim.

I declare under penalty of perjury under California state law that the information above and on any attachments to this form is true and correct.

Date: **12/13/2018**

Jane Doe
Type or print your name

Date: _____

Type or print your name

Jane Doe
Sign your name

Sign your name

Filing Fees:
 \$0.00 - \$1,500.00 = \$30.00
 \$1,500.01 - \$5,000.00 = \$50.00
 \$5,000.01 - \$10,000.00 = \$75.00
 If have filed more than 12 cases = \$100.00

Plaintiff (list names):

Case Number:

1 The plaintiff (the person, business, or public entity that is suing) is:

Name: Jane Doe Phone: 213-000-0000
 Street address: 123 Main Street Los Angeles CA 90012
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

If more than one plaintiff, list next plaintiff here:

Name: _____ Phone: _____
 Street address: _____
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

- Check here if more than two plaintiffs and attach form [SC-100A](#).
- Check here if either plaintiff listed above is doing business under a fictitious name and attach form [SC-103](#).
- Check here if any plaintiff is a "licensee" or "deferred deposit originator" (payday lender) under Financial Code sections 23000 et seq.

2 The defendant (the person, business, or public entity being sued) is:

Name: Nathan Jones, a minor, by Mike Jones, his father Phone: _____
 Street address: 456 White Oak Ave Los Angeles CA 90012
Street City State Zip
 Mailing address (if different): _____
Street City State Zip

If the defendant is a corporation, limited liability company, or public entity, list the person or agent authorized for service of process here:

Name: _____ Job title, if known: _____
 Address: _____
Street City State Zip

- Check here if your case is against more than one defendant and attach form [SC-100A](#).
- Check here if any defendant is on active military duty and write defendant's name here: _____

3 The plaintiff claims the defendant owes \$ 5,000. (Explain below and on next page.)

(Note: A claim for COVID-19 rental debt cannot be made on this form. Use form [SC-500, Plaintiff's Claim and ORDER to Go to Small Claims Court \(COVID-19 Rental Debt\)](#).)

- a. Why does the defendant owe the plaintiff money?
The defendant threw a ball that hit and broke my car's windshield.



Filing Fees:
 \$0.00 - \$1,500.00 = \$30.00
 \$1,500.01 - \$5,000.00 = \$50.00
 \$5,000.01 - \$10,000.00 = \$75.00
 If have filed more than 12 cases = \$100.00

- You can personally serve one partner or
 behalf of the partnership.

Plaintiff (list names):

Case Number:

1 The plaintiff (the person, business, or public entity that is suing) is:

Name: Jane Doe Phone: 213-000-0000
 Street address: 123 Main Street Los Angeles CA 90012
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

If more than one plaintiff, list next plaintiff here:

Name: _____ Phone: _____
 Street address: _____
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

- Check here if more than two plaintiffs and attach form [SC-100A](#).
- Check here if either plaintiff listed above is doing business under a fictitious name and attach form [SC-103](#).
- Check here if any plaintiff is a "licensee" or "deferred deposit originator" (payday lender) under Financial Code sections 23000 et seq.

2 The defendant (the person, business, or public entity being sued) is:

Name: Pam Joo and Jim Joo Individually and DBA PJ's Tea Phone: _____
 Street address: 456 White Oak Ave Los Angeles CA 90012
Street City State Zip
 Mailing address (if different): _____
Street City State Zip

If the defendant is a corporation, limited liability company, or public entity, list the person or agent authorized for service of process here:

Name: _____ Job title, if known: _____
 Address: _____
Street City State Zip

- Check here if your case is against more than one defendant and attach form [SC-100A](#).
- Check here if any defendant is on active military duty and write defendant's name here: _____

3 The plaintiff claims the defendant owes \$ 5,000. (Explain below and on next page.)

(Note: A claim for COVID-19 rental debt cannot be made on this form. Use form [SC-500, Plaintiff's Claim and ORDER to Go to Small Claims Court \(COVID-19 Rental Debt\)](#).)

- a. Why does the defendant owe the plaintiff money?
Defendent served the plaintiff burning hot tea which caused personal injury and resulted in the plaintiff lossing time from work



Filing Fees:
 \$0.00 - \$1,500.00 = \$30.00
 \$1,500.01 - \$5,000.00 = \$50.00
 \$5,000.01 - \$10,000.00 = \$75.00
 If have filed more than 12 cases = \$100.00

-The trust and trustee have to be served
 - Add the party who you've been paing rent to.

Plaintiff (list names):

Case Number:

1 The plaintiff (the person, business, or public entity that is suing) is:

Name: Jane Doe Phone: 213-000-0000
 Street address: 123 Main Street Los Angeles CA 90012
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

If more than one plaintiff, list next plaintiff here:

Name: _____ Phone: _____
 Street address: _____
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

- Check here if more than two plaintiffs and attach form [SC-100A](#).
- Check here if either plaintiff listed above is doing business under a fictitious name and attach form [SC-103](#).
- Check here if any plaintiff is a "licensee" or "deferred deposit originator" (payday lender) under Financial Code sections 23000 et seq.

2 The defendant (the person, business, or public entity being sued) is:

Name: Susana Gomez, trustee of the Susana Gomez Living Trust Phone: _____
 Street address: 456 White Oak Ave Los Angeles CA 90012
Street City State Zip
 Mailing address (if different): _____
Street City State Zip

If the defendant is a corporation, limited liability company, or public entity, list the person or agent authorized for service of process here:

Name: _____ Job title, if known: _____
 Address: _____
Street City State Zip

- Check here if your case is against more than one defendant and attach form [SC-100A](#).
- Check here if any defendant is on active military duty and write defendant's name here: _____

3 The plaintiff claims the defendant owes \$ 5,000. (Explain below and on next page.)

(Note: A claim for COVID-19 rental debt cannot be made on this form. Use form [SC-500, Plaintiff's Claim and ORDER to Go to Small Claims Court \(COVID-19 Rental Debt\)](#).)

- a. Why does the defendant owe the plaintiff money?
Defendent failed to return my security deposit.



Filing Fees:
 \$0.00 - \$1,500.00 = \$30.00
 \$1,500.01 - \$5,000.00 = \$50.00
 \$5,000.01 - \$10,000.00 = \$75.00
 If have filed more than 12 cases = \$100.00

Plaintiff (list names):

Case Number:

1 The plaintiff (the person, business, or public entity that is suing) is:

Name: Jane Doe Phone: 213-000-0000
 Street address: 123 Main Street Los Angeles CA 90012
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

If more than one plaintiff, list next plaintiff here:

Name: _____ Phone: _____
 Street address: _____
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

- Check here if more than two plaintiffs and attach form [SC-100A](#).
- Check here if either plaintiff listed above is doing business under a fictitious name and attach form [SC-103](#).
- Check here if any plaintiff is a "licensee" or "deferred deposit originator" (payday lender) under Financial Code sections 23000 et seq.

2 The defendant (the person, business, or public entity being sued) is:

Name: Sun City Roseville Community Association, Inc. Phone: _____
 Street address: 456 White Oak Ave Los Angeles CA 90012
Street City State Zip
 Mailing address (if different): _____
Street City State Zip

If the defendant is a corporation, limited liability company, or public entity, list the person or agent authorized for service of process here:

Name: Steve Roseville Job title, if known: President
 Address: 456 White Oak Ave Los Angeles CA 90012
Street City State Zip
 Check here if your case is against more than one defendant and attach form [SC-100A](#).
 Check here if any defendant is on active military duty and write defendant's name here: _____

3 The plaintiff claims the defendant owes \$ 1,000. (Explain below and on next page.)

(Note: A claim for COVID-19 rental debt cannot be made on this form. Use form [SC-500, Plaintiff's Claim and ORDER to Go to Small Claims Court \(COVID-19 Rental Debt\)](#).)

- a. Why does the defendant owe the plaintiff money?
The HOA failed to provide plaintiff access to association books and accounting records as provided in association bylaws section 15.01, Davis-Sterling Act, and CA Corp. Code Section 8333



Filing Fees:
\$0.00 - \$1,500.00 = \$30.00
\$1,500.01 - \$5,000.00 = \$50.00
\$5,000.01 - \$10,000.00 = \$75.00
If have filed more than 12 cases = \$100.00

Plaintiff (list names):

Case Number:

1 The plaintiff (the person, business, or public entity that is suing) is:

Name: Jane Doe Phone: 213-000-0000

Street address: 123 Main Street Los Angeles CA 90012
Street City State Zip

Mailing address (if different): _____
Street City State Zip

Email address (if available): _____

If more than one plaintiff, list next plaintiff here:

Name: _____ Phone: _____

Street address: _____
Street City State Zip

Mailing address (if different): _____
Street City State Zip

Email address (if available): _____

- Check here if more than two plaintiffs and attach form [SC-100A](#).
- Check here if either plaintiff listed above is doing business under a fictitious name and attach form [SC-103](#).
- Check here if any plaintiff is a "licensee" or "deferred deposit originator" (payday lender) under Financial Code sections 23000 et seq.

2 The defendant (the person, business, or public entity being sued) is:

Name: Registrar of the Contractor's State License Board Phone: _____

Street address: 9821 Busines Park Dr Sacramento CA 95827
Street City State Zip

Mailing address (if different): _____
Street City State Zip

If the defendant is a corporation, limited liability company, or public entity, list the person or agent authorized for service of process here:

Name: Registrar Job title, if known: Agent for Service

Address: 9821 Busines Park Dr Sacramento CA 95827
Street City State Zip

- Check here if your case is against more than one defendant and attach form [SC-100A](#).
- Check here if any defendant is on active military duty and write defendant's name here: _____

3 The plaintiff claims the defendant owes \$ 10,000. (Explain below and on next page.)

(Note: A claim for COVID-19 rental debt cannot be made on this form. Use form [SC-500, Plaintiff's Claim and ORDER to Go to Small Claims Court \(COVID-19 Rental Debt\)](#).)

- a. Why does the defendant owe the plaintiff money?
The contractor received a \$10,000 check to remodel my kitchen and took off with the money.
They never performed the remodel



Case Number: _____

This form is attached to form SC-100, item 1 or 2.

1 If more than two plaintiffs (person, business, or entity suing), list their information below:

Other plaintiff's name: _____
Street address: _____ Phone: _____
City: _____ State: _____ Zip: _____
Mailing address (if different): _____
City: _____ State: _____ Zip: _____
Is this plaintiff doing business under a fictitious name? Yes No If yes, attach form SC-103.

Other plaintiff's name: _____
Street address: _____ Phone: _____
City: _____ State: _____ Zip: _____
Mailing address (if different): _____
City: _____ State: _____ Zip: _____
Is this plaintiff doing business under a fictitious name? Yes No If yes, attach form SC-103.

Check here if more than 4 plaintiffs and fill out and attach another form SC-100A.

2 If more than one defendant (person, business, or entity being sued), list their information below:

Other defendant's name: Molasses Remodel Corporation
Street address: 456 Rooftop Road Phone: _____
City: Los Angeles State: CA Zip: 90013
Mailing address (if different): _____
City: _____ State: _____ Zip: _____

If this defendant is a corporation, limited liability company, or public entity, list the person or agent authorized for service of process:

Name: LegalZoom, Inc. Job title, if known: Agent for Service of Process
Address: 101 N. Brand Blvd., 11th Floor
City: Glendale State: CA Zip: 91203

Check here if your case is against more than two defendants, and fill out and attach another form SC-100A.

3 Is your claim for more than \$2,500? Yes No

If yes, I have not filed, and understand that I cannot file, more than two small claims cases for more than \$2,500 in California during this calendar year.

4 I understand that by filing a claim in small claims court, I have no right to appeal this claim.

I declare under penalty of perjury under California state law that the information above and on any attachments to this form is true and correct.

Date: 5/24/2018
Jane Doe
Type or print your name

Jane Doe
Sign your name

Date: _____
Type or print your name

Sign your name

Include both the Registrar and contractor on the Claim.

Naming the Registrar as a Defendant

If the CSLB website says the Register holds a cash deposit in lieu of the license bond, you must name the Register as the defendant in your small claims lawsuit in order to be paid. As of January 2016, this amount can be up to \$15,000.

How to name the Registrar on the SC-100 Plaintiffs Claims:

Register of The Contractor State Licensing Board
9821 Business Park Drive
Sacramento, CA 95827

Serve as follows:

Name: Register **Job Title:** Agent For Service
Address: 9821 Business Park Dr, Sacramento, California 95827

The CSLB can only make payments from a cash deposit under a court order. If the plaintiff has only named the contractor as a defendant, not the register also, then the plaintiff has two options:

- Complete a form SC105 request for court order and answer to request that the judge at the register as a dependent/ debtor on the judgment. **(OR)**
- Open a new case listing the register as a dependent and ask the court to consolidate the judgment with the first judgment.

If the register was not named, let the judgment be answered and then finally claim with the register and provide a copy of the judgment..

Filing Fees:
 \$0.00 - \$1,500.00 = \$30.00
 \$1,500.01 - \$5,000.00 = \$50.00
 \$5,000.01 - \$10,000.00 = \$75.00
 If have filed more than 12 cases = \$100.00

- Attach CIV-010

Plaintiff (list names):

Case Number:

1 The plaintiff (the person, business, or public entity that is suing) is:

Name: Tom Jones an incompetent person by Amy Jones his sister Phone: 213-000-0000
 Street address: 123 Main Street Los Angeles CA 90012
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

If more than one plaintiff, list next plaintiff here:

Name: _____ Phone: _____
 Street address: _____
Street City State Zip
 Mailing address (if different): _____
Street City State Zip
 Email address (if available): _____

- Check here if more than two plaintiffs and attach form [SC-100A](#).
- Check here if either plaintiff listed above is doing business under a fictitious name and attach form [SC-103](#).
- Check here if any plaintiff is a "licensee" or "deferred deposit originator" (payday lender) under Financial Code sections 23000 et seq.

2 The defendant (the person, business, or public entity being sued) is:

Name: Paul Rodriguez Phone: _____
 Street address: 9821 Busines Park Dr Sacramento CA 95827
Street City State Zip
 Mailing address (if different): _____
Street City State Zip

If the defendant is a corporation, limited liability company, or public entity, list the person or agent authorized for service of process here:

Name: _____ Job title, if known: _____
 Address: _____
Street City State Zip

- Check here if your case is against more than one defendant and attach form [SC-100A](#).
- Check here if any defendant is on active military duty and write defendant's name here: _____

3 The plaintiff claims the defendant owes \$ 1,000. (Explain below and on next page.)

(Note: A claim for COVID-19 rental debt cannot be made on this form. Use form [SC-500, Plaintiff's Claim and ORDER to Go to Small Claims Court \(COVID-19 Rental Debt\)](#).)

- a. Why does the defendant owe the plaintiff money?
Paul failed to return my security deposit within 21 days after I moved out and did not provide a written itemized statement of deductions.



Filing Fees:
 \$0.00 - \$1,500.00 = \$30.00
 \$1,500.01 - \$5,000.00 = \$50.00
 \$5,000.01 - \$10,000.00 = \$75.00
 If have filed more than 12 cases = \$100.00

- Plaintiff must be Executor of the Estate, would need to have Letters of Administration.

Plaintiff (list names):

Case Number:

1 The plaintiff (the person, business, or public entity that is suing) is:

Name: The Estate of Rosa Hudson, by Nick Hudson, Administrator Phone: 213-000-0000

Street address: 123 Main Street Los Angeles CA 90012
Street City State Zip

Mailing address (if different): _____
Street City State Zip

Email address (if available): _____

If more than one plaintiff, list next plaintiff here:

Name: _____ Phone: _____

Street address: _____
Street City State Zip

Mailing address (if different): _____
Street City State Zip

Email address (if available): _____

- Check here if more than two plaintiffs and attach form [SC-100A](#).
- Check here if either plaintiff listed above is doing business under a fictitious name and attach form [SC-103](#).
- Check here if any plaintiff is a "licensee" or "deferred deposit originator" (payday lender) under Financial Code sections 23000 et seq.

2 The defendant (the person, business, or public entity being sued) is:

Name: State of California, Dep. of Transportation, A Public Entity Phone: _____

Street address: 100 S. Main St., MS 19 Los Angeles CA 90012
Street City State Zip

Mailing address (if different): _____
Street City State Zip

If the defendant is a corporation, limited liability company, or public entity, list the person or agent authorized for service of process here:

Name: Claims Officer Job title, if known: Claims Officer

Address: 100 S. Main St., MS 19 Los Angeles CA 90012
Street City State Zip

- Check here if your case is against more than one defendant and attach form [SC-100A](#).
- Check here if any defendant is on active military duty and write defendant's name here: _____

3 The plaintiff claims the defendant owes \$ 10,000. (Explain below and on next page.)

(Note: A claim for COVID-19 rental debt cannot be made on this form. Use form [SC-500, Plaintiff's Claim and ORDER to Go to Small Claims Court \(COVID-19 Rental Debt\)](#).)

a. Why does the defendant owe the plaintiff money?

Negligence on behalf of Caltrans, which resulted in the death of Rosa.



FW-001

Request to Waive Court Fees

CONFIDENTIAL

Clerk stamps date here when form is filed.

If you are getting public benefits, are a low-income person, or do not have enough income to pay for your household's basic needs and your court fees, you may use this form to ask the court to waive your court fees. The court may order you to answer questions about your finances. If the court waives the fees, you may still have to pay later if:

- You cannot give the court proof of your eligibility,
- Your financial situation improves during this case, or
- You settle your civil case for **\$10,000** or more. The trial court that waives your fees will have a lien on any such settlement in the amount of the waived fees and costs. The court may also charge you any collection costs.

Fill in court name and street address:

Superior Court of California, County of

1 Your Information (person asking the court to waive the fees):

Name: Joey Jonez
 Street or mailing address: 855 Bird Lane
 City: Los Angeles State: CA Zip: 90012
 Phone: _____

Fill in case number and name:

Case Number:

19STSC56789

Case Name:

2 Your Job, if you have one (job title): Unemployed

Name of employer: _____
 Employer's address: _____

3 Your Lawyer, if you have one (name, firm or affiliation, address, phone number, and State Bar number):

a. The lawyer has agreed to advance all or a portion of your fees or costs (check one): Yes No

b. (If yes, your lawyer must sign here) Lawyer's signature: _____

If your lawyer is not providing legal-aid type services based on your low income, you may have to go to a hearing to explain why you are asking the court to waive the fees.

4 What court's fees or costs are you asking to be waived?

- Superior Court (See Information Sheet on Waiver of Superior Court Fees and Costs (form FW-001-INFO).)
- Supreme Court, Court of Appeal, or Appellate Division of Superior Court (See Information Sheet on Waiver of Appellate Court Fees (form APP-015/FW-015-INFO).)

5 Why are you asking the court to waive your court fees?

- a. I receive (check all that apply; see form FW-001-INFO for definitions): Food Stamps Supp. Sec. Inc.
 SSP Medi-Cal County Relief/Gen. Assist. IHSS CalWORKS or Tribal TANF CAPI
- b. My gross monthly household income (before deductions for taxes) is less than the amount listed below. (If you check 5b, you must fill out 7, 8, and 9 on page 2 of this form.)

Family Size	Family Income	Family Size	Family Income	Family Size	Family Income	If more than 6 people at home, add \$472.92 for each extra person.
1	\$1,341.67	3	\$2,287.50	5	\$3,233.34	
2	\$1,814.59	4	\$2,760.42	6	\$3,706.25	

c. I do not have enough income to pay for my household's basic needs and the court fees. I ask the court to: (check one and you **must** fill out page 2):

- waive all court fees and costs
- waive some of the court fees
- let me make payments over time

6 Check here if you asked the court to waive your court fees for this case in the last six months. (If your previous request is reasonably available, please attach it to this form and check here):

I declare under penalty of perjury under the laws of the State of California that the information I have provided on this form and all attachments is true and correct.

Date: 04/10/2019

Joey Jones
Print your name here

Joey Jones
Sign here

FW-001

Request to Waive Court Fees

CONFIDENTIAL

Clerk stamps date here when form is filed.

If you are getting public benefits, are a low-income person, or do not have enough income to pay for your household's basic needs and your court fees, you may use this form to ask the court to waive your court fees. The court may order you to answer questions about your finances. If the court waives the fees, you may still have to pay later if:

- You cannot give the court proof of your eligibility,
- Your financial situation improves during this case, or
- You settle your civil case for **\$10,000** or more. The trial court that waives your fees will have a lien on any such settlement in the amount of the waived fees and costs. The court may also charge you any collection costs.

Fill in court name and street address:

Superior Court of California, County of

Fill in case number and name:

Case Number:

19STSC56789

Case Name:

1 Your Information (person asking the court to waive the fees):

Name: Joey Jones

Street or mailing address: 855 Bird Lane

City: Los Angeles State: CA Zip: 90012

Phone: _____

2 Your Job, if you have one (job title): Retail Clerk

Name of employer: George's Suit Shop

Employer's address: 15489 Rowley St, Los Angeles, CA 90027

3 Your Lawyer, if you have one (name, firm or affiliation, address, phone number, and State Bar number):

a. The lawyer has agreed to advance all or a portion of your fees or costs (check one): Yes No

b. (If yes, your lawyer must sign here) Lawyer's signature: _____

If your lawyer is not providing legal-aid type services based on your low income, you may have to go to a hearing to explain why you are asking the court to waive the fees.

4 What court's fees or costs are you asking to be waived?

- Superior Court (See Information Sheet on Waiver of Superior Court Fees and Costs (form FW-001-INFO).)
- Supreme Court, Court of Appeal, or Appellate Division of Superior Court (See Information Sheet on Waiver of Appellate Court Fees (form APP-015/FW-015-INFO).)

5 Why are you asking the court to waive your court fees?

- a. I receive (check all that apply; see form FW-001-INFO for definitions): Food Stamps Supp. Sec. Inc. SSP Medi-Cal County Relief/Gen. Assist. IHSS CalWORKS or Tribal TANF CAPI

b. My gross monthly household income (before deductions for taxes) is less than the amount listed below. (If you check 5b, you must fill out 7, 8, and 9 on page 2 of this form.)

Family Size	Family Income	Family Size	Family Income	Family Size	Family Income	If more than 6 people at home, add \$472.92 for each extra person.
1	\$1,341.67	3	\$2,287.50	5	\$3,233.34	
2	\$1,814.59	4	\$2,760.42	6	\$3,706.25	

c. I do not have enough income to pay for my household's basic needs and the court fees. I ask the court to: (check one and you **must** fill out page 2):

- waive all court fees and costs
- waive some of the court fees
- let me make payments over time

6 Check here if you asked the court to waive your court fees for this case in the last six months.

(If your previous request is reasonably available, please attach it to this form and check here):

I declare under penalty of perjury under the laws of the State of California that the information I have provided on this form and all attachments is true and correct.

Date: 04/10/2019

Joey Jones

Print your name here

Joey Jones
Sign here



Case Number: _____

Your name: _____

If you checked 5a on page 1, do not fill out below. If you checked 5b, fill out questions 7, 8, and 9 only. If you checked 5c, you **must** fill out this entire page. If you need more space, attach form MC-025 or attach a sheet of paper and write Financial Information and your name and case number at the top.

7 Check here if your income changes a lot from month to month. If it does, complete the form based on your average income for the past 12 months.

8 Your Gross Monthly Income

a. List the source and amount of any income you get each month, including: wages or other income from work before deductions, spousal/child support, retirement, social security, disability, unemployment, military basic allowance for quarters (BAQ), veterans payments, dividends, interest, trust income, annuities, net business or rental income, reimbursement for job-related expenses, gambling or lottery winnings, etc.

- (1) Wages \$ 1,700
(2) \$
(3) \$
(4) \$

b. Your total monthly income: \$ 1,700

9 Household Income

a. List the income of all other persons living in your home who depend in whole or in part on you for support, or on whom you depend in whole or in part for support.

Table with columns: Name, Age, Relationship, Gross Monthly Income. Row 1: Steven Jones, 5, Son, \$ 0.

b. Total monthly income of persons above: \$ 0

Total monthly income and household income (8b plus 9b): \$ 1,700

10 Your Money and Property

a. Cash \$

b. All financial accounts (List bank name and amount):

- (1) \$
(2) \$
(3) \$

c. Cars, boats, and other vehicles. Table with columns: Make / Year, Fair Market Value, How Much You Still Owe.

d. Real estate. Table with columns: Address, Fair Market Value, How Much You Still Owe.

e. Other personal property (jewelry, furniture, furs, stocks, bonds, etc.): Table with columns: Describe, Fair Market Value, How Much You Still Owe.

11 Your Monthly Deductions and Expenses

a. List any payroll deductions and the monthly amount below:

- (1) \$
(2) \$
(3) \$
(4) \$

- b. Rent or house payment & maintenance \$
c. Food and household supplies \$
d. Utilities and telephone \$
e. Clothing \$
f. Laundry and cleaning \$
g. Medical and dental expenses \$
h. Insurance (life, health, accident, etc.) \$
i. School, child care \$
j. Child, spousal support (another marriage) \$
k. Transportation, gas, auto repair and insurance \$

l. Installment payments (list each below): Paid to: (1) \$ (2) \$ (3) \$

m. Wages/earnings withheld by court order \$

n. Any other monthly expenses (list each below): Paid to: How Much? (1) \$ (2) \$ (3) \$

Total monthly expenses (add 11a - 11n above): \$

To list any other facts you want the court to know, such as unusual medical expenses, etc., attach form MC-025 or attach a sheet of paper and write Financial Information and your name and case number at the top. Check here if you attach another page. Important! If your financial situation or ability to pay court fees improves, you must notify the court within five days on form FW-010.

FW-001

Request to Waive Court Fees

CONFIDENTIAL

Clerk stamps date here when form is filed.

If you are getting public benefits, are a low-income person, or do not have enough income to pay for your household's basic needs and your court fees, you may use this form to ask the court to waive your court fees. The court may order you to answer questions about your finances. If the court waives the fees, you may still have to pay later if:

- You cannot give the court proof of your eligibility,
- Your financial situation improves during this case, or
- You settle your civil case for **\$10,000** or more. The trial court that waives your fees will have a lien on any such settlement in the amount of the waived fees and costs. The court may also charge you any collection costs.

1 Your Information (person asking the court to waive the fees):

Name: Joey Jonez
 Street or mailing address: 855 Bird Lane
 City: Los Angeles State: CA Zip: 90012
 Phone: _____

Fill in court name and street address:

Superior Court of California, County of

Fill in case number and name:

Case Number:
19STSC56789
Case Name:

2 Your Job, if you have one (job title): Retail Clerk

Name of employer: George's Suit Shop
 Employer's address: 15489 Rowley St, Los Angeles, CA 90027

3 Your Lawyer, if you have one (name, firm or affiliation, address, phone number, and State Bar number):

a. The lawyer has agreed to advance all or a portion of your fees or costs (check one): Yes No

b. (If yes, your lawyer must sign here) Lawyer's signature: _____
If your lawyer is not providing legal-aid type services based on your low income, you may have to go to a hearing to explain why you are asking the court to waive the fees.

4 What court's fees or costs are you asking to be waived?

- Superior Court (See Information Sheet on Waiver of Superior Court Fees and Costs (form FW-001-INFO).)
- Supreme Court, Court of Appeal, or Appellate Division of Superior Court (See Information Sheet on Waiver of Appellate Court Fees (form APP-015/FW-015-INFO).)

5 Why are you asking the court to waive your court fees?

- a. I receive (check all that apply; see form FW-001-INFO for definitions): Food Stamps Supp. Sec. Inc. SSP Medi-Cal County Relief/Gen. Assist. IHSS CalWORKS or Tribal TANF CAPI
- b. My gross monthly household income (before deductions for taxes) is less than the amount listed below. (If you check 5b, you must fill out 7, 8, and 9 on page 2 of this form.)

Family Size	Family Income	Family Size	Family Income	Family Size	Family Income	If more than 6 people at home, add \$472.92 for each extra person.
1	\$1,341.67	3	\$2,287.50	5	\$3,233.34	
2	\$1,814.59	4	\$2,760.42	6	\$3,706.25	

c. I do not have enough income to pay for my household's basic needs and the court fees. I ask the court to: (check one and you **must** fill out page 2):

- waive all court fees and costs
- waive some of the court fees
- let me make payments over time

6 Check here if you asked the court to waive your court fees for this case in the last six months. (If your previous request is reasonably available, please attach it to this form and check here):

I declare under penalty of perjury under the laws of the State of California that the information I have provided on this form and all attachments is true and correct.

Date: 04/10/2019

Joey Jones
Print your name here

Joey Jones
Sign here

Case Number: _____

Your name: _____

If you checked 5a on page 1, do not fill out below. If you checked 5b, fill out questions 7, 8, and 9 only. If you checked 5c, you **must** fill out this entire page. If you need more space, attach form MC-025 or attach a sheet of paper and write Financial Information and your name and case number at the top.

7 Check here if your income changes a lot from month to month. If it does, complete the form based on your average income for the past 12 months.

8 Your Gross Monthly Income

a. List the source and amount of any income you get each month, including: wages or other income from work before deductions, spousal/child support, retirement, social security, disability, unemployment, military basic allowance for quarters (BAQ), veterans payments, dividends, interest, trust income, annuities, net business or rental income, reimbursement for job-related expenses, gambling or lottery winnings, etc.

- (1) Wages \$ 1,700
(2) \$
(3) \$
(4) \$

b. Your total monthly income: \$ 1,700

9 Household Income

a. List the income of all other persons living in your home who depend in whole or in part on you for support, or on whom you depend in whole or in part for support.

Table with columns: Name, Age, Relationship, Gross Monthly Income. Row 1: Steven Jones, 5, Son, \$ 0.

b. Total monthly income of persons above: \$ 0

Total monthly income and household income (8b plus 9b): \$ 1,700

10 Your Money and Property

a. Cash \$ 40

b. All financial accounts (List bank name and amount):

- (1) Wells Fargo Bank \$ 50
(2) \$
(3) \$

c. Cars, boats, and other vehicles. Table with columns: Make / Year, Fair Market Value, How Much You Still Owe. Row 1: Toyota / 2000, \$ 2,200, \$ 1,200.

d. Real estate. Table with columns: Address, Fair Market Value, How Much You Still Owe. Row 1: None, \$, \$.

e. Other personal property (jewelry, furniture, furs, stocks, bonds, etc.): Table with columns: Describe, Fair Market Value, How Much You Still Owe. Row 1: None, \$, \$.

11 Your Monthly Deductions and Expenses

a. List any payroll deductions and the monthly amount below:

- (1) Federal Income Tax \$ 300
(2) State Income Tax \$ 100
(3) Social Security \$ 75
(4) \$

- b. Rent or house payment & maintenance \$ 1,000
c. Food and household supplies \$ 300
d. Utilities and telephone \$ 65
e. Clothing \$ 50
f. Laundry and cleaning \$ 50
g. Medical and dental expenses \$ 200
h. Insurance (life, health, accident, etc.) \$ 50
i. School, child care \$ 100
j. Child, spousal support (another marriage) \$ 0
k. Transportation, gas, auto repair and insurance \$ 250

l. Installment payments (list each below): Paid to: (1) \$ (2) \$ (3) \$

m. Wages/earnings withheld by court order \$

n. Any other monthly expenses (list each below): Paid to: How Much? (1) \$ (2) \$ (3) \$

Total monthly expenses (add 11a-11n above): \$ 2,540

To list any other facts you want the court to know, such as unusual medical expenses, etc., attach form MC-025 or attach a sheet of paper and write Financial Information and your name and case number at the top. Check here if you attach another page. Important! If your financial situation or ability to pay court fees improves, you must notify the court within five days on form FW-010.

FW-003

**Order on Court Fee Waiver
(Superior Court)**

Clerk stamps date here when form is filed.

① **Person who asked the court to waive court fees:**
Name: Joey Jones
Street or mailing address: 456 Goldman Ave
City: Los Angeles State: CA Zip: 90012

② **Lawyer, if person in ① has one (name, firm name, address, phone number, e-mail, and State Bar number):**

Fill in court name and street address:
Superior Court of California, County of

③ A request to waive court fees was filed on (date): 4/13/2019
 The court made a previous fee waiver order in this case on (date): _____

Fill in case number and name:
Case Number:
19STSC45678
Case Name:
Jones vs Waters

Read this form carefully. All checked boxes are court orders.

Notice: The court may order you to answer questions about your finances and later order you to pay back the waived fees. If this happens and you do not pay, the court can make you pay the fees and also charge you collection fees. If there is a change in your financial circumstances during this case that increases your ability to pay fees and costs, you must notify the trial court within five days. (Use form FW-010.) If you win your case, the trial court may order the other side to pay the fees. If you settle your civil case for **\$10,000** or more, the trial court will have a lien on the settlement in the amount of the waived fees. The trial court may not dismiss the case until the lien is paid.

④ After reviewing your: *Request to Waive Court Fees* *Request to Waive Additional Court Fees*
the court makes the following orders:
a. The court grants your request, as follows:
(1) **Fee Waiver.** The court grants your request and waives your court fees and costs listed below. (Cal. Rules of Court, rules 3.55 and 8.818.) You do not have to pay the court fees for the following:
• Filing papers in superior court • Court fee for phone hearing
• Making copies and certifying copies • Giving notice and certificates
• Sheriff's fee to give notice • Sending papers to another court department
• Reporter's fee for attendance at hearing or trial, if the court is not electronically recording the proceeding and you request that the court provide an official reporter
• Assessment for court investigations under Probate Code section 1513, 1826, or 1851
• Preparing, certifying, copying, and sending the clerk's transcript on appeal
• Holding in trust the deposit for a reporter's transcript on appeal under rule 8.130 or 8.834
• Making a transcript or copy of an official electronic recording under rule 8.835
(2) **Additional Fee Waiver.** The court grants your request and waives your additional superior court fees and costs that are checked below. (Cal. Rules of Court, rule 3.56.) You do not have to pay for the checked items.
 Jury fees and expenses Fees for a peace officer to testify in court
 Fees for court-appointed experts Court-appointed interpreter fees for a witness
 Other (specify): _____

Filing Fee:
\$0000.00- \$1500.00= \$30
\$1500.01-\$5000.00= \$50
\$5000.01- \$10000.00=\$75

- Should look like SC-100 except #3

Case Number:

Defendant (list names): If have filed more than 12 cases= \$100

1 The Plaintiff (the person, business, or public entity that sued first) is:

Name: Dana Pratt Phone: ()
Street address: 900 N Grand Ave Los Angeles CA 90012
Street City State Zip
Mailing address (if different):
Street City State Zip

If more than one Plaintiff, list next Plaintiff here:

Name: _____ Phone: ()
Street address: _____
Street City State Zip
Mailing address (if different): _____
Street City State Zip

Check here if more than 2 Plaintiffs and attach Form SC-120A.

Check here if any Plaintiff is on active military duty and write his or her name here: _____

2 The Defendant (the person, business, or public entity suing now) is:

Name: Steven Pierce Phone: ()
Street address: 987 W Temple St Los Angeles CA 90012
Street City State Zip
Mailing address (if different): _____
Street City State Zip

If more than one Defendant, list next Defendant here:

Name: _____ Phone: ()
Street address: _____
Street City State Zip
Mailing address (if different): _____
Street City State Zip

Check here if more than 2 Defendants and attach Form SC-120A.

Check here if either Defendant listed above is doing business under a fictitious name. If so, attach Form SC-103.

3 The Defendant claims the Plaintiff owes \$ 7,500.00 . (Explain below):

a. Why does the Plaintiff owe the Defendant money? He did not return my security deposit or give me an itemized list of deductions within 21 days after I moved out.

b. When did this happen? (Date): 1/17/2019
If no specific date, give the time period: Date started: _____ Through: _____

c. How did you calculate the money owed to you? (Do not include court costs or fees for service.) I added my original security deposit of \$2,500 & \$5,000 in damages in accordance with Civil Code 1950.5

Check here if you need more space. Attach one sheet of paper or Form MC-031 and write "SC-120, Item 3" at the top.



Case Number:

Defendant (list names): _____

4 You may ask the Plaintiff (in person, in writing, or by phone) to pay you before you sue. Have you done this? Yes No

5 Is your claim about an attorney-client fee dispute? Yes No
If yes, and if you have had arbitration, fill out Form SC-101, attach it to this form, and check here:

6 Are you suing a public entity? Yes No
If yes, you must file a written claim with the public entity first. A claim was filed on (date): _____
If the public entity denies your claim or does not answer within the time allowed by law, you can file this form.

7 Have you filed more than 12 other small claims within the last 12 months in California? Yes No
If yes, the filing fee for this case will be higher.

8 I understand that by filing a claim in small claims court, I have no right to appeal this claim.

9 If I do not have enough money to pay for filing fees or service, I can ask the court to waive those fees.

10 I have not filed, and understand that I cannot file, more than two small claims cases for more than \$2,500 in California during this calendar year.

I declare, under penalty of perjury under California State law, that the information above and on any attachments to this form is true and correct.

Date: 2/18/2019 Steven Pierce
Defendant types or prints name here

S. Pierce
Defendant signs here

Date: _____
Second Defendant types or prints name here

Second Defendant signs here



Requests for Accommodations

Assistive listening systems, computer-assisted, real-time captioning, or sign language interpreter services are available if you ask at least five days before the trial. Contact the clerk's office or go to www.courtinfo.ca.gov/forms for Request for Accommodations by Persons With Disabilities and Response (form MC-410). (Civil Code, § 54.8.)



Need help?

Your county's Small Claims Advisor can help for free.

Or go to "County-Specific Court Information" at:
www.courtinfo.ca.gov/selfhelp/smallclaims

SC-120A**Other Plaintiffs or Defendants**

Case Number: _____

This form is attached to Form SC-120, item 1 or 2.

1 If more than 2 plaintiffs (person, business, or public entity being sued), list their information below:

Other plaintiff's name: _____

Street address: _____ Phone: (____) _____

City: _____ State: _____ Zip: _____

Mailing address (if different): _____

City: _____ State: _____ Zip: _____

Other plaintiff's name: _____

Street address: _____ Phone: (____) _____

City: _____ State: _____ Zip: _____

Mailing address (if different): _____

City: _____ State: _____ Zip: _____

Check here if more than 4 plaintiffs and fill out and attach another Form SC-120A.

2 If more than 2 defendants (person, business, or public entity suing), list their information below:

Other defendant's name: Stephanie Pierce

Street address: 987 W Temple St Phone: (____) _____

City: Los Angeles State: CA Zip: 90012

Mailing address (if different): _____

City: _____ State: _____ Zip: _____

Is this defendant doing business under a fictitious name? Yes No If yes, attach Form SC-103.

Other defendant's name: _____

Street address: _____ Phone: (____) _____

City: _____ State: _____ Zip: _____

Mailing address (if different): _____

City: _____ State: _____ Zip: _____

Is this defendant doing business under a fictitious name? Yes No If yes, attach Form SC-103.

Check here if more than 4 defendants and fill out and attach another Form SC-120A.

3 I understand that by filing a claim in small claims court, I have no right to appeal this claim.

4 I have not filed, and understand that I cannot file, more than two small claims cases for more than \$2,500 in California during this calendar year.

I declare under penalty of perjury under California state law that the information above and on any attachments to this form is true and correct.

Date: 2/18/2019 Dana Pratt
Type or print your name

Dana Pratt
Sign your name

Date: _____
Type or print your name

Sign your name

Filing Fees:
\$0,000.00 - \$1,500.00 = \$30
\$1,500.01 - \$5,000.00 = \$50
\$5,000.01 - No Limit = \$75

Plaintiff (list names):

Case Number:

LARRY LANDLORD

1 The plaintiff (the person, business, or public entity that is suing) is:

Name: Larry Landlord Phone: 213-000-0000

Street address: 450 E Temple St Los Angeles CA 90012
Street City State Zip

Mailing address (if different): 7575 Balboa St Venice CA 90291
Street City State Zip

Email address (if available): Llandlord@gmail.com

If more than one plaintiff, list next plaintiff here:

Name: _____ Phone: _____

Street address: _____
Street City State Zip

Mailing address (if different): _____
Street City State Zip

Email address (if available): _____

- Check here if more than two plaintiffs and attach form [SC-500A](#).
- Check here if either plaintiff listed above is doing business under a fictitious name and attach form [SC-103](#).

2 The defendant (the person being sued) is:

Name: Tommy Tenant Phone: 213-000-0000

Street address: 450 E. Temple St Los Angeles CA 90012
Street City State Zip

Mailing address (if different): Same As Above
Street City State Zip

If more than one defendant, list next defendant here:

Name: Tawny Tenant Phone: 213-000-0000

Street address: 450 E. Temple St Los Angeles CA 90012
Street City State Zip

Mailing address (if different): Same As Above
Street City State Zip

- Check here if more than two defendants and attach form [SC-500A](#).
- Check here if any defendant is on active military duty and write defendant's name here:



Plaintiff (list names):

Case Number: []

3 The plaintiff claims the defendant owes \$ _____ for COVID-19 rental debt (unpaid rent or other financial obligations of a tenant that came due in the period from March 1, 2020, to September 30, 2021). (Code Civ. Proc., § 1179.02.) (Explain amount below.)

a. Rent. List all rent you claim defendant owes that came due in the period from March 1, 2020, to September 30, 2021. For each month you claim rent is due, include each amount due and the date it came due.

March 1st 2020 \$1000 April 1st 2020 \$1000 May 1st 2020 \$1000 June 1st 2020 \$1000 July 1st 2020 \$1000
August 1st 2020 \$1000 September 1st 2020 \$1000 October 1st 2020 \$1000 Novemeber 1st 2020 \$1000
Decemebr1st 2020 \$1000 January 1st 2021 \$1000 February 1st 2021 March 1st 2021 1000
April 1st 2021 \$1000 April 1st 2021 \$1000 May 1st 2021 \$1000 June 1st 2021 \$1000 July 1st 2021 \$1000
August 1st 2021 \$1000 September 1st 2021 \$1000

b. Other amounts of COVID-19 rental debt. List all unpaid financial obligations under the lease or rental agreement (other than rent) that you claim defendant owes and that came due during the period in (a) above. For each month you claim other financial obligations are due, include each amount, the date it came due, and what it was for (for example, parking fees or utilities included as part of the rental agreement).

None

Check here if you need more space. Attach one sheet of paper or form MC-031, and write "SC-500, Item 3" at the top.

4 Amounts paid or offsets.

List any amounts you received from defendant, rental assistance programs, and other third parties that you have already credited, and any other amounts you have offset or credited, for rent or other financial obligations due between March 1, 2020, and September 30, 2021, that you are not claiming in item 3 above. Include each amount, when it was paid or credited, and what it was for.

May 15 2021 \$3000 Rental Assistance Program (RAP) August 15 2000 RAP

Check here if you need more space. Attach one sheet of paper or form MC-031, and write "SC-500, Item 4" at the top.

5 You must ask the defendant (in person, in writing, or by phone) to pay you before you sue. Have you done this?

Yes No If no, explain why not:

[] [] []



Plaintiff (list names):

Case Number: _____

LARRY LANDLORD

6 Why are you filing your claim at this courthouse?

This courthouse covers the area (check one that applies):

- a. Where the defendant lives or does business.
- b. Where the rental agreement, lease, or contract (written or spoken) was made, signed, performed, or broken by the defendant or where the defendant lived or did business when the defendant made the contract.
- c. Other (specify):

7 List the zip code of the place checked in 6 above (if you know it): 90012

8 Have you filed more than 12 other small claims within the last 12 months in California?

Yes No *If yes, the filing fee for this case will be higher.*

9 Plaintiff must make a good-faith effort to help defendant obtain rental assistance before filing this case. Check all that apply below. You must also attach documentation of those efforts or, if you do not have documentation, describe your effort below.

Plaintiff made a good-faith effort to help defendant obtain rental assistance before filing this case, as required under Code of Civil Procedure section 871.10(a), by:

- a. Investigating whether governmental rental assistance is available to the tenant;
- b. Seeking governmental rental assistance for the tenant; or
- c. Cooperating with the tenant's efforts to obtain rental assistance from any governmental entity or other third party.

Check here if documentation is attached. If not attached, describe your efforts below.

I assisted Tenant in applying for government sponsored rental assistance and any amount received has been credited to the amount of Covid related back rent that the teneant owes.

10 I understand that the court cannot issue a judgment for me if I have received rental assistance for the amounts I am claiming from defendant. (Both statements must be true.)

- a. I have not received rental assistance or other financial compensation from any other source corresponding to any of the amount claimed in item 3 above; and
- b. I do not have any application pending for rental assistance or other financial compensation from any other source corresponding to any of the amount claimed in item 3 above.

11 I understand that by filing a claim in small claims court, I have no right to appeal this claim.

I declare under penalty of perjury under the laws of the State of California that the information above and on any attachments to this form is true and correct.

Date: 11/1/2021 Larry Landlord
Plaintiff types or prints name here

Larry Landlord
Plaintiff signs here

Date: _____
Second plaintiff types or prints name here

Second plaintiff signs here



Requests for Accommodations

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least five days before the trial. For these and other accommodations, contact the clerk's office for [Disability Accommodation Request](#) (form MC-410). (Civ. Code, § 54.8.)



[X] This form is attached to form SC-500, item 1 or 2.

1 If more than two plaintiffs (person, business, or entity suing), list their information below:

Other plaintiff's name: _____ Phone: _____

Street address: _____
Street City State Zip

Mailing address (if different): _____
Street City State Zip

Email address (if available): _____

Is this plaintiff doing business under a fictitious name? [] Yes [] No If yes, attach form SC-103.

Other plaintiff's name: _____ Phone: _____

Street address: _____
Street City State Zip

Mailing address (if different): _____
Street City State Zip

Email address (if available): _____

Is this plaintiff doing business under a fictitious name? [] Yes [] No If yes, attach form SC-103.

[] Check here if more than four plaintiffs and fill out and attach another form SC-500A.

2 If more than two defendants (person being sued), list their information below:

Other defendant's name: Douglas Tenant Phone: 213-000-0000

Street address: 450 E. Temple St Los Angeles CA 90012
Street City State Zip

Mailing address (if different): Same As Above
Street City State Zip

Other defendant's name: _____ Phone: _____

Street address: _____
Street City State Zip

Mailing address (if different): _____
Street City State Zip

[] Check here if your case is against more than four defendants and fill out and attach another form SC-500A.

3 I understand that by filing a claim in small claims court, I have no right to appeal this claim.

I declare under penalty of perjury under the laws of the State of California that the information above and on any attachments to this form is true and correct.

Date: 11/1/2021

Larry Landlord
Type or print your name

[Signature]
Sign your name

Date: _____

Type or print your name

[Signature]
Sign your name

SC-500-INFO COVID-19 Rental Debt in Small Claims Court

Beginning **November 1, 2021**, a landlord has the option to bring an action in small claims court to recover COVID-19 rental debt that is more than the normal limits for small claims actions. The purpose of bringing these claims in small claims court is to resolve disputes about COVID-19 rental debt. The small claims court **cannot** determine possession of residential property or evict a tenant from property.

What is COVID-19 rental debt?

COVID-19 rental debt means any unpaid rent or any other money owed under a residential lease or residential rental agreement (for example, parking fees or utility payments) that came due between **March 1, 2020, and September 30, 2021**.

What is small claims court?

Small claims court is a special court where disputes are resolved quickly and inexpensively. The rules are simple and informal. You may ask a lawyer for advice before you go to court, but you cannot have a lawyer in court.

Who are the parties in a small claims case?

- The person who sues is the plaintiff, the **landlord** in these cases. If the landlord is a business, an employee such as a property manager may go to a small claims trial for the landlord (use form [SC-109, Authorization to Appear](#)).
- The person who is sued is the defendant, the **tenant** in these cases. There may be more than one tenant paying rent for a single residence. The landlord may want to name all tenants as defendants.

How does a COVID-19 rental debt case start in the small claims court?

The landlord must:

- Complete and file form [SC-500, Plaintiff's Claim and ORDER to Go to Small Claims Court \(COVID-19 Rental Debt\)](#);
- Attach documentation showing the landlord's good-faith efforts to seek rental assistance (examples of documentation include emails, texts, and notes from phone calls); and
- Serve the form on the tenants (see form [SC-100-INFO, Information for the Plaintiff](#)).

How does a tenant respond?

A tenant does not need to file any papers before the trial date. Tenants should go to court on the day of trial with evidence about the amount of COVID-19 rental debt owed, if any.

What should tenant take to small claims court for a COVID-19 rental debt case?

Both the landlord and the tenant in a small claims action for COVID-19 rental debt can present arguments and evidence about how much money they believe is owed, how much has already been paid, and other factors that can affect the amount of COVID-19 rental debt that must be paid.

The parties should bring the rental agreement, any rental receipts, and any other receipts or other documents that show the following:

- The **amounts** of COVID-19 rental debt owed and the **dates** on which each amount came due. Remember that COVID-19 rental debt means rent and other financial obligations that came due between **March 1, 2020, and September 30, 2021**.
- Any amounts that the tenant **paid** toward the rent or other financial obligations and the **dates of payment**.
- Any other amounts of rent or other obligations that were paid through rental assistance programs or other third parties on behalf of the tenant.
- Any evidence of conditions affecting the residence, such as items needing repair.
- Any evidence to support arguments made to determine the amount of money owed.

Page 2 of this information sheet provides a list of some of the arguments that landlords and tenants can make to help the court determine the amount of COVID-19 rental debt that is owed.

Can you bring a witness to small claims court?

Both the landlord and the tenant may bring witnesses to the trial who can tell the court what they know about the COVID-19 rental debt, the condition of the home, and agreements between the landlord and the tenant about the need for repairs and payment for repairs.

What arguments can you make?

The landlord and tenant may disagree about the amount of rent that is owed for various reasons. Read more about these reasons in the California Department of Real Estate's guide at landlordtenant.dre.ca.gov/resources/guidebook/index.html, in the "[Living in the Rental Unit](#)" and "[Dealing with Problems](#)" sections. Below are questions that can help you identify the issues that may exist in the case and may affect the amount of rent owed.

Please note: This list does not include every possible argument. Other laws, including local ordinances, may affect the rights of landlords and tenants in COVID-19 rental debt cases.

- Did landlord make a good-faith effort to:
 - Investigate whether governmental rental assistance is available to the tenant;
 - Seek governmental rental assistance for the tenant; or
 - Cooperate with the tenant's efforts to obtain rental assistance from any governmental entity or other third party under Civil Code section 1947.3(a)(3)?
- Is there any pending application for rental assistance or other financial compensation from any other source corresponding to the amount claimed?
- Did landlord receive rental assistance or other financial compensation from any other source corresponding to the amount claimed?
- Did landlord improperly apply payments to past-due rent without the tenant's written agreement?
- Does the amount claimed include service fees that were increased or not previously charged?
- Does the amount claimed include late fees on rent or other financial obligations?
- Did landlord improperly raise the rent?
- Did tenant or a third party offer a rental payment that landlord would not accept?
- If the lease or rental agreement was terminated, was the security deposit returned? Read more about the rules for security deposits at www.courts.ca.gov/selfhelp-eviction-security-deposits.htm.
- Did tenant make needed repairs and properly deduct the cost from the rent? If so, did landlord give proper credit?
- Did landlord fail to provide habitable premises? This means that if the housing did not meet certain standards, the amount owed may be reduced.

Note: It is illegal for a landlord to retaliate against a tenant for raising any of the above issues or any of the defenses listed on form [UD-105, Answer—Unlawful Detainer](#).

Can a tenant file a claim in the landlord's case?

A tenant who is a defendant in a COVID-19 rental debt case may bring a claim against the landlord in the same case using form [SC-120, Defendant's Claim and ORDER to Go to Small Claims Court](#).

What if you disagree with the court's decision?

If you are a tenant, you may appeal the decision on a claim filed against you. More information about appeals is available in the information at the end of [Plaintiff's Claim and ORDER to Go to Small Claims Court \(COVID-19 Rental Debt\)](#) (form SC-500) and at www.courts.ca.gov/smallclaims/appeals.

If you are the landlord, you cannot appeal a small claims decision on a claim you filed. (Note that a landlord has the option of filing a COVID-19 rental debt recovery case in general civil court [use form [Complaint—Recovery of COVID-19 Rental Debt](#) (form [PLD-C-500](#))]. In general civil court, all parties may appeal the court's decision and all parties may be represented by lawyers.)

How much does it cost to file a case in small claims court?

The amount the court charges a landlord to file a case in small claims court depends on the amount demanded and how many cases are brought by the landlord in a single year. The filing fees for small claims cases are listed on the Statewide Civil Fee Schedule, available at www.courts.ca.gov/7646.htm. There is no fee for the tenant to go to the hearing.

What if you cannot afford the filing fee?

If you want to sue someone in small claims court and cannot afford to pay court fees and costs, you may not have to pay. The court may waive all or part of those fees if you:

Are getting public benefits; or

- Are a person with very low income; or
- Do not have enough income to pay for your household's basic needs and your court fees.

To ask the court to waive your fees in small claims court, complete form [FW-001, Request to Waive Court Fees](#).

File your request with the court.

Where can you get help with a small claims case?

- **Small Claims Advisors.** Every county has a Small Claims Advisor who is available to help you with your small claims case. These services are free. To find the Small Claims Advisor in your county, go to www.courts.ca.gov/selfhelp-advisors.htm.
- **Forms and online help.** You can find small claims forms and more information about small claims court at the California Courts Online Self-Help Center www.courts.ca.gov/smallclaims. You can also get forms and help at your county law library or the courthouse nearest you.
- **Local court websites.** Your local court may have additional information and help for your small claims matter. Visit your court's website for current information on small claims hearing procedures. For help finding your court, visit www.courts.ca.gov/find-my-court.htm.
- **Legal services organizations.** Local organizations may be able to assist parties in preparing for court. Parties may be able to find a legal service organization that serves their area at <http://lawhelpca.org/>.
- **Lawyers.** Both parties may ask a lawyer about the case, but a lawyer may not represent either party in court at the small claims trial. Generally, after judgment and on appeal, both parties may be represented by lawyers.

What help is available when you go to court?

- **Accommodations for disability.** If you have a disability and need an accommodation while you are at court:
 - You can use form [MC-410, Disability Accommodation Request](#), to tell the court about your needs.
 - For more information about making a disability accommodation request, see form [MC-410-INFO, How to Request a Disability Accommodation for Court](#).
 - Remember to submit your request to the ADA Coordinator or designated person in your court.
 - Visit your court's website to find the ADA Coordinator or designated person. For help finding your court, go to www.courts.ca.gov/find-my-court.htm.
- **Interpreters.** If you do not speak English well:
 - Ask the court clerk as soon as possible for a court-provided interpreter.
 - You may use form [INT-300, Request for Interpreter \(Civil\)](#), or a local court form to request an interpreter.
 - If no court interpreter is available at the time of your trial, it may be necessary to reschedule your trial.
 - You cannot bring your own interpreter for the trial unless the interpreter has been approved by the court as a certified, registered, or provisionally qualified interpreter. See Cal. Rules of Court, rule 2.893, and form [INT-140, Temporary Use of a Noncertified or Nonregistered Spoken Language Interpreter](#).

Who can look at your case file?

If you are sued in small claims court for nonpayment of COVID-19 rental debt, only the following people may see the case file:

- The parties (landlords and tenants).
- A person who gives the court clerk the name of at least one landlord and one tenant.
- A person who lives in the residence for which COVID-19 rental debt is owed who shows proof of residency and gives the clerk the case number or the name of one of the parties.
- A person who gets an order from the court after showing that they have good cause to see the case file.

This form is used to tell the court you are authorized to appear for a plaintiff or defendant in a small claims case. You may also use this form to ask the court for permission to help a plaintiff or defendant who cannot properly speak for himself or herself.

You cannot appear for a defendant or plaintiff if your only job is to represent him or her in small claims court. If you are a lawyer, you can appear only as authorized by section 116.530 of the Code of Civil Procedure.

Fill out 1-4 on this page, then file it with the small claims clerk at or before the trial.

1 List the name, address, and position of the person appearing:

Name: Dana Strauss
Address: 16942 Vanowen St, Van Nuys CA 91406
Job title or relationship to the defendant or plaintiff you want to appear for: Vice President

2 Who are you appearing for?

[X] A defendant in this case (name): ABC Corporation
[] A plaintiff in this case (name):

3 Tell us about the defendant or plaintiff you are appearing for.

I am appearing for a (check one):

- [X] Corporation and I am an employee, officer, or director of that corporation.
[] Partnership and I am an employee, officer, director, or partner of that partnership.
[] Other business (not a corporation, partnership, or sole proprietorship) and I am an employee, officer, or director of that business.
[] Government agency or other public entity and I am an employee, officer, or director of that agency or entity.
[] Sole proprietorship and I am an employee of that business. I am qualified to testify about business records made in the regular course of business at or near the time of the event. The content of the business records is the only issue in this case. (Evidence Code, § 1271).
[] Plaintiff who was assigned to out-of-state active duty in the U.S. armed forces for more than 6 months after filing this claim. I am not being paid to appear. I have not appeared in small claims court for other people more than 4 times in this calendar year.
[] Defendant or plaintiff who is in a jail, a prison, or another detention facility now. I am not being paid to appear. I have not appeared in small claims court for other people more than 4 times in this calendar year.
[] Owner of rental property in California who employs me as a property agent. This claim is about the rental property I manage.
[] Association created to manage a common interest development and I am an agent, management company representative, or bookkeeper for that association.
[] Husband or wife and my spouse and I are both listed on this claim and agree that either spouse can appear for the other.
[] Other (explain):

4 I declare under penalty of perjury under California state law that the information above is true and correct.

Date: 3/29/2019

Dana Strauss
Type or print your name

[Signature]
Sign your name

Clerk stamps date here when form is filed.

-Bring completed form on the date of the hearing

Fill in court name and street address:

Superior Court of California, County of

Fill in your case number and case name below:

Case Number:

19PDSC12345

Case Name:

Jose Garcia vs. ABC Corporation

NAME, ADDRESS, AND TELEPHONE NUMBER OF PARTY: Theresa Johnson 123 Main Street Any Town, CA 90012	RESERVED FOR CLERK'S FILE STAMP TIP: This form is no longer accepted in LA County Small Claims Court
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN JOAQUIN	
BRANCH NAME: Pasadena Court MAILING ADDRESS: 300 E Walnut Ave STREET ADDRESS: Pasadena, CA 91101 CITY AND ZIP CODE:	
PLAINTIFF: Theresa Johnson DEFENDANT: Place to Go, Inc.	CASE NUMBER:
<p style="text-align: center;">REQUEST FOR CERTIFIED MAIL (SMALL CLAIMS)</p>	

I am the Plaintiff Defendant in the above entitled action and hereby request that my claim be served via certified mail addressed as follows:

Party Name: Places to Go, Inc.

Agent for Service (if applicable): CT Corporation System

Party or Agent for Service Address: 818 W. Seventh Street, Suite 930

City, State and Zip Code: Los Angeles, CA 90017

NOTE:

The clerk will attempt to serve your claim by certified mail, return receipt requested, restricted delivery (to be signed by addressee only) for a separate fee for each party served.

THIS SERVICE IS NOT GUARANTEED TO BE RELIABLE.

THERE IS NO REFUND IF THE PARTY IS NOT SERVED.

THE COURT WILL NOT NOTIFY YOU AS TO WHETHER OR NOT THE CLAIM HAS BEEN SERVED.

You may call the Small Claims Division or visit the court's website at www.sjcourts.org to verify if the party has been served.

Date: 1/29/2016

Name: Theresa Johnson

Theresa Johnson
Signature

Case Number: []

[x] This form is attached to Form SC-100, item 7. It tells the court that you are suing about a disagreement for \$5,000 or less in attorney fees and that you have tried to solve the disagreement through arbitration. Read page 2 of this form before you fill out this form. It explains your rights and some small claims terms.

1 How much money is in dispute? \$ 4250.00 2 You are (check one): [] Attorney [x] Client

3 What did the arbitrator decide? (Check one):
a. [x] The [x] attorney [] client has to pay the other party this amount: \$
b. [] Neither party has to pay the other party anything.

4 Write the date your Notice of Award was mailed here: (Look at the bottom of the Notice.)

5 Why are you filing in small claims court now? (Check what you are asking the judge to do):
a. [x] I want the court to confirm the award.
b. [] I want the court to correct the award because (check only one and explain below):
1. [] It contains an error in calculation or a mistake in describing someone or something in the award.
2. [] The arbitrator considered legal issues not allowed in this kind of hearing and the award can be corrected so it is fair.
3. [] It doesn't follow the rules for proper wording, information, or signature. (State Bar Rule 37.2 et seq.)

Explain: _____

c. [] I want the court to vacate (cancel) the award because (check only one and explain below):
1. [] It was obtained by fraud, corruption, or other unfair means.
2. [] The arbitrator was corrupt.
3. [] The arbitrator did something wrong that substantially hurt my case.
4. [] The arbitrator considered legal issues not allowed in this kind of hearing and the award cannot be corrected so it is fair.
5. [] The arbitrator unfairly refused to postpone my case or refused to consider important evidence that could help settle the dispute or conducted the hearing in another way that is not allowed.
6. [] The arbitrator knew of reasons why he or she could have been disqualified but did not disclose this information or did not disqualify himself or herself after I asked the arbitrator to do so at the proper time.

Explain: _____

[] Check here if you are asking for a new arbitration hearing.
d. [] I want a trial in small claims court to decide the fee dispute. (You can check this option only if you did not agree in writing to a binding award and you file this form within 30 days after the Notice of the Award.)

6 Did you (or your attorney) go to the arbitration hearing? [x] Yes [] No (If no, explain below):

7 Attach a copy of the Arbitration Agreement and the Notice of Award (the arbitrator's decision). If you do not attach them, explain why here: _____

Date: 3/28/2019 Thomas Williams
Type or print your name

[Signature] T. Williams
Sign your name

<p><small>ATTORNEY (Name, State Bar number, and address):</small> Ella Jones 456 Bird Lane Los Angeles, CA 90012</p> <p>TELEPHONE NO.: 213-978-4444 FAX NO. (Optional):</p> <p><small>E-MAIL ADDRESS (Optional):</small></p> <p><small>ATTORNEY FOR (Name):</small></p>	<p style="text-align: center;"><small>FOR COURT USE ONLY</small></p> <p>-File with SC-100 or SC-120 when necessary -Do not serve copy to Defendant</p>
<p>SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles</p> <p><small>STREET ADDRESS:</small></p> <p><small>MAILING ADDRESS:</small> 110 N Grand Ave</p> <p><small>CITY AND ZIP CODE:</small> Los Angeles, CA 90012</p> <p><small>BRANCH NAME:</small> Stanley Mosk</p>	
<p><small>PLAINTIFF/PETITIONER:</small> Mark Jones, a minor by Ella Jones, his mother</p> <p><small>DEFENDANT/RESPONDENT:</small> John Doe</p>	
<p>APPLICATION AND ORDER FOR APPOINTMENT OF GUARDIAN AD LITEM—CIVIL</p> <p><input type="checkbox"/> EX PARTE</p>	<p><small>CASE NUMBER:</small> 19STSC12345</p>
<p>NOTE: This form is for use in civil proceedings in which a party is a minor, an incapacitated person, or a person for whom a conservator has been appointed. A party who seeks the appointment of a guardian ad litem in a family law or juvenile proceeding should use form FL-935. A party who seeks the appointment of a guardian ad litem in a probate proceeding should use form DE-350/GC-100. An individual cannot act as a guardian ad litem unless he or she is represented by an attorney or is an attorney.</p>	

1. Applicant (name): Ella Jones is
- a. the parent of (name): Mark Jones
 - b. the guardian of (name):
 - c. the conservator of (name):
 - d. a party to the suit.
 - e. the minor to be represented (if the minor is 14 years of age or older).
 - f. another interested person (specify capacity):
- * A minor of 14 years old and older must petition the Court on their own behalf, the minor is the applicant.
2. This application seeks the appointment of the following person as guardian ad litem (state name, address, and telephone number):
 Ella Jones
 456 Bird Lane
 Los Angeles, CA 90012 213-978-4444
3. The guardian ad litem is to represent the interests of the following person (state name, address, and telephone number):
 Mark Jones
 456 Bird Lane
 Los Angeles, CA 90012 213-978-4444
4. The person to be represented is:
- a. a minor (date of birth): 11/08/2008
 - b. an incompetent person.
 - c. a person for whom a conservator has been appointed.
5. The court should appoint a guardian ad litem because:
- a. the person named in item 3 has a cause or causes of action on which suit should be brought (describe):
 The cause of action is personal injury.
 A guardian is required to represent the minor's interest.
- Continued on Attachment 5a.

PLAINTIFF/PETITIONER: Mark Jones, a minor by Ella Jones, his mother	CASE NUMBER: 19STSC12345
DEFENDANT/RESPONDENT: John Doe	

5. b. more than 10 days have elapsed since the summons in the above-entitled matter was served on the person named in item 3, and no application for the appointment of a guardian ad litem has been made by the person identified in item 3 or any other person.
- c. the person named in item 3 has no guardian or conservator of his or her estate.
- d. the appointment of a guardian ad litem is necessary for the following reasons (*specify*):

Continued on Attachment 5d.

6. The proposed guardian ad litem's relationship to the person he or she will be representing is:

- a. related (*state relationship*): **Mother**
- b. not related (*specify capacity*):

7. The proposed guardian ad litem is fully competent and qualified to understand and protect the rights of the person he or she will represent and has no interests adverse to the interests of that person. (*If there are any issues of competency or qualification or any possible adverse interests, describe and explain why the proposed guardian should nevertheless be appointed*):

Continued on Attachment 7.

(TYPE OR PRINT NAME)

(SIGNATURE OF ATTORNEY)

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

Date: 06/02/2019

Ella Jones

(TYPE OR PRINT NAME)

E. Jones

(SIGNATURE OF APPLICANT)

CONSENT TO ACT AS GUARDIAN AD LITEM

I consent to the appointment as guardian ad litem under the above petition.

Date: 06/02/2019

Ella Jones

(TYPE OR PRINT NAME)

E. Jones

(SIGNATURE OF PROPOSED GUARDIAN AD LITEM)

ORDER EX PARTE

THE COURT FINDS that it is reasonable and necessary to appoint a guardian ad litem for the person named in item 3 of the application, as requested.

THE COURT ORDERS that (*name*): **Ella Jones** is hereby appointed as the guardian ad litem for (*name*): **Mark Jones** for the reasons set forth in item 5 of the application.

Date:

JUDICIAL OFFICER

SIGNATURE FOLLOWS LAST ATTACHMENT

ATTORNEY (Name, State Bar number, and address): Tom Jones 456 Bird Lane Los Angeles, CA 90012 TELEPHONE NO.: 213-978-4444 FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):	FOR COURT USE ONLY -File with SC-100 or SC-120 when necessary -Do not serve copy to Defendant
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: MAILING ADDRESS: 110 N Grand Ave CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME:	
PLAINTIFF/PETITIONER: Tom Jones, a minor by Mia Jones, his mother DEFENDANT/RESPONDENT: John Doe	
APPLICATION AND ORDER FOR APPOINTMENT OF GUARDIAN AD LITEM—CIVIL <input type="checkbox"/> EX PARTE	
CASE NUMBER: 19STSC01234	
NOTE: This form is for use in civil proceedings in which a party is a minor, an incapacitated person, or a person for whom a conservator has been appointed. A party who seeks the appointment of a guardian ad litem in a family law or juvenile proceeding should use form FL-935. A party who seeks the appointment of a guardian ad litem in a probate proceeding should use form DE-350/GC-100. An individual cannot act as a guardian ad litem unless he or she is represented by an attorney or is an attorney.	

1. Applicant (name): Tom Jones is
 - a. the parent of (name):
 - b. the guardian of (name):
 - c. the conservator of (name):
 - d. a party to the suit.
 - e. the minor to be represented (if the minor is 14 years of age or older).
 - f. another interested person (specify capacity):

2. This application seeks the appointment of the following person as guardian ad litem (state name, address, and telephone number):
 Jessica Jones
 2121 Goodland Ave
 Studio City, CA 91604 818-781-3333

3. The guardian ad litem is to represent the interests of the following person (state name, address, and telephone number):
 Tom Jones
 456 Bird Lane
 Los Angeles, CA 90012 213-978-4444

4. The person to be represented is:
 - a. a minor (date of birth): 11/08/2004
 - b. an incompetent person.
 - c. a person for whom a conservator has been appointed.

5. The court should appoint a guardian ad litem because:
 - a. the person named in item 3 has a cause or causes of action on which suit should be brought (describe):
 The cause of action is personal injury.
 A guardian is required to represent the minor's interest.

- Continued on Attachment 5a.

PLAINTIFF/PETITIONER: Tom Jones, a minor by Mia Jones, his mother	CASE NUMBER:
DEFENDANT/RESPONDENT: John Doe	19STSC01234

5. b. more than 10 days have elapsed since the summons in the above-entitled matter was served on the person named in item 3, and no application for the appointment of a guardian ad litem has been made by the person identified in item 3 or any other person.
- c. the person named in item 3 has no guardian or conservator of his or her estate.
- d. the appointment of a guardian ad litem is necessary for the following reasons (*specify*):

Continued on Attachment 5d.

6. The proposed guardian ad litem's relationship to the person he or she will be representing is:
- a. related (*state relationship*): Mother *If the guardian is not a parent, submit a declaration to explain why a parent is not the guardian.
- b. not related (*specify capacity*):

7. The proposed guardian ad litem is fully competent and qualified to understand and protect the rights of the person he or she will represent and has no interests adverse to the interests of that person. (*If there are any issues of competency or qualification or any possible adverse interests, describe and explain why the proposed guardian should nevertheless be appointed*):

Continued on Attachment 7.

 (TYPE OR PRINT NAME) (SIGNATURE OF ATTORNEY)

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
 Date: 06/02/2019

Tom Jones _____
 (TYPE OR PRINT NAME) (SIGNATURE OF APPLICANT)

CONSENT TO ACT AS GUARDIAN AD LITEM

I consent to the appointment as guardian ad litem under the above petition.
 Date: 06/02/2019

Mia Jones _____
 (TYPE OR PRINT NAME) (SIGNATURE OF PROPOSED GUARDIAN AD LITEM)

ORDER EX PARTE

THE COURT FINDS that it is reasonable and necessary to appoint a guardian ad litem for the person named in item 3 of the application, as requested.

THE COURT ORDERS that (*name*): Mia Jones
 is hereby appointed as the guardian ad litem for (*name*): Tom Jones
 for the reasons set forth in item 5 of the application.

Date:

 JUDICIAL OFFICER
 SIGNATURE FOLLOWS LAST ATTACHMENT

ATTORNEY (Name, State Bar number, and address): Mary Jones 456 Bird Lane Los Angeles, CA 90012 TELEPHONE NO.: 213-978-4444 FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):	FOR COURT USE ONLY -File with SC-100 or SC-120 when necessary -Do not serve copy to Defendant
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: MAILING ADDRESS: 110 N Grand Ave CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Stanley Mosk	
PLAINTIFF/PETITIONER: Susan Smith, an incompetent person by Mary Jones, her daughter DEFENDANT/RESPONDENT: John Doe	
APPLICATION AND ORDER FOR APPOINTMENT OF GUARDIAN AD LITEM—CIVIL <input type="checkbox"/> EX PARTE	CASE NUMBER: 19PDSC01234
NOTE: This form is for use in civil proceedings in which a party is a minor, an incapacitated person, or a person for whom a conservator has been appointed. A party who seeks the appointment of a guardian ad litem in a family law or juvenile proceeding should use form FL-935. A party who seeks the appointment of a guardian ad litem in a probate proceeding should use form DE-350/GC-100. An individual cannot act as a guardian ad litem unless he or she is represented by an attorney or is an attorney.	

1. Applicant (name): _____ is
- a. the parent of (name):
 - b. the guardian of (name):
 - c. the conservator of (name):
 - d. a party to the suit.
 - e. the minor to be represented (if the minor is 14 years of age or older).
 - f. another interested person (specify capacity): Daughter
2. This application seeks the appointment of the following person as guardian ad litem (state name, address, and telephone number):
 Mary Jones
 456 Bird Lane
 Los Angeles, CA 90012 213-978-4444
3. The guardian ad litem is to represent the interests of the following person (state name, address, and telephone number):
 Susan Smith
 288 Forbes Ave
 Los Angeles, CA 90008 213-979-3456
4. The person to be represented is:
- a. a minor (date of birth):
 - b. an incompetent person.
 - c. a person for whom a conservator has been appointed.
5. The court should appoint a guardian ad litem because:
- a. the person named in item 3 has a cause or causes of action on which suit should be brought (describe):
 The cause of action is personal injury.
 The incompetent adult has no general guardian.
- Continued on Attachment 5a.

PLAINTIFF/PETITIONER: Susan Smith, an incompetent person by Mary	CASE NUMBER: 19PDSC01234
DEFENDANT/RESPONDENT: John Doe	

5. b. more than 10 days have elapsed since the summons in the above-entitled matter was served on the person named in item 3, and no application for the appointment of a guardian ad litem has been made by the person identified in item 3 or any other person.
- c. the person named in item 3 has no guardian or conservator of his or her estate.
- d. the appointment of a guardian ad litem is necessary for the following reasons (*specify*):

Continued on Attachment 5d.

6. The proposed guardian ad litem's relationship to the person he or she will be representing is:

- a. related (*state relationship*): Daughter
- b. not related (*specify capacity*):

7. The proposed guardian ad litem is fully competent and qualified to understand and protect the rights of the person he or she will represent and has no interests adverse to the interests of that person. (*If there are any issues of competency or qualification or any possible adverse interests, describe and explain why the proposed guardian should nevertheless be appointed*):

Continued on Attachment 7.

 (TYPE OR PRINT NAME) (SIGNATURE OF ATTORNEY)

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

Date: 06/02/2019

Mary Jones

 (TYPE OR PRINT NAME)

▶ *Mary Jones*

 (SIGNATURE OF APPLICANT)

CONSENT TO ACT AS GUARDIAN AD LITEM

I consent to the appointment as guardian ad litem under the above petition.

Date: 06/02/2019

Mary Jones

 (TYPE OR PRINT NAME)

▶ *Mary Jones*

 (SIGNATURE OF PROPOSED GUARDIAN AD LITEM)

ORDER EX PARTE

THE COURT FINDS that it is reasonable and necessary to appoint a guardian ad litem for the person named in item 3 of the application, as requested.

THE COURT ORDERS that (*name*): Mary Jones is hereby appointed as the guardian ad litem for (*name*): Susan Smith for the reasons set forth in item 5 of the application.

Date:

 JUDICIAL OFFICER
 SIGNATURE FOLLOWS LAST ATTACHMENT

<p>ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Jane Doe 123 Main Street Los Angeles, CA 90012</p> <p>TELEPHONE NO.: 213-554-1212 FAX NO. (Optional): 213-554-1234 E-MAIL ADDRESS (Optional): Tip: MUST include a telephone # ATTORNEY FOR (Name): and fax # (it's not optional)</p>	<p>FOR COURT USE ONLY</p> <p>- See Procedure Manual - Include "by fax" next to the signature - \$4.50 to fax file = 0.75 for each page</p>
<p>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</p> <p>STREET ADDRESS: 111 N Hill St MAILING ADDRESS : CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Stanley Mosk</p>	
<p>PLAINTIFF/PETITIONER: Jane Doe DEFENDANT/RESPONDENT: Mike Jones</p>	
<p>FACSIMILE TRANSMISSION COVER SHEET</p>	<p>CASE NUMBER 19STSC01234</p>

TO THE COURT:

1. Please file the following transmitted documents in the order listed below:

<u>Document name</u>	<u>No. of pages</u>
SC-100 Plaintiff Claim	5
SC-103 Fictitious Business Name	1

Please fax back conformed copy*

NOTE: A conformed copy is not the same as an original filed form

Tip: List total number of pages faxed including cover sheet (MC-005)

2. Processing instructions consisting of: 7 pages are also transmitted.

3. Fee required Filing fee Fax fee (Cal. Rules of Court, rule 10.815)

a. Credit card payment I authorize the above fees and any amount imposed by the card issuer or draft purchaser to be charged to the following account:

VISA MASTERCARD Account No.: 311752844698668 Expiration date: 11/2023

Jane Doe

 (TYPE OR PRINT NAME OF CARDHOLDER)



 (SIGNATURE OF CARDHOLDER)

b. Attorney account (Cal. Rules of Court, rule 2.304). Please charge my account no.:

MC-410

Disability Accommodation Request

CONFIDENTIAL

If you have a disability and need an accommodation while you are at court, you can use this form to make your request. For more information, see form [MC-410-INFO](#).



Make this request at least **5 days** (when the court is open) before you need the accommodation.

Clerk receives and date stamps here.

1 Your information

Name: Jessica Garcia
Address: 123 Main Street
Los Angeles, CA 90012
Phone: 213-555-5555
Email: j.garcia@email.com

Court Name and Address:
Los Angeles County
Stanley Mosk Courthouse
111 N. Hill St.
Los Angeles, CA 90012

2 How are you involved in the case?

Juror Party Witness Lawyer
 Other (explain):

Case Number (if you know it):
19STSC01234

Case Name/Type (if you know it):
Garcia vs. Smith

3 When and where do you need the accommodation? [date(s), time(s), and court location] 12/1/2019, 10:30am, Stanley Mosk Courthouse, 111 N. Hill Street, Los Angeles CA 90012. Department 90.

4 What accommodation do you need at the court?

Sign Language Interpreter

5 Why do you need this accommodation to assist you in court?

Plaintiff is hearing impaired.

More information on this request is attached.

Date: 10/1/2019

Jessica Garcia
Type or print name

Jessica Garcia
Signature

(Optional) If a court employee, caregiver or other person helped fill out this form and is willing to provide more information if needed, provide contact information below:

Name: _____ Email: _____ Phone: _____



NAME, ADDRESS, AND TELEPHONE NUMBER OF PARTY: David Davis 123 Main Street, Los Angeles, CA, 90012	RESERVED FOR CLERK'S FILE STAMP - A civil case must be filed first
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES	
COURTHOUSE ADDRESS: 111 N Hill St Rm 113 Los Angeles CA 90012	
PLAINTIFF: Patty Pali DEFENDANT: David Davis	
APPLICATION AND ORDER FOR TRANSFER (SMALL CLAIMS)	CASE NUMBER: 19PDSC12345

TO THE CLERK OF THE ABOVE-NAMED COURT:

The small claims case is currently set as follows:			
Date: 03/15/2019	Time: 8:30	<input checked="" type="checkbox"/> a.m. <input type="checkbox"/> p.m.	Department: D90 Room: 540

- Defendant(s): _____ applies for an order under the provisions of Section 116.390 of the Code of Civil Procedure to transfer the above-entitled matter to the court named below.
- The defendant has commenced a civil lawsuit against the plaintiff as follows:
 Department: 51
 Case Number: 19C12345
 Date of Filing: 2/06/2019
- A true copy of the complaint is attached hereto and incorporated herein by reference.

Important Notice:
 The defendant understands that unless he/she is otherwise notified by the court, that he/she must appear in the small claims court for the date and time the case has been scheduled.

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

02/06/2019 David Davis D. Davis
 Date Type or Printed Name Signature of Defendant or Defendant's Attorney

ORDER

Pursuant to the Code of Civil Procedure section 116.390(c), it is ordered that the small claims case be transferred to the following court:

Department: _____ Courthouse: _____ District: _____
 Date: _____ Signature: _____
Judicial Officer

SC-104

Proof of Service

Use this form to serve a **person**, a **business**, or a **public entity**. To learn more about proof of service, read *What Is "Proof of Service"?*, Form SC-104B. To learn more about how to serve a business or entity, read *How to Serve a Business or Public Entity*, Form SC-104C.

To serve a **business**, you must serve **one** of the following people:

- Owner (for a sole proprietorship)
- Partner (for a partnership) or general partner (for a limited partnership)
- Any officer or general manager (corporation or association)
- Any person authorized for service by the business (corporation, association, general partnership, limited partnership)
- Any person authorized for service with the Secretary of State (corporation, association, limited liability company [LLC], limited liability partnership [LLP], limited partnership)

To serve a **public entity**, you must first file a claim with that entity, then serve **one** of the following people:

- Clerk (of a city or county)
- Chief officer or director (of a public agency)
- Any person authorized for service by the entity

- ① a. If you are serving a **person**, write the person's name below:
Esther Pratt
- b. If you are serving a **business** or **entity**, write the name of the business or entity, the person authorized for service, and that person's job title:

Business or Agency Name

Person Authorized for Service

Job Title

② Instructions to Server:

You must be at least 18 years old and **not be named in this case**. Follow these steps:

- Give a copy of all the documents checked in ③ to the person in ①, **or**
 - Give a copy of all the documents checked in ③ to one of the following people:
 - a. A competent adult (at least 18) living with, and at the home of the person in ①, **or**
 - b. An adult (at least 18) who seems to be in charge at the usual workplace of the person in ①, **or**
 - c. An adult (at least 18) who seems to be in charge where the person in ① usually receives mail (but not a U.S. Post Office box), if there is no known physical address for the person in ①.
- and** mail a copy of the documents left with one of the adults in a, b, or c above to the person in ①.

THEN

- Complete and sign this form, and
- Give or mail your completed form to the person who asked you to serve these court papers, **in time for the form to be filed with the court at least 5 days before the hearing.**

③ I served the person in ① a copy of the documents checked below:

- a. SC-100, *Plaintiff's Claim and ORDER to Go to Small Claims Court*
- b. SC-120, *Defendant's Claim and ORDER to Go to Small Claims Court*
- c. Order for examination (This form must be personally served. Check the form that was served):

Note: The court can issue a civil arrest warrant if the served party does not come to court only if the order for examination was personally served by a registered process server, sheriff, marshal, or someone appointed by the court.

- (1) SC-134, *Application and Order to Produce Statement of Assets and to Appear for Examination*
- (2) AT-138/EJ-125, *Application and Order for Appearance and Examination*

- d. Other (*specify*): _____

Clerk stamps date here when form is filed.

- Form must be completed by server
- Must be filed at least 5 days before the hearing

Fill in court name and street address:

Superior Court of California, County of

Los Angeles
Stanley Mosk Courthouse
111 N. Hill St.
Los Angeles, CA 90012

Fill in case number, case name, hearing date, day, time, and department below:

Case Number:

19STSC01234

Case Name:

Jones vs. Pratt

Hearing Date:

3/12/2019

Time: 1:30 PM

Dept.: 90



Case name: _____

Case Number: _____

4 Fill out "a" or "b" below:

a. **Personal Service:** I personally gave copies of the documents checked in **(3)** to the person in **(1)**

On (date): 2/19/2019 At (time): 10:00 a.m. p.m.

At this address: 2225 Balboa Street

City: Los Angeles State: CA Zip: 90006

b. **Substituted Service:** I personally gave copies of the documents checked in **(3)** (a, b, or d) to (check one):

A competent adult (at least 18) at the home of, and living with the person in **(1)**, or

An adult who seems to be in charge where the person in **(1)** usually works, or

An adult who seems to be in charge where the person in **(1)** usually receives mail, or has a private post office box (not a U.S. Post Office box), if there is no known physical address for the person in **(1)**.

I told that adult, "Please give these court papers to (name of person in **(1)**)."

I did this on (date): _____ At (time): _____ a.m. p.m.

At this address: _____

City: _____ State: _____ Zip: _____

Name or description of the person I gave the papers to: _____

After serving the court papers, I put copies of the documents listed in **(3)** in an envelope, sealed the envelope, and put first-class prepaid postage on it. I addressed the envelope to the person in **(1)** at the address where I left the copies.

I mailed the envelope on (date): _____ from (city, state): _____ by leaving it (check one):

a. At a U.S. Postal Service mail drop, or

b. At an office or business mail drop where I know the mail is picked up every day and deposited with the U.S. Postal Service, or

c. With someone else I asked to mail the documents to the person in **(1)**, and I have attached that person's completed Form SC-104A.

5 Server's Information

Name: Jack Shelton Phone: 213-555-1212

Address: 1885 North La Brea Ave

City: Hollywood State: CA Zip: 90028

Fee for service: \$ _____

If you are a registered process server:

County of registration: _____ Registration number: _____

6 I declare under penalty of perjury under California state law that I am at least 18 years old and not named in this case and that the information above is true and correct.

Date: 2/19/2019

Jack Shelton
Type or print server's name

Jack Shelton
Server signs here after serving

SC-104

Proof of Service

Use this form to serve a **person**, a **business**, or a **public entity**. To learn more about proof of service, read *What Is "Proof of Service"?*, Form SC-104B. To learn more about how to serve a business or entity, read *How to Serve a Business or Public Entity*, Form SC-104C.

To serve a **business**, you must serve **one** of the following people:

- Owner (for a sole proprietorship)
- Partner (for a partnership) or general partner (for a limited partnership)
- Any officer or general manager (corporation or association)
- Any person authorized for service by the business (corporation, association, general partnership, limited partnership)
- Any person authorized for service with the Secretary of State (corporation, association, limited liability company [LLC], limited liability partnership [LLP], limited partnership)

To serve a **public entity**, you must first file a claim with that entity, then serve **one** of the following people:

- Clerk (of a city or county)
- Chief officer or director (of a public agency)
- Any person authorized for service by the entity

① a. If you are serving a **person**, write the person's name below:

b. If you are serving a **business** or **entity**, write the name of the business or entity, the person authorized for service, and that person's job title:

Jackson Corporation

Business or Agency Name

Alexander Clark

Person Authorized for Service

Agent for Service of Process

Job Title

② Instructions to Server:

You must be at least 18 years old and **not be named in this case**. Follow these steps:

- Give a copy of all the documents checked in ③ to the person in ①, **or**
- Give a copy of all the documents checked in ③ to one of the following people:
 - a. A competent adult (at least 18) living with, and at the home of the person in ①, **or**
 - b. An adult (at least 18) who seems to be in charge at the usual workplace of the person in ①, **or**
 - c. An adult (at least 18) who seems to be in charge where the person in ① usually receives mail (but not a U.S. Post Office box), if there is no known physical address for the person in ①. **and** mail a copy of the documents left with one of the adults in a, b, or c above to the person in ①.

THEN

- Complete and sign this form, and
- Give or mail your completed form to the person who asked you to serve these court papers, **in time for the form to be filed with the court at least 5 days before the hearing.**

③ I served the person in ① a copy of the documents checked below:

- a. SC-100, *Plaintiff's Claim and ORDER to Go to Small Claims Court*
- b. SC-120, *Defendant's Claim and ORDER to Go to Small Claims Court*
- c. Order for examination (This form must be personally served. Check the form that was served):

Note: The court can issue a civil arrest warrant if the served party does not come to court only if the order for examination was personally served by a registered process server, sheriff, marshal, or someone appointed by the court.

- (1) SC-134, *Application and Order to Produce Statement of Assets and to Appear for Examination*
- (2) AT-138/EJ-125, *Application and Order for Appearance and Examination*

d. Other (*specify*): _____

Clerk stamps date here when form is filed.

- Form must be completed by server
- Must be filed at least 5 days before the hearing

Fill in court name and street address:

Superior Court of California, County of

Los Angeles
Stanley Mosk Courthouse
111 N. Hill St.
Los Angeles, CA 90012

Fill in case number, case name, hearing date, day, time, and department below:

Case Number:

19STSC12345

Case Name:

Jones vs. John Smith DBA John's Towing Service

Hearing Date: 12/24/2019

Time: 8:30 AM

Dept.: 2



Case name: _____

Case Number: _____

4 Fill out "a" or "b" below:

a. **Personal Service:** I personally gave copies of the documents checked in **3** to the person in **1**

On (date): _____ At (time): _____ a.m. p.m.

At this address: _____

City: _____ State: _____ Zip: _____

b. **Substituted Service:** I personally gave copies of the documents checked in **3** (a, b, or d) to (check one):

A competent adult (at least 18) at the home of, and living with the person in **1**, or

An adult who seems to be in charge where the person in **1** usually works, or

An adult who seems to be in charge where the person in **1** usually receives mail, or has a private post office box (not a U.S. Post Office box), if there is no known physical address for the person in **1**.

I told that adult, "Please give these court papers to (name of person in **1**)."

I did this on (date): 11/1/2019 At (time): 10:30 a.m. p.m.

At this address: 456 White Oak Ave

City: Los Angeles State: CA Zip: 90011

Name or description of the person I gave the papers to: Alexander Clark

After serving the court papers, I put copies of the documents listed in **3** in an envelope, sealed the envelope, and put first-class prepaid postage on it. I addressed the envelope to the person in **1** at the address where I left the copies.

I mailed the envelope on (date): 11/1/2019 from (city, state): Torrance, CA

by leaving it (check one):

a. At a U.S. Postal Service mail drop, or

b. At an office or business mail drop where I know the mail is picked up every day and deposited with the U.S. Postal Service, or

c. With someone else I asked to mail the documents to the person in **1**, and I have attached that person's completed Form SC-104A.

5 Server's Information

Name: Jack Shelton Phone: 213-555-1212

Address: 1885 North La Brea Ave

City: Hollywood State: CA Zip: 90028

Fee for service: \$ 40.00

If you are a registered process server:

County of registration: _____ Registration number: _____

6 I declare under penalty of perjury under California state law that I am at least 18 years old and not named in this case and that the information above is true and correct.

Date: 11/5/2019

Jack Shelton
Type or print server's name

Jack Shelton
Server signs here after serving

SC-104

Proof of Service

Use this form to serve a **person**, a **business**, or a **public entity**. To learn more about proof of service, read *What Is "Proof of Service"?*, Form SC-104B. To learn more about how to serve a business or entity, read *How to Serve a Business or Public Entity*, Form SC-104C.

To serve a **business**, you must serve **one** of the following people:

- Owner (for a sole proprietorship)
- Partner (for a partnership) or general partner (for a limited partnership)
- Any officer or general manager (corporation or association)
- Any person authorized for service by the business (corporation, association, general partnership, limited partnership)
- Any person authorized for service with the Secretary of State (corporation, association, limited liability company [LLC], limited liability partnership [LLP], limited partnership)

To serve a **public entity**, you must first file a claim with that entity, then serve **one** of the following people:

- Clerk (of a city or county)
- Chief officer or director (of a public agency)
- Any person authorized for service by the entity

- ① a. If you are serving a **person**, write the person's name below:
John Smith DBA John's Towing Service
- b. If you are serving a **business** or **entity**, write the name of the business or entity, the person authorized for service, and that person's job title:

Business or Agency Name

Person Authorized for Service

Job Title

② Instructions to Server:

You must be at least 18 years old and **not be named in this case**. Follow these steps:

- Give a copy of all the documents checked in ③ to the person in ①, *or*
 - Give a copy of all the documents checked in ③ to one of the following people:
 - a. A competent adult (at least 18) living with, and at the home of the person in ①, *or*
 - b. An adult (at least 18) who seems to be in charge at the usual workplace of the person in ①, *or*
 - c. An adult (at least 18) who seems to be in charge where the person in ① usually receives mail (but not a U.S. Post Office box), if there is no known physical address for the person in ①.
- and* mail a copy of the documents left with one of the adults in a, b, or c above to the person in ①.

THEN

- Complete and sign this form, and
- Give or mail your completed form to the person who asked you to serve these court papers, *in time for the form to be filed with the court at least 5 days before the hearing.*

③ I served the person in ① a copy of the documents checked below:

- a. SC-100, *Plaintiff's Claim and ORDER to Go to Small Claims Court*
- b. SC-120, *Defendant's Claim and ORDER to Go to Small Claims Court*
- c. Order for examination (This form must be personally served. Check the form that was served):

Note: The court can issue a civil arrest warrant if the served party does not come to court only if the order for examination was personally served by a registered process server, sheriff, marshal, or someone appointed by the court.

- (1) SC-134, *Application and Order to Produce Statement of Assets and to Appear for Examination*
- (2) AT-138/EJ-125, *Application and Order for Appearance and Examination*

- d. Other (*specify*): _____

Clerk stamps date here when form is filed.

- Form must be completed by server
- Must be filed at least 5 days before the hearing

Fill in court name and street address:

Superior Court of California, County of
 Los Angeles
 Stanley Mosk Courthouse
 111 N. Hill St.
 Los Angeles, CA 90012

Fill in case number, case name, hearing date, day, time, and department below:

Case Number:

19STSC12345

Case Name:

Jones vs. John Smith DBA John's Towing Service

Hearing Date: 12/24/2019

Time: 8:30 AM

Dept.: 2



Case name: _____

Case Number: _____

4 Fill out "a" or "b" below:

a. **Personal Service:** I personally gave copies of the documents checked in **3** to the person in **1**

On (date): _____ At (time): _____ a.m. p.m.

At this address: _____

City: _____ State: _____ Zip: _____

b. **Substituted Service:** I personally gave copies of the documents checked in **3** (a, b, or d) to (check one):

A competent adult (at least 18) at the **home** of, and living with the person in **1**, or

An adult who seems to be in charge where the person in **1** usually **works**, or

An adult who seems to be in charge where the person in **1** usually **receives mail**, or has a private post office box (not a U.S. Post Office box), if there is no known physical address for the person in **1**.

I told that adult, "Please give these court papers to (name of person in **1**)."

I did this on (date): 11/1/2019 At (time): 10:30 a.m. p.m.

At this address: 456 White Oak Ave

City: Los Angeles State: CA Zip: 90011

Name or description of the person I gave the papers to: Karen Li, Manager

After serving the court papers, I put copies of the documents listed in **3** in an envelope, sealed the envelope, and put first-class prepaid postage on it. I addressed the envelope to the person in **1** at the address where I left the copies.

I mailed the envelope on (date): 11/1/2019 from (city, state): Torrance, CA
by leaving it (check one):

a. At a U.S. Postal Service mail drop, or

b. At an office or business mail drop where I know the mail is picked up every day and deposited with the U.S. Postal Service, or

c. With someone else I asked to mail the documents to the person in **1**, and I have attached that person's completed Form SC-104A.

5 Server's Information

Name: Jack Shelton Phone: 213-555-1212

Address: 1885 North La Brea Ave

City: Hollywood State: CA Zip: 90028

Fee for service: \$ 40.00

If you are a registered process server:

County of registration: _____ Registration number: _____

6 I declare under penalty of perjury under California state law that I am at least 18 years old and not named in this case and that the information above is true and correct.

Date: 11/5/2019

Jack Shelton
Type or print server's name

Jack Shelton
Server signs here after serving

What is “service”?

“Service” or “serving” is when someone—*not you or anyone else listed in this case*—gives a copy of your court papers to the person, business, or public entity you are suing. Service lets the other party know:

- What you are asking for;
- When and where the trial will be; *and*
- What the party can choose to do.

There are strict rules for serving court papers. This form explains how to serve these forms:

- Form SC-100, *Plaintiff’s Claim*
- Form SC-120, *Defendant’s Claim*
- Form SC-500, *Plaintiff’s Claim (COVID-19 Rental Debt)*

How is service done?

This form tells you how to serve by *personal* service or *substituted* service.

Personal service means someone gives the papers directly to the person being sued or to the agent authorized to accept service (business or public entity).

Substituted service means someone gives the papers to an adult where the person lives, works, or receives mail (including a private post office box, but not a U.S. Postal Service P.O. Box).

What if the court papers do not get served?

The judge cannot hear your case unless the court papers were served correctly.

Can the court serve the papers for me?

Yes. You can pay the court to mail your claim to the person you are suing. But if the person you are suing or the person’s agent for service doesn’t sign the U.S. Postal Service mail receipt with his or her complete name, or if someone else signs the receipt, you will have to serve again using personal or substituted service.

Who can serve?

You can ask a friend, a process server, or the sheriff. The server must be at least 18 and not listed in the case. A “process server” is someone you pay to deliver court forms. Look in the *Yellow Pages* under “Process Serving.” The sheriff (or marshal if your county has one) can also deliver court forms. Ask the court clerk how to contact the sheriff. Or look in the county section of your phone book under “Sheriff.” You must pay the server, unless you qualify for a fee waiver.

How is *personal* service done?

Ask someone who is at least 18 and not listed in this case to personally “serve” (give) a copy of your court papers to the person or the agent authorized to accept court papers for the person, business, or public entity listed on form SC-104.

Give the server a separate *Proof of Service* form for each person, business, or public entity you are suing. And tell the server to:

- Walk up to the person to be served.
- Say, “These are court papers.”
- Give the person copies of all papers checked on form SC-104, *Proof of Service*. If the person won’t take the papers, just leave them near the person. It doesn’t matter if the person tears them up.
- Fill out and sign page 2 of form SC-104, *Proof of Service*.

How is *substituted* service done?

If you don’t want to use personal service or can’t find the person to be served, ask someone who is at least 18 and not listed in this case to serve the court papers.

Give the server a separate *Proof of Service* form for each person, business, or public entity you are suing. Tell the server to give the papers to:

- A competent adult (at least 18) at the home of and living with the person to be served *or*
- An adult who seems to be in charge where the person to be served usually works *or*
- An adult who seems to be in charge where the person receives mail (including a private mailbox, but **not** a U.S. Postal Service P.O. Box). *Note:* This is only for cases where the physical address of the person to be served is not known.

Then do the following:

- Write down that person’s name and say, “Please give these court papers to [name of person to be served].” If the person does not want to give his or her name, describe the person you served.
- Give that person copies of all papers checked on form SC-104, *Proof of Service*. If the person won’t take the papers, just leave them near the person.
- Mail another copy of the papers (by first-class mail) to the person being sued at the same address where you left the papers.
- Fill out and sign page 2 of form SC-104, *Proof of Service*.

What does the server do with the original Proof of Service form?

If a process server or sheriff served the papers, he or she can file form SC-104, *Proof of Service*, with the clerk. If the server used a different *Proof of Service* form, ask him or her to list each paper served on the form. Also make sure that the registered server will file the original directly with the court and will mail you a copy of the filed form. Take it with you when you go to court.

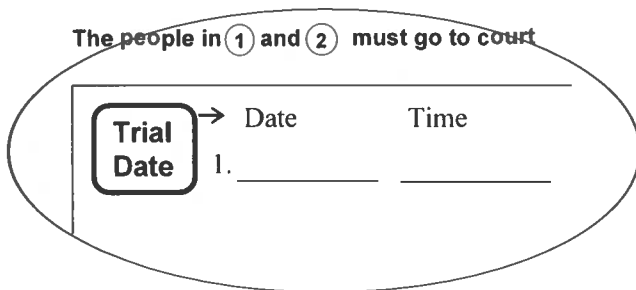
If a friend served the papers, tell him or her to give the completed form back to you. Keep a copy for your records and take the copy with you when you go to court.

You need to file the original completed *Proof of Service* form **5 days before** your trial.

When do the court forms have to be served?

- **If you are serving form SC-100, *Plaintiff’s Claim*, or form SC-500, *Plaintiff’s Claim (COVID-19 Rental Debt)***, look at the trial date on page 1. Then, look at a calendar.

For *personal* service, subtract 15 days from the trial date (or 20 days if the person, business, or public entity is located outside the county). That’s the deadline for serving your small claims forms. But you can serve the forms before the deadline.



The people in ① and ② must go to court

For *substituted* service, subtract 25 days from the date the server mailed a copy of the court papers served (or 30 days if the person, business, or public entity is located outside the county). That’s the deadline for serving your small claims forms. But you can serve the forms before the deadline.

If the person, business, or public entity to be served is outside California or if you are serving a different form, ask the Small Claims Advisor for more information.

- **If you are serving form SC-120, *Defendant’s Claim***, look at the trial date on page 1. Then look at a calendar.

For *personal* or *substituted* service, subtract 5 days from the trial date. That’s the deadline for serving your small claims forms if you were served at least 11 days before the trial. If you were served 10 days or less before the trial date, you must serve at least 1 day before the trial. But you can serve the forms before the deadline.

What if I can’t get the court papers served before the trial?

If you were not able to serve your claim (form SC-100, SC-120, or SC-500) before the deadline for service, talk to your Small Claims Clerk. Each county has its own rules.

If you already served your claim on some parties but not everyone you are suing, you may need to fill out and file form SC-150, *Request to Postpone Trial*, at least 10 days before the trial date (or explain why you couldn’t meet the 10-day deadline). Then give or mail a copy of this form to all other plaintiffs and defendants listed on your court papers.

The court may postpone your trial for 15 days or more.

Who do I have to serve?

If you are suing a person (or people)—not a business or public entity—serve each person you are suing. For example, if you were in a car accident and you are suing the owner and the driver of the car, you must list the names of the owner *and* the driver on your claim and serve both people.

Examples:

If the owner and driver are the same person:
Lee Smith, owner and driver

If the owner and driver are not the same person:
Lee Smith, owner and driver
Bob Smith, owner

If you are suing a business, an association, or a public entity, read form SC-104C, *How to Serve a Business*.



Need help?

Your county’s Small Claims Advisor can help for free.

Or go to “County-Specific Court Information” at www.courts.ca.gov/selfhelp-smallclaims.htm

SC-104C How to Serve a Business or Public Entity (Small Claims)

You must serve the *right* person and write the *exact* name of the business and the person to be served. Use this form to make sure you serve correctly, and follow the instructions on *Proof of Service*, form SC-104.

Business Type:	Sole Proprietorship (Only 1 owner)	Partnership	Landlord	Corporation, Association	Limited Liability Company (LLC), Limited Liability Partnership (LLP), Limited Partnership (LP)	Unknown Business Type
Serve:	The owner	If you are suing a partnership, serve one of the partners. If you are suing a partnership and the partners, serve each partner.	The property owner or manager (<i>Read Civil Code sections 1962-1962.7.</i>)	Agent for service listed with Secretary of State or any corporate officer (president, vice-president, secretary, treasurer), chief executive officer (CEO), controller, chief financial officer, or general manager	Agent for service listed with Secretary of State To serve a limited partnership, you can also serve the general partner.	Someone who seems to be in charge of the business during normal business hours
Write on your Proof of Service form:	<ul style="list-style-type: none"> • Business name • Owner's name and job title 	<ul style="list-style-type: none"> • Partnership name • Name of partner, general manager, or agent for service and job title 	<ul style="list-style-type: none"> • Business name (if there is one) • Owner's name and job title 	<ul style="list-style-type: none"> • Corporation name • Name of corporate officer or agent for service and job title 	<ul style="list-style-type: none"> • Company or partnership name • Name of agent or partner for service and job title 	<ul style="list-style-type: none"> • Business name, form unknown • Owner's name and job title (<i>if you know it</i>)
Check that you have the exact names of the owner and business with:	<ul style="list-style-type: none"> • County Clerk-Recorder's or County Tax Assessor's Office (Ask to see the fictitious business name statement.) Your county's Web site may have this information. Check: www.csac.counties.org. • City Clerk's Office (Ask to see the business license.) Your city's website may have this information. 	County Tax Collector	Search under Corporation, LP and LLC at the California Secretary of State website: businesssearch.sos.ca.gov/ Or call: 1-916-657-5448	Search under Corporation, LP and LLC at the California Secretary of State website: businesssearch.sos.ca.gov/ Or call: 1-916-657-5448 OR County Clerk-Recorder's Office: (Ask to see the fictitious business name statement.) Your county's website may have this information. OR City Clerk's Office: (Ask to see the business license.) Your city's website may have this information.	Try the other resources listed on this page to see if they know more about the business's organization type, like corporation or sole proprietorship.	



Need help?

For free help, contact your county's Small Claims Advisor:

Or, go to "County-Specific Court Information" at: www.courts.ca.gov/selfhelp/smallclaims

SC-104C How to Serve a Business or Public Entity (Small Claims)

You must serve the *right* person and write the *exact* name of the public agency and the person to be served. Use this form to make sure you serve correctly, and follow the instructions on *Proof of Service*, form SC-104.

	City, County, or Public Entity	State of California, State Agency	Federal Agency
<p>Serve:</p> <p>City or county clerk, chief officer or director of public agency, or agent authorized to accept service</p>	<p>Use this general address for service: Office of the Attorney General 1300 I Street Sacramento, CA 95814</p> <p>Exception: if your claim involves California Department of Transportation (Caltrans), serve it at: California Department of Transportation 1120 N Street Sacramento, CA 95814</p>	<p>Use this general address for service: Office of the Attorney General 1300 I Street Sacramento, CA 95814</p> <p>Exception: if your claim involves California Department of Transportation (Caltrans), serve it at: California Department of Transportation 1120 N Street Sacramento, CA 95814</p>	<p>You cannot sue a federal agency in small claims court.</p>
<p>Write on your Proof of Service form:</p>	<p>Important! Before you sue, you must first file a claim with the public entity. Contact it and ask for the claim procedures.</p> <ul style="list-style-type: none"> Name of city, county, or public entity Name of city clerk, county clerk, chief officer, or agent for service and job title 	<p>Note: Before you sue, you must first file a claim with the state or the state agency. To file a claim, see: www.dgs.ca.gov/orim/Programs/GovernmentClaims.aspx or call: 1-800-955-0045</p> <ul style="list-style-type: none"> Name of the agency you are suing Name of agent for service 	
<p>Check that you have the exact names of the owner and business with:</p>	<p>Call the city or county clerk. See the government pages of your phone book.</p> <p>Or search under the California Roster at the California Secretary of State website: www.sos.ca.gov/administration/california-roster/</p>	<p>Call the agency to confirm the name and address for service. Use the State Directory: 1-800-807-6755</p> <p>Or search: cold.ca.gov under "agency information"</p>	



Need help?
For free help, contact your county's Small Claims Advisor:

Case Number: _____

See instructions on other side.

This form is attached to the document checked in ② below.

① Server's Information

Name: Lily Bailey Phone: _____

Street or mailing address: 412 Nutmeg Lane

City: Los Angeles State: CA Zip Code: 90015

Check here if you are a registered process server, and write:

County where registered: _____ Registration #: _____

② Form or document served

a. Form SC-105, Request for Court Order and Answer

b. Form SC-109, Authorization to Appear

c. Form SC-114, Request to Amend Claim Before Hearing

d. Form SC-133, Judgment Debtor's Statement of Assets

e. Form SC-150, Request to Postpone Trial

f. Form SC-221, Response to Request to Make Payments

g. Other document allowed to be served by mail (specify):

Check here if there is not enough space below to list the document served. List the document on a separate page, and write "SC-112A, Item 2" at the top.

EJ-190 Application for and Renewal of Judgment

EJ-195 Notice of Renewal of Judgment

③ Server's declaration

a. I am 18 or older. I am not a party to this small claims case. I live or work in the county where I did the mailing described below.

b. I placed copies of the document checked in ② and an unsigned copy of this page in a sealed envelope, addressed as follows:

Check here if there is not enough space below to list all parties served. List their names and addresses on a separate page, and write "SC-112A, Item 3" at the top.

Name of party served	Mailing address on the envelope
David Jones	456 Bird Avenue, Los Angeles, CA 90012

c. On (date of mailing): 11/20/2019, I placed each envelope in the mail, with postage paid, at (city and state of mailing): Los Angeles, CA

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

Date: 11/21/2019

Lily Bailey
Type or print server's name

Lily Bailey
Server signs here

Instructions for Form SC-112A, Proof of Service by Mail

(This page is **not** part of the Proof of Service and does not need to be copied, served, or filed.)

Form SC-112A can be used to show the court that these documents were served by mail:

- Form SC-105, *Request for Court Order and Answer*
- Form SC-109, *Authorization to Appear*
- Form SC-114, *Request to Amend Claim Before Hearing*
- Form SC-133, *Judgment Debtor's Statement of Assets*
- Form SC-150, *Request to Postpone Trial*
- Form SC-221, *Response to Request to Make Payments*
- Other documents that are allowed to be served by mail

Form SC-112A cannot be used to prove service of these forms:

- Form SC-100, *Plaintiff's Claim and ORDER to Go to Small Claims Court*
- Form SC-120, *Defendant's Claim and ORDER to Go to Small Claims Court*

For information about serving these forms, see Form SC-104, *Proof of Service*, and Form SC-104B, *What Is "Proof of Service"?*

The server (the person who will do the mailing):

- **Must not** be a party (plaintiff or defendant) in the case
- **May** be a friend, relative, co-worker, or other helpful person
- **Must** be 18 or older
- **Must** live or work in the county where the mailing takes place

Follow these steps to use Form SC-112A:

1. Prepare Form SC-112A by filling in:

- The case number
- The document to be served, in item ② *
- The names and addresses of the parties to be served, in item ③

*Prepare a separate Form SC-112A for each document to be served.

2. Give the server:

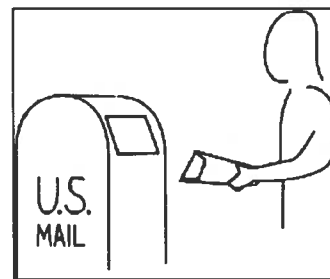
- The partially completed Form SC-112A
- One copy of the document to be served for each party to be served

3. Ask the server to:

- Fill out the remainder of the Form SC-112A.
- Mail *each party to be served*:
 - An unsigned copy of the completed Form SC-112A and
 - The document to be served (checked in Item ②).
- Sign a separate Form SC-112A for each document served, and give it to back you.

4. File these papers with the small claims court clerk:

- The original of each document served, with
- The signed, original *Proof of Service by Mail* attached



Need help?

For free help, contact your county's small claims advisor:

[local info here]

Or go to "County-Specific Court Information" at www.courtinfo.ca.gov/selfhelp/smallclaims.


ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO: NAME: Noel Jones FIRM NAME: STREET ADDRESS: 456 Goodland Avenue CITY: Los Angeles STATE: CA ZIP CODE: 90012 TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (Name):	FOR COURT USE ONLY -File prior to hearing -Can only be filed by party initiating claim
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: MAILING ADDRESS: 110 North Grand Avenue CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Stanley Mosk	
Plaintiff/Petitioner: Noel Jones Defendant/Respondent: Sarah Smith	
REQUEST FOR DISMISSAL	
CASE NUMBER: 19STSC12345	
A conformed copy will not be returned by the clerk unless a method of return is provided with the document.	
This form may not be used for dismissal of a derivative action or a class action or of any party or cause of action in a class action. (Cal. Rules of Court, rules 3.760 and 3.770.)	

1. TO THE CLERK: Please dismiss this action as follows:
- a. (1) With prejudice (2) Without prejudice
 - b. (1) Complaint (2) Petition
 - (3) Cross-complaint filed by (name): on (date):
 - (4) Cross-complaint filed by (name): on (date):
 - (5) Entire action of all parties and all causes of action
 - (6) Other (specify):* Small Claims
2. (Complete in all cases except family law cases.)
 The court did did not waive court fees and costs for a party in this case. (This information may be obtained from the clerk. If court fees and costs were waived, the declaration on the back of this form must be completed).

Date: 4/16/2019
 Noel Jones

(TYPE OR PRINT NAME OF ATTORNEY PARTY WITHOUT ATTORNEY)

*If dismissal requested is of specified parties only of specified causes of action only, or of specified cross-complaints only, so state and identify the parties, causes of action, or cross-complaints to be dismissed.


 (SIGNATURE)


Attorney or party without attorney for:
 Plaintiff/Petitioner Defendant/Respondent
 Cross Complainant

3. TO THE CLERK: Consent to the above dismissal is hereby given.**

Date:

(TYPE OR PRINT NAME OF ATTORNEY PARTY WITHOUT ATTORNEY)

** If a cross-complaint – or Response (Family Law) seeking affirmative relief – is on file, the attorney for cross-complainant (respondent) must sign this consent if required by Code of Civil Procedure section 581 (i) or (j).


 (SIGNATURE)

Attorney or party without attorney for:
 Plaintiff/Petitioner Defendant/Respondent
 Cross Complainant

- (To be completed by clerk)
- 4. Dismissal entered as requested on (date):
 - 5. Dismissal entered on (date): as to only (name):
 - 6. Dismissal not entered as requested for the following reasons (specify):
 - 7. a. Attorney or party without attorney notified on (date):
 - b. Attorney or party without attorney not notified. Filing party failed to provide a copy to be conformed means to return conformed copy
- Date: Clerk, by _____, Deputy

Plaintiff/Petitioner: Noel Jones Defendant/Respondent: Sarah Smith	CASE NUMBER: 19STSC12345
---	-----------------------------

COURT'S RECOVERY OF WAIVED COURT FEES AND COSTS

If a party whose court fees and costs were initially waived has recovered or will recover \$10,000 or more in value by way of settlement, compromise, arbitration award, mediation settlement, or other means, the court has a statutory lien on that recovery. The court may refuse to dismiss the case until the lien is satisfied. (Gov. Code, § 68637.)

Declaration Concerning Waived Court Fees

1. The court waived court fees and costs in this action for (name):
2. The person named in item 1 is (check one below):
 - a. not recovering anything of value by this action.
 - b. recovering less than \$10,000 in value by this action.
 - c. recovering \$10,000 or more in value by this action. (If item 2c is checked, item 3 must be completed.)
3. All court fees and court costs that were waived in this action have been paid to the court (check one): Yes ✓ No

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

Date: 7/18/2019

Noel Jones

Noel Jones

(TYPE OR PRINT NAME OF ATTORNEY PARTY MAKING DECLARATION) (SIGNATURE)

SAMPLE

SC-150**Request to Postpone Trial**

See instructions on other side.

① My name is: Pat Waters
 Mailing address: 123 Main St
Los Angeles, CA 90012
 Phone: (564) 555-5555

I am a (check one): plaintiff defendant in this case.② My trial is now scheduled for (date): 01/15/2019③ I ask the court to postpone my trial until (approximate date):
02/10/2019

④ I am asking for this postponement because (explain):
 If your answer will not fit in the space below, check this box and attach your answer on a separate sheet of paper. Write "SC-150, Item 4" at the top.
Need more time to prepare for trial.

⑤ If your trial is scheduled within the next 10 days, explain why you did not ask for a postponement sooner.
 If your answer will not fit in the space below, check this box and attach your answer on a separate sheet of paper. Write "SC-150, Item 5" at the top.

⑥ Has your claim been served by a method allowed by law? (See form SC-104B, What Is "Proof of Service"?, for information about how the claim can be served. Check and complete all that apply):

If your answer will not fit in the space below, check this box and attach your answer on a separate sheet of paper. Write "SC-150, Item 6" at the top.

a. No. I am a defendant and have not filed a claim in this case.b. Yes. The parties listed below have been served:(1) _____, who lives in: _____, was served on: _____
name county date(2) _____, who lives in: _____, was served on: _____
name county datec. No. The parties listed below have not been served (list names):

(1) _____ (2) _____

d. I do not know. The court clerk mailed my claim, and I do not know if the court received the signed receipt for these parties (list names):

(1) _____ (2) _____

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

Date: 01/06/2019

Pat Waters
 Type or print your name

Pat Waters
 Sign here

Clerk stamps here when form is filed.

-Fill out and make copies for the other parties
 -Have someone other than yourself mail copies of form to all other parties
 -Have person who mails the papers complete SC-112A
 -File original SC-150 and SC-112A with court.
 * Include a \$10 check if party has been served with SC-100

Fill in the court name and street address:

Superior Court of California, County of
Stanley Mosk
111 N. Hill St. Room 113
Los Angeles, CA 90012

Fill in your case number and case name:

Case Number:
19STSC00001
Case Name:
Johnson vs. Waters

Instructions for Form SC-150, Request to Postpone Trial

(This page is *not* part of Form SC-150 and does not need to be copied, served, or filed.)

Who can use this form?

- Anyone who filed a small claims case and wants to postpone or reschedule the trial for any good reason, including because he or she has not served all of the defendants
- Anyone who was sued in a small claims case and wants to postpone or reschedule the trial for any good reason

Do I have to use this form?

No. You may write a letter instead of using this form. Your letter should explain why you want to change your court date and include the other information that is requested on this form.

How do I ask for a postponement?

- Fill out Form SC-150, *Request to Postpone Trial*, (on the other side of these instructions), or write a letter that includes the information requested on this form.
- Have all other parties in your case served with a copy of your request. You may serve by mail or in person. Use Form SC-104, *Proof of Service*, or Form SC-112A, *Proof of Service by Mail*.
- File your request and the completed *Proof of Service* with the small claims court clerk. You may have to pay a \$10 fee, depending on when (or if) the claim was served. If you cannot afford to pay a required fee, see Form FW-001-INFO, *Information Sheet on Waiver of Superior Court Fees and Costs*.

How will I know the court's decision?

If the court postpones the trial, the court will mail a notice with the new hearing date to all plaintiffs and defendants in this case.

If the court does not postpone the trial, the trial will be on the date when it is currently scheduled. The court will notify the person who filed the *Request*.

If you do not hear from the court, you should go to court on the scheduled trial date.



Need help?

For free help, contact your county's small claims advisor:

Or go to "County-Specific court Information" at www.courtinfo.ca.gov/selfhelp/smallclaims

<p>ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Melissa Messi 12345 Main St., Los Angeles, CA 90001</p> <p>TELEPHONE NO.: 213-333-3333 FAX NO. (Optional):</p> <p>E-MAIL ADDRESS (Optional):</p> <p>ATTORNEY FOR (Name):</p>	<p>FOR COURT USE ONLY</p> <p>- Can be used as a witness statement or to appear by declaration</p>
<p>SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: 111 N. Hill Street, Room 113 MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Stanley Mosk</p>	
<p>PLAINTIFF/PETITIONER: Peter Pique DEFENDANT/RESPONDENT: Dina Donna</p>	
<p>DECLARATION</p>	<p>CASE NUMBER: 19STSC12345</p>

Melissa Messi writes her witness statement in this area.

SAMPLE

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

Date: 01/21/2019

Melissa Messi
(TYPE OR PRINT NAME)

Melissa Messi
(SIGNATURE OF DECLARANT)

- Attorney for Plaintiff Petitioner Defendant
 Respondent Other (Specify):
Witness

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): Susan Jones 456 Bird Lane Los Angeles, CA 90004 TELEPHONE NO.: 213-555-4444 FAX NO. (<i>Optional</i>): E-MAIL ADDRESS (<i>Optional</i>): ATTORNEY FOR (<i>Name</i>):	FOR COURT USE ONLY -Cannot be filed on behalf of other party. -Must be filed and served
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: MAILING ADDRESS: 110 N Grand Ave CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Stanley Mosk	
PLAINTIFF/PETITIONER: Susan Jones	CASE NUMBER: 19STSC01234
DEFENDANT/RESPONDENT: John Doe	JUDICIAL OFFICER:
NOTICE OF CHANGE OF ADDRESS OR OTHER CONTACT INFORMATION	DEPT.:

1. Please take notice that, as of (*date*): 3-01-2019

- the following self-represented party or
 the attorney for:
- a. plaintiff (*name*): Susan Jones
b. defendant (*name*):
c. petitioner (*name*):
d. respondent (*name*):
e. other (*describe*):

has changed his or her address for service of notices and documents or other contact information in the above-captioned action.

A list of additional parties represented is provided in Attachment 1.

2. The new address or other contact information for (*name*): Susan Jones

is as follows:

- a. Street: 3853 Goodland Place
b. City: Northridge
c. Mailing address (*if different from above*):
d. State and zip code: CA, 91326
e. Telephone number: 818-222-5555
f. Fax number (*if available*):
g. E-mail address (*if available*):

3. All notices and documents regarding the action should be sent to the above address.

Date: 4-04-2019

Susan Jones

(TYPE OR PRINT NAME)



(SIGNATURE OF PARTY OR ATTORNEY)

PLAINTIFF/PETITIONER: Susan Jones	CASE NUMBER: 19STSC01234
DEFENDANT/RESPONDENT: John Doe	

**PROOF OF SERVICE BY FIRST-CLASS MAIL
NOTICE OF CHANGE OF ADDRESS OR OTHER CONTACT INFORMATION**

(NOTE: This page may be used for proof of service by first-class mail of the Notice of Change of Address or Other Contact Information. Please use a different proof of service, such as Proof of Service—Civil (form POS-040), if you serve this notice by a method other than first class-mail, such as by fax or electronic service. You cannot serve the Notice of Change of Address or Other Contact Information if you are a party in the action. The person who served the notice must complete this proof of service.)

1. At the time of service, I was at least 18 years old and not a party to this action.
2. I am a resident of or employed in the county where the mailing took place. My residence or business address is (specify):
5201 White Oak Avenue
Studio City, CA 91604
3. I served a copy of the *Notice of Change of Address or Other Contact Information* by enclosing it in a sealed envelope addressed to the persons at the addresses listed in item 5 and (check one):
 - a. deposited the sealed envelope with the United States Postal Service with postage fully prepaid.
 - b. placed the sealed envelope for collection and for mailing, 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 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 *Notice of Change of Address or Other Contact Information* was placed in the mail:
 - a. on (date): 4/03/2019
 - b. at (city and state): Studio City, CA
5. The envelope was addressed and mailed as follows:

<ol style="list-style-type: none"> a. Name of person served: John Doe Street address: 4562 Victory Blvd City: Van Nuys State and zip code: CA 91401 	<ol style="list-style-type: none"> c. Name of person served: Street address: City: State and zip code:
<ol style="list-style-type: none"> b. Name of person served: Street address: City: State and zip code: 	<ol style="list-style-type: none"> d. Name of person served: Street address: City: State and zip code:

Names and addresses of additional persons served are attached. (You may use form POS-030(P).)

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

Date: 4/03/2019

Gail Strauss

(TYPE OR PRINT NAME OF DECLARANT)



G. Strauss

(SIGNATURE OF DECLARANT)

NAME, ADDRESS, AND TELEPHONE NUMBER OF ATTORNEY OR PARTY WITHOUT ATTORNEY: Sarah Patts 578 Main Street Los Angeles, CA 90001		STATE BAR NUMBER:	<i>Reserved for Clerk's File Stamp</i> *Note: Can be filed before or on hearing date to reject assigned judge from hearing the case. * File if litigant believes the judge was biased against them
ATTORNEY FOR (Name): SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES			
COURTHOUSE ADDRESS: 111 N Hill Street, Los Angeles, CA 90012			
PLAINTIFF/PETITIONER: Sarah Patts			
DEFENDANT/RESPONDENT: Mike Jones			
PEREMPTORY CHALLENGE TO JUDICIAL OFFICER (Code Civ. Proc., § 170.6)			CASE NUMBER: 19STSC98745

Name of Judicial Officer: (PRINT) Robert Smith	Dept. Number: 92
<input type="checkbox"/> Judge <input checked="" type="checkbox"/> Commissioner <input type="checkbox"/> Referee	

I am a party (or attorney for a party) to this action or special proceeding. The judicial officer named above, before whom the trial of, or a hearing in, this case is pending, or to whom it has been assigned, is prejudiced against the party (or his or her attorney) or the interest of the party (or his or her attorney), so that declarant cannot, or believes that he or she cannot, have a fair and impartial trial or hearing before the judicial officer.

DECLARATION

I declare under penalty of perjury, under the laws of the State of California, that the information entered on this form is true and correct.

Filed on behalf of: Sarah Patts
Name of Party

- Plaintiff/Petitioner Cross Complainant
 Defendant/Respondent Cross Defendant
 Other: _____

Dated: 09/03/2019

Sarah Patts
Signature of Declarant

Sarah Patts
Printed Name

Date

Rank and Full Name
Street Address
City, State Zip Code

Honorable Judge's Name
Street Address
City, State Zip Code

RE: Request for Stay of Proceedings
Docket/Case No.: XXXXXXXXXXX

Dear Honorable Judge's Name:

Pursuant to the Servicemembers' Civil Relief Act ("SCRA") 50 U.S.C. App. Section 522, this letter is my formal written request for a stay of proceedings, in the above referenced case. I am currently serving on active duty with the **Branch of Armed Forces**.

I am unable to appear before this Court on the date of the scheduled hearing because **Briefly explain why you are unable to appear**. However, I am able to appear before this Court on or after **Date**. I respectfully request this Court to stay the proceedings of this case until **Date**. Unless the period of my military service is extended, I will be able to appear within 90 days after the date of termination of military service identified in the enclosed orders.

Please find the attached letter from my commanding officer.

If you have any questions or concerns, you may contact me at the above address, or my commanding officer's address on the attached letter.

Respectfully Submitted,

Rank and Full Name

Attachment(s):
Commanding Officer's Letter
Orders to Active Duty
Orders to Deploy

<p>ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NUMBER</p> <p>NAME: Joey Jones</p> <p>FIRM NAME:</p> <p>STREET ADDRESS: 112 Kingsley Drive</p> <p>CITY: Los Angeles STATE: CA ZIP CODE: 90027</p> <p>TELEPHONE NO: FAX NO:</p> <p>E-MAIL ADDRESS:</p> <p>ATTORNEY FOR (name):</p>	<p>FOR COURT USE ONLY</p> <p>-Can only be filed at Stanley Mosk</p>
<p><input type="checkbox"/> COURT OF APPEAL, APPELLATE DISTRICT, DIVISION</p> <p><input checked="" type="checkbox"/> SUPERIOR COURT OF CALIFORNIA, COUNTY OF</p> <p>STREET ADDRESS: 111 North Hill Street</p> <p>MAILING ADDRESS:</p> <p>CITY AND ZIP CODE: Los Angeles, CA 90012</p> <p>BRANCH NAME: Stanley Mosk</p>	
<p>PLAINTIFF/PETITIONER: Joey Jones</p> <p>DEFENDANT/RESPONDENT: John Smith, Trustee, of the John Smith Trust</p> <p>OTHER:</p>	
<p>REQUEST TO FILE</p> <p>NEW LITIGATION BY VEXATIOUS LITIGANT</p>	
<p>Type of case: <input type="checkbox"/> Limited Civil <input type="checkbox"/> Unlimited Civil <input checked="" type="checkbox"/> Small Claims</p> <p><input type="checkbox"/> Family Law <input type="checkbox"/> Probate <input type="checkbox"/> Other</p>	
<p>CASE NUMBER 19STSC72642</p>	

1. I have been determined to be a vexatious litigant and must obtain prior court approval to file any new litigation in which I am not represented by an attorney. Filing new litigation means (1) commencing any civil action or proceeding, or (2) filing any petition, application, or motion (except a discovery motion) under the Family or Probate Code.
2. I have attached to this request a copy of the document to be filed and I request approval from the presiding justice or presiding judge of the above court to file this document (name of document):

SC-100 Plaintiff's claim and order to go to court.
3. The new filing has merit because (Provide a brief summary of the facts on which your claim is based; the harm you believe you have suffered or will suffer; and the remedy or resolution you are seeking):

My former landlord for property 573 Goody Ave. Apt. #3, Los Angeles, CA 90015 failed to return my security deposit after 21 days. I have contacted the manager of the property and have received no response. The apartment was left in good condition and rent was paid up until the time I vacated the property. I believe my landlord is keeping my deposit in bad faith.
4. The new filing is not being filed to harass or to cause a delay because (give reasons):

I am just trying to recover my security deposit.

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

Date: 01/24/2019

Joey Jones _____
(TYPE OR PRINT NAME)

▶ Joey Jones _____
(SIGNATURE)

Request to Correct or Cancel Judgment and Answer (Small Claims)

Clerk stamps date here when form is filed.

Request

This form is used to ask the court to correct or cancel a small claims judgment. You must file this form no later than 30 days after the clerk mailed Form SC-130, Notice of Entry of Judgment. Filing this form does not extend the deadline to file an appeal.

If you are the person asking the court to correct or cancel a judgment, fill out 1-5 on this page, then file it at the clerk's office. The clerk will mail a copy of the form to all other plaintiffs and defendants in your case. The court will give the other plaintiffs and defendants at least 10 days to answer this Request. The court will mail its decision to you or tell you to go to a court hearing. If you did not go to the trial, you must use Form SC-135, Notice of Motion to Vacate Judgment and Declaration.

If you receive this form, read below, then fill out 6 through 9 on page 2. The court will mail its decision to you or tell you to go to a court hearing.

-Must be filed within 30 days of Notice of Entry of Judgment being mailed

Fill in court name and street address:

Superior Court of California, County of Los Angeles Pasadena Courthouse 300 E. Walnut Street Pasadena, CA 91101

Fill in your case number and case name below:

Case Number: 19PDSC06451 Case Name: Hopkins vs. Smith

1 The person asking the court to correct or cancel a judgment is:

Name: Mary Hopkins Address: 757 White Oak Avenue, Los Angeles, CA 90017

Check one: [] A defendant in this case [x] A plaintiff in this case

2 Notice to: (List names and addresses of all other defendants and plaintiffs in your case.)

Table with 2 columns: Name, Address. Row 1: Bryan Smith, 878 Vanowen Street, Studio City, CA 91604. Row 2: Susan Jones, 123 Bird Lane, Los Angeles, CA 90018.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-108, Item 2" on top.

3 I ask the court to (check one):

- a. [x] Correct the following clerical error in the judgment. List the error: Brian Smith Change to: Bryan Smith Explain why this correction is needed: Incorrect spelling of the defendant's name was listed on the judgment and I will be unable to collect the judgment if the name is not amended. b. [] Cancel the judgment because the court applied the wrong law to this case. (Explain):

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-108, Item 3" on top.

4 In making its order, I ask the court to consider the information on this form, any records on file, and, if the court holds a hearing, the evidence presented at that hearing.

5 I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 04/16/2019

Mary Hopkins Type or print your name

Mary Hopkins Sign your name

Clerk stamps date here when form is filed.

Answer

The person listed in (1) on page 1 of this form has asked the court to correct or cancel the judgment in your small claims case.

Follow these steps to tell the court what you want to do about this request:

- Read page 1 to see what the person in (1) is asking for.
• Fill out (6) - (9) below.
• Mail your completed form to the court right away.
• Mail a copy of this form to each plaintiff and defendant listed in (1) and (2) on page 1 of this form.

The court will mail its decision to all plaintiffs and defendants at least 10 days after the Request was mailed. If you do nothing, the court may make the order without hearing from you.

Fill in court name and street address:

Superior Court of California, County of Los Angeles
Pasadena Courthouse
300 E. Walnut Street
Pasadena, CA 91101

(6) The person filing this answer is:

Name: Bryan Smith

Address: 878 Vanowen Street, Studio City, CA 91604

Check one: [X] A defendant in this case [] A plaintiff in this case

Fill in your case number and case name below.

Case Number: 19PDSC06451
Case Name: Hopkins vs. Smith

(7) Tell the court what you want to do about the request.

(Check all that apply):

- a. [X] I agree to the correction requested in (3) a.
b. [] I agree to the cancellation of judgment requested in (3) b.
c. [] I do not agree with the request in (3) a. (Explain):
d. [] I do not agree with the request in (3) b. (Explain):
e. [] I ask the court to have a hearing to decide this matter.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-108, Item 7" on top.

(8) I mailed a copy of this form to everyone listed in (1) and (2) of this form on (date): 4/22/2019

(9) I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 4/22/2019

Bryan Smith

Type or print your name

Bryan Smith
Sign your name

The clerk fills out below.

— Clerk's Certificate of Mailing —

I certify that I am not involved in this case and (check one):

- [] A Certificate of Mailing is attached.
[] The Request to Correct or Cancel Judgment and Answer was mailed first class, postage paid, to all parties at the addresses listed in (2).

On (date):

From (city): , California

Clerk, by , Deputy

(?) Need help? For free help, contact your county's Small Claims Advisor:

Or, go to "County-Specific Court Information" at: www.courts.ca.gov/selfhelp-smallclaims.htm

Request to Correct or Cancel Judgment and Answer (Small Claims)

Clerk stamps date here when form is filed.

Request

This form is used to ask the court to correct or cancel a small claims judgment. You must file this form no later than 30 days after the clerk mailed Form SC-130, Notice of Entry of Judgment. Filing this form does not extend the deadline to file an appeal.

If you are the person asking the court to correct or cancel a judgment, fill out 1-5 on this page, then file it at the clerk's office. The clerk will mail a copy of the form to all other plaintiffs and defendants in your case. The court will give the other plaintiffs and defendants at least 10 days to answer this Request. The court will mail its decision to you or tell you to go to a court hearing. If you did not go to the trial, you must use Form SC-135, Notice of Motion to Vacate Judgment and Declaration.

If you receive this form, read below, then fill out 6 through 9 on page 2. The court will mail its decision to you or tell you to go to a court hearing.

-Must be filed within 30 days of Notice of Entry of Judgment being mailed

Fill in court name and street address:

Superior Court of California, County of

Fill in your case number and case name below:

Case Number: 19PDSC01213

Case Name: Bradley vs Smith

1 The person asking the court to correct or cancel a judgment is:

Name: Jones Bradley
Address: 575 Oakland Drive, Los Angeles, CA 90017

Check one: [] A defendant in this case
[] A plaintiff in this case

2 Notice to:

(List names and addresses of all other defendants and plaintiffs in your case.)

Table with 2 columns: Name, Address. Row a: Harry Waters, 123 Bird Lane, Studio City, CA 91604. Row b: Sarah Watts, 678 Java Drive, Los Angeles, CA 90017.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-108, Item 2" on top.

3 I ask the court to (check one):

a. [] Correct the following clerical error in the judgment.

List the error:
Change to:
Explain why this correction is needed:

b. [x] Cancel the judgment because the court applied the wrong law to this case. (Explain):

Pursuant to Civil Code Section 1719 I was entitled to damages up to \$1500.00 for the defendant writing me a bad check. The judge forgot to include the damages for the bad check in the judgment. The bad check was for \$2000.00 plus damages of 1500.00. Total judgment \$3500.00

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-108, Item 3" on top.

4 In making its order, I ask the court to consider the information on this form, any records on file, and, if the court holds a hearing, the evidence presented at that hearing.

5 I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 04/16/2018

Jones Bradley
Type or print your name

Jones Bradley
Sign your name

Request to Correct or Cancel Judgment and Answer (Small Claims)

Clerk stamps date here when form is filed.

Answer

The person listed in (1) on page 1 of this form has asked the court to correct or cancel the judgment in your small claims case.

Follow these steps to tell the court what you want to do about this request:

- Read page 1 to see what the person in (1) is asking for.
• Fill out (6) - (9) below.
• Mail your completed form to the court right away.
• Mail a copy of this form to each plaintiff and defendant listed in (1) and (2) on page 1 of this form.

The court will mail its decision to all plaintiffs and defendants at least 10 days after the Request was mailed. If you do nothing, the court may make the order without hearing from you.

(6) The person filing this answer is:

Name: Bryan Smith
Address: 878 Vanowen Street, Studio City, CA 91604

Check one: [X] A defendant in this case [] A plaintiff in this case

(7) Tell the court what you want to do about the request.

(Check all that apply):

- a. [] I agree to the correction requested in (3) a.
b. [] I agree to the cancellation of judgment requested in (3) b.
c. [] I do not agree with the request in (3) a. (Explain):
d. [X] I do not agree with the request in (3) b. (Explain): The plaintiff never sent me a written demand for payment of the bad check. Therefore she is not entitled to triple damages.
e. [] I ask the court to have a hearing to decide this matter.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-108, Item 7" on top.

(8) I mailed a copy of this form to everyone listed in (1) and (2) of this form on (date): 04/22/2019

(9) I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 4/23/2019

Bryan Smith
Type or print your name

Bryan Smith
Sign your name

(?) Need help?

For free help, contact your county's Small Claims Advisor:

Or, go to "County-Specific Court Information" at: www.courts.ca.gov/selfhelp-smallclaims.htm

Fill in court name and street address:

Superior Court of California, County of Los Angeles
Pasadena Courthouse
300 E Walnut Street
Pasadena, CA 91101

Fill in your case number and case name below.

Case Number: 19PDSC06451
Case Name: Hopkins vs Smith

The clerk fills out below.

— Clerk's Certificate of Mailing —

I certify that I am not involved in this case and (check one):

- [] A Certificate of Mailing is attached.
[] The Request to Correct or Cancel Judgment and Answer was mailed first class, postage paid, to all parties at the addresses listed in (2).

On (date):
From (city): , California

Clerk, by , Deputy

Clerk stamps date here when form is filed.

Request

This form is used to ask the court to make an order before or after the trial in a small claims case. The court will notify all plaintiffs and defendants in this case about its decision by mail, at the trial, or at a hearing (depending on when the request is filed).

If you are the person asking the court to make an order, ask the Small Claims Advisor if this is the right form for the kind of order you want. If so, follow these steps:

- Fill out page 1 of this form and file it at the clerk's office.
• If you are making this request before your trial, you must mail (or deliver in person) a copy of this form to all other plaintiffs and defendants in your case.
• If you are making this request after the judge has decided your case, the clerk will mail a copy of this form to all other plaintiffs and defendants in your case.

If you receive this form, read below, then fill out 7-10 on page 2.

1 The person asking the court to make an order is:

Name: Joe Schmoe
Address: 123 Bird Lane City, CA 90000
Check one: [] A defendant in this case [x] A plaintiff in this case
[] Other (explain):

- No fee, can be filed at any time
If before or after trial, Court will notify other party.
While case is pending litigant must send copy to other party

Fill in court name and street address:

Superior Court of California, County of

Fill in your case number and case name below:

Case Number: 18STSC12345
Case Name: SCHMOE VS. DOE

2 Notice to: (List names and addresses of all other defendants and plaintiffs in your case.)

a. Name Jane Doe Address 234 Any St. City, CA 90000

b.
c.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 2" on top.

If your request is made before the trial and after the claim was served, fill out below:

I [] mailed [] delivered in person a copy of this form to everyone listed in 2 on (date):

3 I ask the court to make the following order (specify):

Motion for reconsideration.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 3" on top.

4 I ask for this order because (explain and give facts of your case here):

I feel that I lost this case due to lack of evidence. I request that the court reconsider this decision due to the fact that I now have new evidence to present. I have received a report from the Health Department, which proves that the dwelling is, in fact, uninhabitable.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 4" on top.

5 In making its order, I ask the court to consider the information on this form, any records on file, and, if the court holds a hearing, the evidence presented at that hearing.

6 I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 1/1/2018

Joe Shmoe
Type or print your name

Joe Shmoe
Sign your name

Clerk stamps date here when form is filed.

No fee, must be filed within 15 days of receiving request

Answer

The person listed in (1) on page 1 of this form has asked the court to make an order in your small claims case.

Follow these steps to tell the court what you want to do about this request:

- Read page 1 to see what the person in (1) is asking for.
• Fill out (7)-(10) below.
• Mail your completed form to the court right away.
• Mail a copy of this form to each plaintiff and defendant listed in (1) and (2) on page 1 of this form.

The court will mail its decision to all plaintiffs and defendants in this case or will make a decision at a court hearing or trial.

If you do nothing, the court may make the order without hearing from you.

(7) The person filing this answer is:

Name: Jane Doe
Address: 234 Any St. City, CA 90000

Check one: [X] A defendant in this case [] A plaintiff in this case

(8) Tell the court what you want to do about this request.

(Check all that apply):

- a. [] I agree to the order requested in (3).
b. [X] I do not agree to the order requested in (3). (Explain below:)

I feel that this motion should not be granted because the dwelling is not uninhabitable. I do not believe that this report will have any bearing on this case, and request that the motion be denied.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 8" on top.

c. [] I ask the court to have a hearing to decide this matter.

(9) I mailed a copy of this form to everyone listed in (1) and (2) of this form on (date): 1/25/2018

(10) I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 1/26/2018

Jane Doe

Type or print your name

[Signature]
Sign your name

If the request on page 1 was made after the hearing, the clerk fills out below.

— Clerk's Certificate of Mailing —

I certify that I am not involved in this case and (check one):

- [] A Certificate of Mailing is attached.
[] The Request for Court Order and Answer was mailed first class, postage paid, to all parties at the addresses listed in (2).

On (date):

From (city): , California

Clerk, by , Deputy

(?) Need help?

For free help, contact your county's Small Claims Advisor:

Or, go to "County-Specific Court Information" at www.courtinfo.ca.gov/selfhelp/smallclaims

Clerk stamps date here when form is filed.

Request

This form is used to ask the court to make an order before or after the trial in a small claims case. The court will notify all plaintiffs and defendants in this case about its decision by mail, at the trial, or at a hearing (depending on when the request is filed).

If you are the person asking the court to make an order, ask the Small Claims Advisor if this is the right form for the kind of order you want. If so, follow these steps:

- Fill out page 1 of this form and file it at the clerk's office.
• If you are making this request before your trial, you must mail (or deliver in person) a copy of this form to all other plaintiffs and defendants in your case. Exception: If the plaintiff's claim has not been served, you do not have to serve this request on the other plaintiffs and defendants in your case.
• If you are making this request after the judge has decided your case, the clerk will mail a copy of this form to all other plaintiffs and defendants in your case. The court will give the other plaintiffs and defendants at least 10 days to answer this Request.

If you receive this form, read below, then fill out 7-10 on page 2.

1 The person asking the court to make an order is:

Name: Joe Schmoe

Address: 123 Bird Lane City, CA 90000

Check one: [] A defendant in this case [x] A plaintiff in this case
[] Other (explain):

2 Notice to: (List names and addresses of all other defendants and plaintiffs in your case.)

a. Name Jane Doe Address 234 Any St. City, CA 90000

b.

c.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 2" on top.

If your request is made before the trial and after the claim was served, fill out below:

I [] mailed [] delivered in person a copy of this form to everyone listed in 2 on (date):

3 I ask the court to make the following order (specify):

Motion to vacate the dismissal.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 3" on top.

4 I ask for this order because (explain and give facts of your case here):

I received notification that my case was dismissed because I failed to appear at the appeal hearing. I never received notification from the court of a court date for the appeal. For this reason, I ask that the court vacate the dismissal of my case and re-calendar the appeal.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 4" on top.

5 In making its order, I ask the court to consider the information on this form, any records on file, and, if the court holds a hearing, the evidence presented at that hearing.

6 I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 1/1/2018

Joe Schmoe

Type or print your name

Handwritten signature of Joe Schmoe with arrow pointing to 'Sign your name' label.

No fee, can be filed at any time
If before or after trial, Court will notify other party.
While case is pending litigant must send copy to other party

Fill in court name and street address:

Superior Court of California, County of

Fill in your case number and case name below:

Case Number:

18STSC12345

Case Name:

SCHMOE VS. DOE

Request for Court Order and Answer (Small Claims)

Request

This form is used to ask the court to make an order before or after the trial in a small claims case. The court will notify all plaintiffs and defendants in this case about its decision by mail, at the trial, or at a hearing (depending on when the request is filed).

If you are the person asking the court to make an order, ask the Small Claims Advisor if this is the right form for the kind of order you want. If so, follow these steps:

- Fill out page 1 of this form and file it at the clerk's office.
• If you are making this request before your trial, you must mail (or deliver in person) a copy of this form to all other plaintiffs and defendants in your case. Exception: If the plaintiff's claim has not been served, you do not have to serve this request on the other plaintiffs and defendants in your case.
• If you are making this request after the judge has decided your case, the clerk will mail a copy of this form to all other plaintiffs and defendants in your case. The court will give the other plaintiffs and defendants at least 10 days to answer this Request.

If you receive this form, read below, then fill out 7-10 on page 2.

1 The person asking the court to make an order is:

Name: Joe Schmoe

Address: 123 Bird Lane City, CA 90000

Check one: [] A defendant in this case [x] A plaintiff in this case
[] Other (explain):

2 Notice to: (List names and addresses of all other defendants and plaintiffs in your case.)

a. Name Jane Doe Address 234 Any St. City, CA 90000

b.

c.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 2" on top.

If your request is made before the trial and after the claim was served, fill out below:

I [] mailed [] delivered in person a copy of this form to everyone listed in 2 on (date):

3 I ask the court to make the following order (specify):

Motion for clarification.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 3" on top.

4 I ask for this order because (explain and give facts of your case here):

I sued for \$5,000 but I was only awarded \$745.50. I felt that I provided adequate proof that I incurred \$5,000 in damages. I would like an explanation of how the amount of my judgment was determined.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 4" on top.

5 In making its order, I ask the court to consider the information on this form, any records on file, and, if the court holds a hearing, the evidence presented at that hearing.

6 I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 1/1/2018

Joe Schmoe
Type or print your name

Joe Schmoe
Sign your name

Clerk stamps date here when form is filed.

No fee, can be filed at any time before or after trial, Court will notify other party.

While case is pending litigant must send copy to other party before or after trial, Court will notify other party.

Fill in court name and street address:

Superior Court of California, County of

Fill in your case number and case name below:

Case Number:

18STSC12345

Case Name:

SCHMOE VS. DOE

Request

This form is used to ask the court to make an order before or after the trial in a small claims case. The court will notify all plaintiffs and defendants in this case about its decision by mail, at the trial, or at a hearing (depending on when the request is filed).

If you are the person asking the court to make an order, ask the Small Claims Advisor if this is the right form for the kind of order you want. If so, follow these steps:

- Fill out page 1 of this form and file it at the clerk's office.
• If you are making this request before your trial, you must mail (or deliver in person) a copy of this form to all other plaintiffs and defendants in your case. Exception: If the plaintiff's claim has not been served, you do not have to serve this request on the other plaintiffs and defendants in your case.
• If you are making this request after the judge has decided your case, the clerk will mail a copy of this form to all other plaintiffs and defendants in your case. The court will give the other plaintiffs and defendants at least 10 days to answer this Request.

If you receive this form, read below, then fill out 7-10 on page 2.

1 The person asking the court to make an order is:

Name: Paul Jones
Address: 456 Goodland Avenue, Los Angeles, CA 90012
Check one: [] A defendant in this case [x] A plaintiff in this case
[] Other (explain):

2 Notice to: (List names and addresses of all other defendants and plaintiffs in your case.)

a. Name Susan Burke Address 987 Woodman Street, Los Angeles, CA 90011
b.
c.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 2" on top.

If your request is made before the trial and after the claim was served, fill out below:

I [] mailed [] delivered in person a copy of this form to everyone listed in 2 on (date):

3 I ask the court to make the following order (specify):

Motion to amend judgment: to reflect the legal name of defendant, and/or name(s) actually used by defendant on her employment records and assets. Susan Burke AKA Susana L. Burke.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 3" on top.

4 I ask for this order because (explain and give facts of your case here):

To enable creditor to enforce the judgment. Evidence is attached to prove that Susan Burke is also known as Susana L. Burke. CCP 116.560.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 4" on top.

5 In making its order, I ask the court to consider the information on this form, any records on file, and, if the court holds a hearing, the evidence presented at that hearing.

6 I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 1/20/2019

Paul Jones
Type or print your name

[Signature] P. Jones
Sign your name

Clerk stamps date here when form is filed. No fee, can be filed at any time. If before or after trial, Court will notify other party. While case is pending litigant must send copy to other party.

Fill in court name and street address: Superior Court of California, County of notify other party.

Fill in your case number and case name below: Case Number: 18STSC12345 Case Name: JONES VS. BURKE

Request for Court Order and Answer (Small Claims)

Clerk stamps date here when form is filed.

Request

This form is used to ask the court to make an order before or after the trial in a small claims case.

If you are the person asking the court to make an order, ask the Small Claims Advisor if this is the right form for the kind of order you want.

- Fill out page 1 of this form and file it at the clerk's office.
If you are making this request before your trial, you must mail (or deliver in person) a copy of this form to all other plaintiffs and defendants in your case.
If you are making this request after the judge has decided your case, the clerk will mail a copy of this form to all other plaintiffs and defendants in your case.

If you receive this form, read below, then fill out 7-10 on page 2.

1 The person asking the court to make an order is:

Name: Paul Jones
Address: 456 Goodland Avenue, Los Angeles, CA 90012
Check one: A defendant in this case A plaintiff in this case Other (explain):

Fill in court name and street address:

Superior Court of California, County of

Fill in your case number and case name below:

Case Number: 18STSC12345
Case Name: JONES VS. TOP CONSTRUCTION

2 Notice to: (List names and addresses of all other defendants and plaintiffs in your case.)

a. Name: Top Construction Address: 4753 W. Avenue K8 Lancaster, CA 93536
b.
c.

Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 2" on top.

If your request is made before the trial and after the claim was served, fill out below:

I mailed delivered in person a copy of this form to everyone listed in 2 on (date):

3 I ask the court to make the following order (specify):

Motion to amend judgment to reflect the legal name of business: Top Construction AKA Aliano Construction, Inc. DBA Top Construction

Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 3" on top.

4 I ask for this order because (explain and give facts of your case here):

To enable creditor to enforce the judgment. Evidence is attached to prove that Top Construction is also known as Aliano Construction, Inc. DBA Top Construction. (CCP 116.560)

Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 4" on top.

5 In making its order, I ask the court to consider the information on this form, any records on file, and, if the court holds a hearing, the evidence presented at that hearing.

6 I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 1/20/2019

Paul Jones
Type or print your name

Signature of Paul Jones
Sign your name

Request for Court Order and Answer (Small Claims)

Clerk stamps date here when form is filed.

Request

This form is used to ask the court to make an order before or after the trial in a small claims case. The court will notify all plaintiffs and defendants in this case about its decision by mail, at the trial, or at a hearing (depending on when the request is filed).

If you are the person asking the court to make an order, ask the Small Claims Advisor if this is the right form for the kind of order you want. If so, follow these steps:

- Fill out page 1 of this form and file it at the clerk's office.
• If you are making this request before your trial, you must mail (or deliver in person) a copy of this form to all other plaintiffs and defendants in your case. Exception: If the plaintiff's claim has not been served, you do not have to serve this request on the other plaintiffs and defendants in your case.
• If you are making this request after the judge has decided your case, the clerk will mail a copy of this form to all other plaintiffs and defendants in your case. The court will give the other plaintiffs and defendants at least 10 days to answer this Request.

No fee, can be filed at any time
If before or after trial, Court will notify other party.
While case is pending litigant must send copy to other party
If before or after trial, Court will notify other party.

Fill in court name and street address:

Superior Court of California, County of

Fill in your case number and case name below:

Case Number:

18STSC12345

Case Name:

JONES VS. TIM ALLEN DBA TIM'S FURNITURE

If you receive this form, read below, then fill out (7)-(10) on page 2.

1 The person asking the court to make an order is:

Name: Paul Jones

Address: 456 Goodland Avenue, Los Angeles, CA 90012

Check one: [] A defendant in this case [x] A plaintiff in this case
[] Other (explain):

2 Notice to: (List names and addresses of all other defendants and plaintiffs in your case.)

a. Name: Tim Allen DBA Tim's Furniture Address: 1001 Santa Monica Blvd, Santa Monica CA 90404

b.

c.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 2" on top.

If your request is made before the trial and after the claim was served, fill out below:

I [] mailed [] delivered in person a copy of this form to everyone listed in (2) on (date):

3 I ask the court to make the following order (specify):

Motion to amend judgment to reflect the legal name of business: Tim Allen DBA Tim's Furniture
AKA Tim's Furniture Repair & Upholstery

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 3" on top.

4 I ask for this order because (explain and give facts of your case here):

To enable creditor to enforce the judgment. Evidence is attached to prove that the business name was changed, but is owned by the same person. CCP 116.560 (b)

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 4" on top.

5 In making its order, I ask the court to consider the information on this form, any records on file, and, if the court holds a hearing, the evidence presented at that hearing.

6 I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 1/20/2019

Paul Jones

Type or print your name

[Signature]
Sign your name

Request for Court Order and Answer (Small Claims)

Request

This form is used to ask the court to make an order before or after the trial in a small claims case. The court will notify all plaintiffs and defendants in this case about its decision by mail, at the trial, or at a hearing (depending on when the request is filed).

If you are the person asking the court to make an order, ask the Small Claims Advisor if this is the right form for the kind of order you want. If so, follow these steps:

- Fill out page 1 of this form and file it at the clerk's office.
• If you are making this request before your trial, you must mail (or deliver in person) a copy of this form to all other plaintiffs and defendants in your case. Exception: If the plaintiff's claim has not been served, you do not have to serve this request on the other plaintiffs and defendants in your case.
• If you are making this request after the judge has decided your case, the clerk will mail a copy of this form to all other plaintiffs and defendants in your case. The court will give the other plaintiffs and defendants at least 10 days to answer this Request.

If you receive this form, read below, then fill out (7)-(10) on page 2.

1 The person asking the court to make an order is:

Name: Mary Jones
Address: 789 Walnut St., Downey, CA 90242
Check one: [] A defendant in this case [x] A plaintiff in this case
[] Other (explain):

2 Notice to: (List names and addresses of all other defendants and plaintiffs in your case.)

a. Name: Brian Parker Address: 456 Valley St., Los Angeles, CA 90048
b.
c.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 2" on top.

If your request is made before the trial and after the claim was served, fill out below:

I [] mailed [] delivered in person a copy of this form to everyone listed in (2) on (date):

3 I ask the court to make the following order (specify):

Motion for an Assignment Order to have the rents from the tenants at 123 Moon St., Los Angeles, CA 90012 assigned to the creditor, Mary Jones. The property at 123 Moon St., LA CA is owned by the debtor, Brian Parker. Copy of ownership information from the Tax Assessor is attached, CCP 708-510.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 3" on top.

4 I ask for this order because (explain and give facts of your case here):

The debtor has not yet paid the judgment and this request is necessary in order to collect the judgment.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 4" on top.

5 In making its order, I ask the court to consider the information on this form, any records on file, and, if the court holds a hearing, the evidence presented at that hearing.

6 I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 1/20/2019

Mary Jones
Type or print your name

Mary Jones
Sign your name

Clerk stamps date here when form is filed.

No fee, can be filed at any time
If before or after trial, Court will notify other party.
While case is pending litigant must send copy to other party
If before or after trial, Court will notify other party.

Fill in court name and street address:

Superior Court of California, County of

Fill in your case number and case name below:

Case Number: 18STSC12345
Case Name: JONES V. PARKER

Request

This form is used to ask the court to make an order before or after the trial in a small claims case. The court will notify all plaintiffs and defendants in this case about its decision by mail, at the trial, or at a hearing (depending on when the request is filed).

If you are the person asking the court to make an order, ask the Small Claims Advisor if this is the right form for the kind of order you want. If so, follow these steps:

- Fill out page 1 of this form and file it at the clerk's office.
• If you are making this request before your trial, you must mail (or deliver in person) a copy of this form to all other plaintiffs and defendants in your case.
• If you are making this request after the judge has decided your case, the clerk will mail a copy of this form to all other plaintiffs and defendants in your case.

If you receive this form, read below, then fill out 7-10 on page 2.

1 The person asking the court to make an order is:

Name: Park Chiropractic DBA Yun Chiropractic
Address: 200 Wilshire Blvd. #20, Los Angeles, CA 90010
Check one: [] A defendant in this case [x] A plaintiff in this case
[] Other (explain):

2 Notice to: (List names and addresses of all other defendants and plaintiffs in your case.)

a. Name Anna Kim Address 49 Oaktree Lane, Rolling Hills, CA 90274
b.
c.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 2" on top.

If your request is made before the trial and after the claim was served, fill out below:

I [] mailed [] delivered in person a copy of this form to everyone listed in 2 on (date):

3 I ask the court to make the following order (specify):

Motion for an Assignment Order to have the commission from the Keller William Realty at 500 Valley Dr. #300, Rolling Hills, CA 90275 assigned to the creditor, Park Chiropractic. The Defendant is a real estate agent, copy of the defendant's license information from the Dept. of Real Estate is attached.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 3" on top.

4 I ask for this order because (explain and give facts of your case here):

The debtor never voluntarily paid and the judgment was only partially paid from 2 enforcements, so this request is necessary in order to collect the judgment.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 4" on top.

5 In making its order, I ask the court to consider the information on this form, any records on file, and, if the court holds a hearing, the evidence presented at that hearing.

6 I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 1/20/2019

Yun Park
Type or print your name

Yun Park
Sign your name

Clerk stamps date here when form is filed.
No fee, can be filed at any time
If before or after trial, Court will notify other party.
While case is pending litigant must send copy to other party
If before or after trial, Court will notify other party.

Fill in court name and street address:
Superior Court of California, County of

Fill in your case number and case name below:
Case Number: 18STSC12345
Case Name: PARK CHIROPRACTIC DBA YUN CHIROPRACTIC VS. KIM

Request for Court Order and Answer (Small Claims)

Clerk stamps date here when form is filed.

Request

This form is used to ask the court to make an order before or after the trial in a small claims case.

If you are the person asking the court to make an order, ask the Small Claims Advisor if this is the right form for the kind of order you want.

- Fill out page 1 of this form and file it at the clerk's office.
• If you are making this request before your trial, you must mail (or deliver in person) a copy of this form to all other plaintiffs and defendants in your case.
• If you are making this request after the judge has decided your case, the clerk will mail a copy of this form to all other plaintiffs and defendants in your case.

No fee, can be filed at any time
If before or after trial, Court will notify other party.
While case is pending litigant must send copy to other party
If before or after trial, Court will notify other party.

Fill in court name and street address:

Superior Court of California, County of

Fill in your case number and case name below:

Case Number: 18STSC12345
Case Name: SCHMOE VS. DOE

If you receive this form, read below, then fill out 7-10 on page 2.

1 The person asking the court to make an order is:

Name: Joe Schmoie
Address: 1234 Main Street, Los Angeles, CA 90001
Check one: [] A defendant in this case [X] A plaintiff in this case
[] Other (explain):

2 Notice to: (List names and addresses of all other defendants and plaintiffs in your case.)

a. Name Jane Doe Address 5432 Second Street, Los Angeles, CA 90003
b.
c.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 2" on top.
If your request is made before the trial and after the claim was served, fill out below:

I [] mailed [] delivered in person a copy of this form to everyone listed in 2 on (date):

3 I ask the court to make the following order (specify):

Motion to modify the judgment to include the California Code of Civil Procedure that states, "This judgment results from a motor vehicle accident on a California highway." (For judgments greater than \$1,000 use CCP Section 116.870; less than \$1,000 use Section 116.880)

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 3" on top.

4 I ask for this order because (explain and give facts of your case here):

This section of the CCP is required to be on the Notice of Entry of Judgment in order to suspend a driver's license.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 4" on top.

5 In making its order, I ask the court to consider the information on this form, any records on file, and, if the court holds a hearing, the evidence presented at that hearing.

6 I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 1/20/2019

Joe Schmoie
Type or print your name

Joe Schmoie
Sign your name

Request

This form is used to ask the court to make an order before or after the trial in a small claims case. The court will notify all plaintiffs and defendants in this case about its decision by mail, at the trial, or at a hearing (depending on when the request is filed).

If you are the person asking the court to make an order, ask the Small Claims Advisor if this is the right form for the kind of order you want. If so, follow these steps:

- Fill out page 1 of this form and file it at the clerk's office.
• If you are making this request before your trial, you must mail (or deliver in person) a copy of this form to all other plaintiffs and defendants in your case. Exception: If the plaintiff's claim has not been served, you do not have to serve this request on the other plaintiffs and defendants in your case.
• If you are making this request after the judge has decided your case, the clerk will mail a copy of this form to all other plaintiffs and defendants in your case. The court will give the other plaintiffs and defendants at least 10 days to answer this Request.

If you receive this form, read below, then fill out 7-10 on page 2.

1 The person asking the court to make an order is:

Name: John Doe
Address: 2134 Main St. Los Angeles, CA 90002
Check one: [] A defendant in this case [x] A plaintiff in this case
[] Other (explain):

2 Notice to: (List names and addresses of all other defendants and plaintiffs in your case.)

- a. Name Sam Smith Address 3354 South St. Los Angeles, CA 90000
b. Name Mary Smith Address 3354 South St. Los Angeles, CA 90000
c. A spouse must be noticed even if they are not a party in this case, in order to garnish their wages.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 2" on top.

If your request is made before the trial and after the claim was served, fill out below:

I [] mailed [] delivered in person a copy of this form to everyone listed in 2 on (date):

3 I ask the court to make the following order (specify):

Motion to garnish Non-Debtor Spouse's, (Mary Smith), Wages.

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 3" on top.

4 I ask for this order because (explain and give facts of your case here):

The Judgment Debtor has no available funds to collect, as a result I would like to collect my judgment from the non-debtor spouse's wages which are viewed as community property under California law. (CCP 706.109)

[] Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 4" on top.

5 In making its order, I ask the court to consider the information on this form, any records on file, and, if the court holds a hearing, the evidence presented at that hearing.

6 I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 1/20/2019

John Doe
Type or print your name

John Doe
Sign your name

Clerk stamps date here when form is filed. No fee, can be filed at any time. If before or after trial, Court will notify other party. While case is pending litigant must send copy to other party. If before or after trial, Court will notify other party.

Fill in court name and street address: Superior Court of California, County of

Fill in your case number and case name below: Case Number: 18STSC12345 Case Name: DOE VS. SMITH

Request

This form is used to ask the court to make an order before or after the trial in a small claims case. The court will notify all plaintiffs and defendants in this case about its decision by mail, at the trial, or at a hearing (depending on when the request is filed).

If you are the person asking the court to make an order, ask the Small Claims Advisor if this is the right form for the kind of order you want. If so, follow these steps:

- Fill out page 1 of this form and file it at the clerk's office.
- If you are making this request *before* your trial, you must mail (or deliver in person) a copy of this form to all other plaintiffs and defendants in your case. *Exception:* If the plaintiff's claim has not been served, you do not have to serve this request on the other plaintiffs and defendants in your case.
- If you are making this request *after* the judge has decided your case, the clerk will mail a copy of this form to all other plaintiffs and defendants in your case. The court will give the other plaintiffs and defendants at least 10 days to answer this *Request*.

If you receive this form, read below, then fill out (7)–(10) on page 2.

1 The person asking the court to make an order is:

Name: John Smith
 Address: 2525 S. Temple St., Los Angeles, CA 90012
 Check one: A defendant in this case A plaintiff in this case
 Other (explain): _____

2 Notice to: (List names and addresses of all other defendants and plaintiffs in your case.)

a. Name	Address
<u>Corporation</u>	<u>000 Wilshire Blvd Suite 100, Los Angeles, CA 90001</u>
<u>LLC</u>	<u>000 Wilshire Blvd Suite 100, Los Angeles, CA 90001</u>
<u>LP</u>	<u>000 Wilshire Blvd Suite 100, Los Angeles, CA 90001</u>

Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 2" on top.

If your request is made before the trial and after the claim was served, fill out below:

I mailed delivered in person a copy of this form to everyone listed in (2) on (date): _____

3 I ask the court to make the following order (specify):

I'm asking the court to allow service of process on (Defendant's name) by delivering by hand to the CA Secretary of State two copies of the Plaintiff's Claim and one conformed copy of this order. Service of process shall be deemed complete on the 10th day after delivery of the process to the CA Sec. of State.

Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 3" on top.

4 I ask for this order because (explain and give facts of your case here):

The (Defendant's name) Agent for Service cannot be located or does not exist. After due diligence, I have not been able to locate and serve the officers of (Defendant's name). (Attach a copy of the non-service notice from the Sheriff's Office.)

Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 4" on top.

5 In making its order, I ask the court to consider the information on this form, any records on file, and, if the court holds a hearing, the evidence presented at that hearing.

6 I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 1/20/2019

John Smith
 Type or print your name

John Smith
 Sign your name

Clerk stamps date here when form is filed.

No fee, can be filed at any time
 If before or after trial, Court will notify other party.
 While case is pending litigant must send copy to other party
 If before or after trial, Court will notify other party.

Fill in court name and street address:

Superior Court of California, County of

Fill in your case number and case name below:

Case Number:
18STSC12345
 Case Name:
SMITH VS. CORPORATION

Request

This form is used to ask the court to make an order before or after the trial in a small claims case. The court will notify all plaintiffs and defendants in this case about its decision by mail, at the trial, or at a hearing (depending on when the request is filed).

If you are the person asking the court to make an order, ask the Small Claims Advisor if this is the right form for the kind of order you want. If so, follow these steps:

- Fill out page 1 of this form and file it at the clerk's office.
- If you are making this request *before* your trial, you must mail (or deliver in person) a copy of this form to all other plaintiffs and defendants in your case. *Exception:* If the plaintiff's claim has not been served, you do not have to serve this request on the other plaintiffs and defendants in your case.
- If you are making this request *after* the judge has decided your case, the clerk will mail a copy of this form to all other plaintiffs and defendants in your case. The court will give the other plaintiffs and defendants at least 10 days to answer this *Request*.

If you receive this form, read below, then fill out ⑦–⑩ on page 2.

① **The person asking the court to make an order is:**

Name: Jane Smith
 Address: 1234 Hope Street Los Angeles CA 90012
 Check one: A defendant in this case A plaintiff in this case
 Other (explain): _____

② **Notice to:** (List names and addresses of all other defendants and plaintiffs in your case.)

a. Name William Jones Address 654 Victory Avenue, Los Angeles, CA 90017
 b. _____
 c. _____

Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 2" on top.

If your request is made before the trial and after the claim was served, fill out below:

I mailed delivered in person a copy of this form to everyone listed in ② on (date): _____

③ **I ask the court to make the following order** (specify):

Motion for the court to enter judgment for the plaintiff in the amount of (balance due).

Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 3" on top.

④ **I ask for this order because** (explain and give facts of your case here):

The court retains jurisdiction pursuant to CCP.664.6 to enforce the full terms of settlement. Defendant breached the mediated agreement. Attached is a copy of the mediated agreement. (Make sure to acknowledge any payments by defendant).

Check here if you need more space. Use Form MC-031 or a plain sheet of paper. Write "SC-105, Item 4" on top.

⑤ In making its order, I ask the court to consider the information on this form, any records on file, and, if the court holds a hearing, the evidence presented at that hearing.

⑥ I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 1/20/2019

Jane Smith
 Type or print your name

Jane Smith
 Sign your name

Clerk stamps date here when form is filed.
 No fee, can be filed at any time
 If before or after trial, Court will notify other party.
 While case is pending litigant must send copy to other party
 If before or after trial, Court will notify other party.

Fill in court name and street address:
Superior Court of California, County of

Fill in your case number and case name below:
 Case Number: 18STSC12345
 Case Name: SMITH VS. JONES

- Must be filed within 30 days after judgment by defendant
- \$75 filling fee

SC-140

Name and Address of Court:

SMALL CLAIMS CASE NO.: 18DWSC12345

PLAINTIFF/DEMANDANTE (Name, address, and telephone number of each) Gabriela Syed 123 South Main St. Los Angeles, CA 90012 Telephone No.: _____	DEFENDANT/DEMANDADO (Name, address, and telephone number of each) Jackson Pena 456 West Plaza St. Los Angeles, CA 90012 Telephone No.: _____
Telephone No.: _____	Telephone No.: _____

See attached sheet for additional plaintiffs and defendants.

NOTICE OF FILING NOTICE OF APPEAL

TO: Plaintiff (name): Gabriela Syed
 Defendant (name):

Your small claims case has been APPEALED to the superior court. Do not contact the small claims court about this appeal. The superior court will notify you of the date you should appear in court. The notice of appeal is set forth below.	<i>La decisión hecha por la corte para reclamos judiciales menores en su caso ha sido APELADA antela corte superior. No se ponga en contacto con la corte para reclamos judiciales menores acerca de esta apelación. La corte superior le notificarala fecha en que usted debe presentarse ante ella. El aviso de la apelación aparece a continuación.</i>
--	--

Date: _____ Clerk, by _____, Deputy

NOTICE OF APPEAL

I appeal to the superior court, as provided by law, from
 the small claims judgment or the denial of the motion to vacate the small claims judgment.

DATE APPEAL FILED (clerk to insert date):

Jackson Pena

 (TYPE OR PRINT NAME)

Jackson Pena

 (SIGNATURE OF APPELLANT OR APPELLANTS ATTORNEY)

I am an insurer of defendant (name) _____ in this case. The judgment against defendant exceeds \$2,500, and the policy of insurance with the defendant covers the matter to which the judgment applies.

 (NAME OF INSURER)

 (SIGNATURE OF DECLARANT)

CLERK'S CERTIFICATE OF MAILING

I certify that

- I am not a party to this action.
- This Notice of Filing Notice of Appeal and Notice of Appeal were mailed first class, postage prepaid, in a sealed envelope to
 plaintiff
 defendant
 at the address shown above.
- The mailing and this certification occurred
 at (place): _____, California,
 on (date): _____ Clerk, by _____, Deputy

NAME, ADDRESS, AND TELEPHONE NUMBER OF ATTORNEY OR PARTY WITHOUT ATTORNEY: John Davis 123 Avenue Five Los Angeles, CA 95321		STATE BAR NUMBER	<i>Reserved for Clerk's File Stamp</i>
ATTORNEY FOR (Name)			
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES			
COURTHOUSE ADDRESS 300 East Walnut St., Pasadena, CA 91101			
PLAINTIFF John Davis			
DEFENDANT Buck Smith			
APPLICATION & ORDER TO WITHDRAW EXHIBITS			CASE NUMBER 18PDSC12345

APPLICATION

_____ requests the release of the following described Exhibits:

<u>Exhibit No.</u>	<u>Description</u>	<u>Exhibit No.</u>	<u>Description</u>
1	Lease Agreement		
2	Photos showing property damage		
3	Receipt showing carpet change		

To the possession of: John Davis

In above entitled action, judgment was entered on 9/15/2019 and it appears that a **Notice of Appeal** has not been filed.

Dated: 11/16/2019 Signature: John Davis

ORDER

Denied as to: _____ Temporary release to be returned by: _____ Date _____

The evidence described herein having been produced as Exhibit(s) before the court, it is hereby ordered that possession thereof be given or restored to _____.

Dated: _____ Trial Judge/Commissioner: _____

RECEIPT

Exhibits described above were received on: _____ by _____
Date Print Name Signature

Temporarily released Exhibits were returned: _____ by _____
Date Print Name Signature

SHERRI R. CARTER, Executive Officer/Clerk of Court

By: Exhibit Custodian: _____ Dated _____

- Can be filed by either plaintiff or defendant within 30 days of judgment or 180 days from discovery

- \$20 filing fee

Name and Address of Court:

SC-135

SMALL CLAIMS CASE NO.: 18STSC12345

PLAINTIFF/DEMANDANTE (Name, street address, and telephone number of each):

Peter Smith
111 Main St
Anytown, CA 90011

Telephone No.: 213-111-1234

Paul Jenkins
111 Main St
Anytown, CA 90011

Telephone No.: 213-111-1234

DEFENDANT/DEMANDADO (Name, street address, and telephone number of each):

David Dean
333 Amberwood Road
Anytown, CA 90013

Telephone No.: 213-222-2222

Donald Douglas
333 Amberwood Road
Anytown, CA 90013

Telephone No.: 213-222-2222

See attached sheet for additional plaintiffs and defendants.

NOTICE TO (Name): TIP: Name ALL other parties listed in the claim (i.e. plaintiffs and defendants)

One of the parties has asked the court to CANCEL the small claims judgment in your case. If you disagree with this request, you should appear in this court on the hearing date shown below. If the request is granted, ANOTHER TRIAL may immediately be held. Bring all witnesses, books, receipts, and other papers or things with you to support your case.

Una de las partes en el caso le ha solicitado a la corte que DEJE SIN EFECTO la decisión tomada en su caso por la corte para reclamos judiciales menores. Si usted esta en desacuerdo con esta solicitud, debe presentarse en esta corte en la fecha de la audiencia indicada a continuación. Si se concede esta solicitud, es posible que se efectúe otro juicio inmediatamente. Traiga a todos sus testigos, libros, recibos, y otros documentos o cosas para presentarlos en apoyo de su caso.

NOTICE OF MOTION TO VACATE (CANCEL) JUDGMENT

- 1. A hearing will be held in this court at which I will ask the court to cancel the judgment entered against me in this case. If you wish to oppose the motion you should appear at the court on

Table with columns: HEARING DATE, FECHA DEL JUICIO, DATE, DAY, TIME, PLACE, COURT USE. Rows 1, 2, 3.

- 2. I am asking the court to cancel the judgment for the reasons stated in item 5 below. My request is based on this notice of motion and declaration, the records on file with the court, and any evidence that may be presented at the hearing.

DECLARATION FOR MOTION TO VACATE (CANCEL) JUDGMENT

- 3. Judgment was entered against me in this case on (date): 01/01/2018
4. I first learned of the entry of judgment against me on (date): 05/26/2019
5. I am asking the court to cancel the judgment for the following reason:
a. I did not appear at the trial of this claim because (specify facts):
b. Other (specify facts):
6. I understand that I must bring with me to the hearing on this motion all witnesses, books, receipts, and other papers or things to support my case.

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

Date: 05/28/2019

David Dean (TYPE OR PRINT NAME)

[Signature] (SIGNATURE)

CLERK'S CERTIFICATE OF MAILING

I certify that I am not a party to this action. This Notice of Motion to Vacate Judgment and Declaration was mailed first class, postage prepaid, in a sealed envelope to the responding party at the address shown above. The mailing and this certification occurred at (place): , California, on (date): Clerk, by _____, Deputy

- The county provides small claims advisor services free of charge. -

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: NAME: Jane Doe FIRM NAME: STREET ADDRESS: 123 Main Street CITY: Los Angeles STATE: CA ZIP CODE: 90001 TELEPHONE NO.: 213-567-0000 FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	FOR COURT USE ONLY -Must wait 30 days from the date of final judgment to file
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: COURT WILL STAMP HERE MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PLAINTIFF Jane Doe DEFENDANT Mike Jones	
APPLICATION AND ORDER FOR APPEARANCE AND EXAMINATION <input checked="" type="checkbox"/> ENFORCEMENT OF JUDGMENT <input type="checkbox"/> ATTACHMENT (Third Person) <input checked="" type="checkbox"/> Judgment Debtor <input type="checkbox"/> Third Person	
CASE NUMBER: 19STSC12345	

ORDER TO APPEAR FOR EXAMINATION

1. TO (name): Andrew Lee
2. YOU ARE ORDERED TO APPEAR personally before this court, or before a referee appointed by the court, to
 - a. furnish information to aid in enforcement of a money judgment against you.
 - b. answer concerning property of the judgment debtor in your possession or control or concerning a debt you owe the judgment debtor.
 - c. answer concerning property of the defendant in your possession or control or concerning a debt you owe the defendant that is subject to attachment.

Date:	Time:	Dept. or Div.:	Rm.:
Address of court <input type="checkbox"/> is shown above <input type="checkbox"/> is:			

3. This order may be served by a sheriff, marshal, registered process server, or the following specially appointed person (name):

Date:

JUDGE

This order must be served not less than 10 days before the date set for the examination.

IMPORTANT NOTICES ON REVERSE

APPLICATION FOR ORDER TO APPEAR FOR EXAMINATION

4. Original judgment creditor Assignee of record Plaintiff who has a right to attach order applies for an order requiring (name):
to appear and furnish information to aid in enforcement of the money judgment or to answer concerning property or debt.
5. The person to be examined is
 - a. the judgment debtor.
 - b. a third person (1) who has possession or control of property belonging to the judgment debtor or the defendant or (2) who owes the judgment debtor or the defendant more than \$250. An affidavit supporting this application under Code of Civil Procedure section 491.110 or 708.120 is attached.
6. The person to be examined resides or has a place of business in this county or within 150 miles of the place of examination.
7. This court is not the court in which the money judgment is entered or (attachment only) the court that issued the writ of attachment. An affidavit supporting an application under Code of Civil Procedure section 491.150 or 708.160 is attached.
8. The judgment debtor has been examined within the past 120 days. An affidavit showing good cause for another examination is attached.

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

Date: 10/9/2019

Jane Doe

(TYPE OR PRINT NAME)

▶ *Jane Doe*

(SIGNATURE OF DECLARANT)

(Continued on reverse)

Information for Judgment Creditor Regarding Service

If you want to be able to ask the court to enforce the order on the judgment debtor or any third party, you must have a copy of the order personally served on the judgment debtor by a sheriff, marshal, registered process server, or the person appointed in item 3 of the order at least 10 calendar days before the date of the hearing, and have a proof of service filed with the court.

IMPORTANT NOTICES ABOUT THE ORDER**APPEARANCE OF JUDGMENT DEBTOR (ENFORCEMENT OF JUDGMENT)**

NOTICE TO JUDGMENT DEBTOR If you fail to appear at the time and place specified in this order, you may be subject to arrest and punishment for contempt of court, and the court may make an order requiring you to pay the reasonable attorney fees incurred by the judgment creditor in this proceeding.

APPEARANCE OF A THIRD PERSON (ENFORCEMENT OF JUDGMENT)

(1) NOTICE TO PERSON SERVED If you fail to appear at the time and place specified in this order, you may be subject to arrest and punishment for contempt of court, and the court may make an order requiring you to pay the reasonable attorney fees incurred by the judgment creditor in this proceeding.

(2) NOTICE TO JUDGMENT DEBTOR The person in whose favor the judgment was entered in this action claims that the person to be examined under this order has possession or control of property that is yours or owes you a debt. This property or debt is as follows *(describe the property or debt)*:

EXAMPLE: The employer is not complying with a wage garnishment order, served on 9/9/2019.

If you claim that all or any portion of this property or debt is exempt from enforcement of the money judgment, you must file your exemption claim in writing with the court and have a copy personally served on the judgment creditor not later than three days before the date set for the examination. You must appear at the time and place set for the examination to establish your claim of exemption or your exemption may be waived.

APPEARANCE OF A THIRD PERSON (ATTACHMENT)

NOTICE TO PERSON SERVED If you fail to appear at the time and place specified in this order, you may be subject to arrest and punishment for contempt of court, and the court may make an order requiring you to pay the reasonable attorney fees incurred by the plaintiff in this proceeding.

APPEARANCE OF A CORPORATION, PARTNERSHIP, ASSOCIATION, TRUST, OR OTHER ORGANIZATION

It is your duty to designate one or more of the following to appear and be examined: officers, directors, managing agents, or other persons who are familiar with your property and debts.



Request for Accommodations. Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least 5 days before your hearing. Contact the clerk's office for *Request for Accommodation* (form MC-410). (Civil Code, § 54.8.)

ATTORNEY OR PARTY WITHOUT ATTORNEY: NAME: Jane Doe FIRM NAME: STREET ADDRESS: 123 Main Street CITY: Los Angeles TELEPHONE NO.: 213-567-0000 E-MAIL ADDRESS: ATTORNEY FOR (name):	STATE BAR NO.: STATE: CA ZIP CODE: 90001 FAX NO.:	FOR COURT USE ONLY -Normally used for 3rd party examinations -Must wait 30 days from the date of judgment to file Personal service by Sheriff or Process Server \$60
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: COURT WILL STAMP HERE MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:		CASE NUMBER: 19STSC12345
PLAINTIFF Jane Doe DEFENDANT Mike Jones		
APPLICATION AND ORDER FOR APPEARANCE AND EXAMINATION <input checked="" type="checkbox"/> ENFORCEMENT OF JUDGMENT <input type="checkbox"/> ATTACHMENT (Third Person) <input type="checkbox"/> Judgment Debtor <input checked="" type="checkbox"/> Third Person		

ORDER TO APPEAR FOR EXAMINATION

1. TO (name): Andrew Lee
2. YOU ARE ORDERED TO APPEAR personally before this court, or before a referee appointed by the court, to
 - a. furnish information to aid in enforcement of a money judgment against you.
 - b. answer concerning property of the judgment debtor in your possession or control or concerning a debt you owe the judgment debtor.
 - c. answer concerning property of the defendant in your possession or control or concerning a debt you owe the defendant that is subject to attachment.

Date:	Time:	Dept. or Div.:	Rm.:
Address of court <input type="checkbox"/> is shown above <input type="checkbox"/> is:			

3. This order may be served by a sheriff, marshal, registered process server, or the following specially appointed person (name):

Date: _____

JUDGE

This order must be served not less than 10 days before the date set for the examination.

IMPORTANT NOTICES ON REVERSE

APPLICATION FOR ORDER TO APPEAR FOR EXAMINATION

4. Original judgment creditor Assignee of record Plaintiff who has a right to attach order applies for an order requiring (name):
to appear and furnish information to aid in enforcement of the money judgment or to answer concerning property or debt.
5. The person to be examined is
 - a. the judgment debtor.
 - b. a third person (1) who has possession or control of property belonging to the judgment debtor or the defendant or (2) who owes the judgment debtor or the defendant more than \$250. An affidavit supporting this application under Code of Civil Procedure section 491.110 or 708.120 is attached.
6. The person to be examined resides or has a place of business in this county or within 150 miles of the place of examination.
7. This court is **not** the court in which the money judgment is entered or (attachment only) the court that issued the writ of attachment. An affidavit supporting an application under Code of Civil Procedure section 491.150 or 708.160 is attached.
8. The judgment debtor has been examined within the past 120 days. An affidavit showing good cause for another examination is attached.

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

Date: 10/9/2019

Jane Doe (TYPE OR PRINT NAME)

▶

(SIGNATURE OF DECLARANT)

(Continued on reverse)

Information for Judgment Creditor Regarding Service

If you want to be able to ask the court to enforce the order on the judgment debtor or any third party, you must have a copy of the order personally served on the judgment debtor by a sheriff, marshal, registered process server, or the person appointed in item 3 of the order at least 10 calendar days before the date of the hearing, and have a proof of service filed with the court.

IMPORTANT NOTICES ABOUT THE ORDER**APPEARANCE OF JUDGMENT DEBTOR (ENFORCEMENT OF JUDGMENT)**

NOTICE TO JUDGMENT DEBTOR If you fail to appear at the time and place specified in this order, you may be subject to arrest and punishment for contempt of court, and the court may make an order requiring you to pay the reasonable attorney fees incurred by the judgment creditor in this proceeding.

APPEARANCE OF A THIRD PERSON (ENFORCEMENT OF JUDGMENT)

(1) NOTICE TO PERSON SERVED If you fail to appear at the time and place specified in this order, you may be subject to arrest and punishment for contempt of court, and the court may make an order requiring you to pay the reasonable attorney fees incurred by the judgment creditor in this proceeding.

(2) NOTICE TO JUDGMENT DEBTOR The person in whose favor the judgment was entered in this action claims that the person to be examined under this order has possession or control of property that is yours or owes you a debt. This property or debt is as follows (*describe the property or debt*):

EXAMPLE: The employer is not complying with a wage garnishment order, served on 9/9/2019.

If you claim that all or any portion of this property or debt is exempt from enforcement of the money judgment, you must file your exemption claim in writing with the court and have a copy personally served on the judgment creditor not later than three days before the date set for the examination. You must appear at the time and place set for the examination to establish your claim of exemption or your exemption may be waived.

APPEARANCE OF A THIRD PERSON (ATTACHMENT)

NOTICE TO PERSON SERVED If you fail to appear at the time and place specified in this order, you may be subject to arrest and punishment for contempt of court, and the court may make an order requiring you to pay the reasonable attorney fees incurred by the plaintiff in this proceeding.

APPEARANCE OF A CORPORATION, PARTNERSHIP, ASSOCIATION, TRUST, OR OTHER ORGANIZATION

It is your duty to designate one or more of the following to appear and be examined: officers, directors, managing agents, or other persons who are familiar with your property and debts.



Request for Accommodations. Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least 5 days before your hearing. Contact the clerk's office for *Request for Accommodation* (form MC-410). (Civil Code, § 54.8.)

NAME, ADDRESS, AND TELEPHONE NUMBER OF ATTORNEY OR PARTY WITHOUT ATTORNEY: Ani Chong 123 Main Street Van Nuys, CA 91401	STATE BAR NUMBER	Reserved for Clerk's File Stamp
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES		
COURTHOUSE ADDRESS: 6230 Sylmar Ave., Van Nuys, CA 91401		
PLAINTIFF: Ani Chong		
DEFENDANT: Mike Jones		
AFFIDAVIT FOR ORDER FOR APPEARANCE AND EXAMINATION OF A THIRD PERSON		CASE NUMBER: 19VESC12345

I, Ani Chong the undersigned, am the judgment creditor in the above entitled action and declare that judgment was entered on 5/3/2019 against Mike Jones judgment debtor(s). I believe and allege that a third person named Andrew Lee, whose residence or place of business is 167 Vanowen St., Van Nuys, CA 94106

which is in the County of Los Angeles less than 150 miles from the place of trial, has possession or control of property of the judgment debtor, or is indebted to the judgment debtor in an amount exceeding \$250.00, which allegation is founded upon the following facts:

Mr. Andrew Lee is the sole owner of Lee's Cafe, the business where the Defendant currently is employed. Mr. Andrew Lee has not been cooperative with the wage garnishment order, but never denied that the Defendant was a current full time employee. I have attached a copy of Mr. Andrew Lee's business license to show that he owns the business where the Defendant works.

I request that an order be issued requiring Andrew Lee (name of third person)

to appear before this court and be examined under oath concerning said property or indebtedness.

Executed on 8/22/2019 at Los Angeles County, California (date)

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

Dated: 8/22/2019

Ani Chong

Signature of Affiant

NAME AND ADDRESS OF COURT:

Stanley Mosk Courthouse
111 N. Hill Street, Los Angeles

SMALL CLAIMS CASE NO.:
19STSC12345

SC-134

PLAINTIFF/DEMANDANTE (name, address, and telephone number of each):

Jane Doe
123 Main St., Los Angeles, CA 90012

Telephone No.:

DEFENDANT/DEMANDADO (name, address, and telephone number of each):

John Smith
456 White Oak Ave., Los Angeles, CA 90016

Telephone No.:

See attached sheet for additional plaintiffs and defendants.

FOR COURT USE ONLY

- Personal service by a sheriff or process server
- Must wait 30 days from the date the judgment was mailed.
- Filing Fee is \$60

**ORDER TO PRODUCE STATEMENT OF ASSETS
AND TO APPEAR FOR EXAMINATION**

1. TO JUDGMENT DEBTOR (name): **John Smith**
2. YOU ARE ORDERED

- a. to pay the judgment and file proof of payment (a canceled check or money order or cash receipt, and a written declaration that shows full payment of the judgment, including postjudgment costs and interest) with the court before the hearing date shown in the box below, **OR**
- b. to (1) personally appear in this court on the date and time shown below, and
(2) bring with you a completed *Judgment Debtor's Statement of Assets* (form SC-133).

At the hearing you will be required to

- answer questions about your income and assets; and
- explain why you did not complete and mail form SC-133 to judgment creditor in a timely manner. (You should have sent it within 30 days after the *Notice of Entry of Judgment* (form SC-130) was mailed or handed to you by the clerk.)

Hearing Date → Date: _____ Time: _____
Dept.: _____ Room: _____

Name and address of court if different from above:

If you fail to appear and have not paid the judgment, including postjudgment costs and interest, a bench warrant may be issued for your arrest, you may be held in contempt of court, and you may be ordered to pay penalties.

Si usted no se presenta y no ha pagado el monto del fallo judicial, inclusive las costas e intereses posteriores al fallo, la corte puede expedir una orden de detencion contra usted, declararle en desacato y ordenar clue pague multas.

3. This order may be served by a sheriff, marshal, or registered process server.

Date:



(SIGNATURE OF JUDGE)

APPLICATION FOR THIS ORDER

(See Instructions on reverse)

- A. Judgment creditor (the person who won the case) (name): **Jane Doe** applies for an order requiring judgment debtor (the person or business who lost the case and owes money) (name): **John Smith** to (1) pay the judgment or (2) personally appear in this court with a completed *Judgment Debtor's Statement of Assets* (form SC-133), explain why judgment debtor did not pay the judgment or complete and mail form SC-133 to judgment creditor within 30 days after the *Notice of Entry of Judgment* was mailed or handed to judgment debtor, and answer questions about judgment debtor's income and assets.
- B. I, judgment creditor, state the following:
- (1) Judgment debtor has not paid the judgment.
 - (2) Judgment debtor either did not file an appeal or the appeal has been dismissed or judgment debtor lost the appeal.
 - (3) Judgment debtor either did not file a motion to vacate or the motion to vacate has been denied.
 - (4) More than 30 days have passed since the *Notice of Entry of Judgment* was mailed or delivered to judgment debtor.
 - (5) I have not received a completed *Judgment Debtor's Statement of Assets* from judgment debtor.
 - (6) The person to be examined resides or has a place of business in this county or within 150 miles of the place of examination.

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

Date: **5/13/2019**

Jane Doe

(TYPE OR PRINT NAME)



Jane Doe
(DECLARANT)

– The county provides small claims advisor services free of charge –

Page 1 of 2

NAME AND ADDRESS OF COURT:

Stanley Mosk Courthouse
111 N. Hill Street, Los Angeles

SMALL CLAIMS CASE NO.:
19STSC12345

SC-134

PLAINTIFF/DEMANDANTE (name, address, and telephone number of each):

Jane Doe
123 Main St., Los Angeles, CA 90012

Telephone No.:

DEFENDANT/DEMANDADO (name, address, and telephone number of each):

Places to Go, Inc.
456 White Oak Ave., Los Angeles, CA 90016

Telephone No.:

See attached sheet for additional plaintiffs and defendants.

FOR COURT USE ONLY

- Must list an officer of the business.
- Personal service by a sheriff or process server
- Must wait 30 days from the date the judgment was mailed.
- Filing Fee is \$60

**ORDER TO PRODUCE STATEMENT OF ASSETS
AND TO APPEAR FOR EXAMINATION**

1. TO JUDGMENT DEBTOR (name): **John Smith**
2. YOU ARE ORDERED
 - a. to pay the judgment and file proof of payment (a canceled check or money order or cash receipt, and a written declaration that shows full payment of the judgment, including postjudgment costs and interest) with the court before the hearing date shown in the box below, **OR**
 - b. to (1) personally appear in this court on the date and time shown below, and
(2) bring with you a completed *Judgment Debtor's Statement of Assets* (form SC-133).

At the hearing you will be required to

- answer questions about your income and assets; and
- explain why you did not complete and mail form SC-133 to judgment creditor in a timely manner. (You should have sent it within 30 days after the *Notice of Entry of Judgment* (form SC-130) was mailed or handed to you by the clerk.)

Hearing Date	→ Date: _____	Time: _____
	Dept.: _____	Room: _____

Name and address of court if different from above:

If you fail to appear and have not paid the judgment, including postjudgment costs and interest, a bench warrant may be issued for your arrest, you may be held in contempt of court, and you may be ordered to pay penalties.

Si usted no se presenta y no ha pagado el monto del fallo judicial, inclusive las costas e intereses posteriores al fallo, la corte puede expedir una orden de detencion contra usted, declararle en desacato y ordenar que pague multas.

3. This order may be served by a sheriff, marshal, or registered process server.

Date: _____

(SIGNATURE OF JUDGE)

APPLICATION FOR THIS ORDER

(See Instructions on reverse)

- A. Judgment creditor (the person who won the case) (name): **Jane Doe** applies for an order requiring judgment debtor (the person or business who lost the case and owes money) (name): **Places to Go, Inc., Hector Soto, President** to (1) pay the judgment or (2) personally appear in this court with a completed *Judgment Debtor's Statement of Assets* (form SC-133), explain why judgment debtor did not pay the judgment or complete and mail form SC-133 to judgment creditor within 30 days after the *Notice of Entry of Judgment* was mailed or handed to judgment debtor, and answer questions about judgment debtor's income and assets.
- B. I, judgment creditor, state the following:
 - (1) Judgment debtor has not paid the judgment.
 - (2) Judgment debtor either did not file an appeal or the appeal has been dismissed or judgment debtor lost the appeal.
 - (3) Judgment debtor either did not file a motion to vacate or the motion to vacate has been denied.
 - (4) More than 30 days have passed since the *Notice of Entry of Judgment* was mailed or delivered to judgment debtor.
 - (5) I have not received a completed *Judgment Debtor's Statement of Assets* from judgment debtor.
 - (6) The person to be examined resides or has a place of business in this county or within 150 miles of the place of examination.

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

Date: **5/13/2019**
Jane Doe

(TYPE OR PRINT NAME)

Jane Doe
(DECLARANT)

– The county provides small claims advisor services free of charge –

Page 1 of 2

Name and Address of Court: Stanley Mosk
110 North Grand Avenue
Los Angeles, CA90012

SMALL CLAIMS CASE NO. 19STSC02101

PLAINTIFF/DEMANDANTE (Name, address, and telephone number of each):
Paul Jones
456 Goodland Avenue
Los Angeles, CA 90012

DEFENDANT/DEMANDADO (Name, address, and telephone number of each):
Susan Burke
987 Woodman Street
Los Angeles, CA 90044

Telephone No.: 213-876-5555

Telephone No.: 213-767-9999

Telephone No.:
 See attached sheet for additional plaintiffs and defendants.

Telephone No.:

**SMALL CLAIMS SUBPOENA
FOR PERSONAL APPEARANCE AND PRODUCTION OF DOCUMENTS
AND THINGS AT TRIAL OR HEARING AND DECLARATION**

THE PEOPLE OF THE STATE OF CALIFORNIA, TO (name, address, and telephone number of witness, if known):

Susan Burke
987 Woodman Street, Los Angeles, CA 90044

- 1. YOU ARE ORDERED TO APPEAR AS A WITNESS in this case at the date, time, and place shown in the box below UNLESS your appearance is excused as indicated in box 4b below or you make an agreement with the person named in item 2 below.

a. Date: 5/20/2019 Time: 1:30 Dept.: Div.: Room:
b. Address: 110 North Grand Avenue, Los Angeles, CA 90012

- 2. IF YOU HAVE ANY QUESTIONS ABOUT THE TIME OR DATE YOU ARE TO APPEAR, OR IF YOU WANT TO BE CERTAIN THAT YOUR PRESENCE IS REQUIRED, CONTACT THE FOLLOWING PERSON BEFORE THE DATE ON WHICH YOU ARE TO APPEAR:
a. Name of subpoenaing party: Paul Jones b. Telephone number: 213-876-5555
- 3. **Witness Fees:** You are entitled to witness fees and mileage actually traveled both ways, as provided by law, if you request them at the time of service. You may request them before your scheduled appearance from the person named in item 2.

PRODUCTION OF DOCUMENTS AND THINGS

(Complete item 4 only if you want the witness to produce documents and things at the trial or hearing.)

- 4. YOU ARE (item a or b must be checked):
a. Ordered to appear in person and to produce the records described in the declaration on page two. The personal attendance of the custodian or other qualified witness and the production of the original records are required by this subpoena. The procedure authorized by Evidence Code sections 1560(b), 1561, and 1562 will not be deemed sufficient compliance with this subpoena.
b. Not required to appear in person if you produce (i) the records described in the declaration on page two and (ii) a completed declaration of custodian of records in compliance with Evidence Code sections 1560, 1561, 1562, and 1271. (1) Place a copy of the records in an envelope (or other wrapper). Enclose the original declaration of the custodian with the records. Seal the envelope. (2) Attach a copy of this subpoena to the envelope or write on the envelope the case name and number; your name; and the date, time, and place from item 1 in the box above. (3) Place this first envelope in an outer envelope, seal it, and mail it to the clerk of the court at the address in item 1. (4) Mail a copy of your declaration to the attorney or party listed at the top of this form.
- 5. IF YOU HAVE BEEN SERVED WITH THIS SUBPOENA AS A CUSTODIAN OF CONSUMER OR EMPLOYEE RECORDS UNDER CODE OF CIVIL PROCEDURE SECTION 1985.3 OR 1985.6 AND A MOTION TO QUASH OR AN OBJECTION HAS BEEN SERVED ON YOU, A COURT ORDER OR AGREEMENT OF THE PARTIES, WITNESSES, AND CONSUMER OR EMPLOYEE AFFECTED MUST BE OBTAINED BEFORE YOU ARE REQUIRED TO PRODUCE CONSUMER OR EMPLOYEE RECORDS.

DISOBEDIENCE OF THIS SUBPOENA MAY BE PUNISHED AS CONTEMPT BY THIS COURT. YOU WILL ALSO BE LIABLE FOR THE SUM OF FIVE HUNDRED DOLLARS AND ALL DAMAGES RESULTING FROM YOUR FAILURE TO OBEY.

[SEAL]

Date issued:

Clerk, by _____, Deputy

(See reverse for declaration in support of subpoena)

Page one of three

PLAINTIFF/PETITIONER: Paul Jones	CASE NUMBER: 19STSC02101
DEFENDANT/RESPONDENT: Susan Burke	

**DECLARATION IN SUPPORT OF
SMALL CLAIMS SUBPOENA FOR PERSONAL APPEARANCE
AND PRODUCTION OF DOCUMENT AND THINGS AT TRIAL OR HEARING
(Code Civil Procedure sections 1985, 1987.5)**

1. I, the undersigned, declare I am the plaintiff defendant judgment creditor
 other (specify): _____ in the above entitled action.
2. The witness has possession or control of the following documents or other things and shall produce them at the time and place specified on the *Small Claims Subpoena* on the first page of this form.
- a. For trial or hearing (specify the exact documents or other things to be produced by the witness):
- Continued on Attachment 2a.
- b. After trial to enforce a judgment (specify the exact documents or other things to be produced by the party who is the judgment debtor or other witness possessing records relating to the judgment debtor):
- (1) Payroll receipts, stubs, and other records concerning employment of the party. Receipts, invoices, documents, and other papers or records concerning any and all accounts receivable of the party.
 - (2) Bank account statements, canceled checks, and check registers from any and all bank accounts in which the party has an interest.
 - (3) Savings account passbooks and statements, savings and loan account passbooks and statements, and credit union share account passbooks and statements of the party.
 - (4) Stock certificates, bonds, money market certificates, and any other records, documents, or papers concerning all investments of the party.
 - (5) California registration certificates and ownership certificates for all vehicles registered to the party.
 - (6) Deeds to any and all real property owned or being purchased by the party.
 - (7) Other (specify):
Social Security card, California Driver's License or form of identification.

3. Good cause exists for the production of the documents or other things described in paragraph 2 for the following reasons:

Defendant failed to pay judgment.

Continued on Attachment 3.

4. These documents are material to the issues involved in this case for the following reasons:

The documents are necessary for the Judgment Debtor Hearing to enable the judgment creditor to collect the judgment.

Continued on Attachment 4.

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

Date: 5/05/2019

..... Paul Jones
(TYPE OR PRINT NAME)

▶ Paul Jones
(SIGNATURE OF PARTY)

(See proof of service on page three)

PLAINTIFF/PETITIONER: Paul Jones	CASE NUMBER: 19STSC02101
DEFENDANT/RESPONDENT: Susan Burke	

**PROOF OF SERVICE OF SMALL CLAIMS SUBPOENA FOR PERSONAL APPEARANCE
AND PRODUCTION OF DOCUMENTS AND THINGS AT TRIAL OR HEARING
AND DECLARATION**

1. I served this *Small Claims Subpoena for Personal Appearance and Production of Documents and Things at Trial or Hearing and Declaration* by personally delivering a copy to the person served as follows:

- a. Person served (name): Susan Burke
- b. Address where served: 987 Woodman Street, Los Angeles, CA 90044
- c. Date of delivery: 05/07/2019
- d. Time of delivery: 11:00 A.M.
- e. Witness fees (check one):
 - (1) were offered or demanded and paid. Amount: \$ _____
 - (2) were not demanded or paid.
- f. Fee for service: \$ _____

2. I received this subpoena for service on (date):

3. Person serving:

- a. Not a registered California process server.
- b. California sheriff, marshal, or constable.
- c. Registered California process server.
- d. Employee or independent contractor of a registered California process server.
- e. Exempt from registration under Business & Professions Code section 22350(b).
- f. Registered professional photocopier.
- g. Exempt from registration under Business & Professions Code section 22451.
- h. Name, address, and telephone number and, if applicable, county of registration and number:

Paul Jones
456 Goodland Avenue
Los Angeles, CA 90012

213-876-5555

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

(For California sheriff, marshal, or constable use only)
I certify that the foregoing is true and correct.

Date: 05/07/2019

Date:

▶ Paul Jones
(SIGNATURE)

▶ _____
(SIGNATURE)

Name and Address of Court: Stanley Mosk
110 North Grand Avenue
Los Angeles, CA90012

SMALL CLAIMS CASE NO. 19STSC12345

PLAINTIFF/DEMANDANTE (Name, address, and telephone number of each):

Paul Jones
456 Goodland Avenue
Los Angeles, CA 90012

DEFENDANT/DEMANDADO (Name, address, and telephone number of each):

Joseph Smith Individually and DBA Joe's Auto
Repair
987 Woodman Street
Los Angeles, CA 90044

Telephone No.: 213-876-5555

Telephone No.:

Telephone No.:

Telephone No.:

See attached sheet for additional plaintiffs and defendants.

**SMALL CLAIMS SUBPOENA
FOR PERSONAL APPEARANCE AND PRODUCTION OF DOCUMENTS
AND THINGS AT TRIAL OR HEARING AND DECLARATION**

THE PEOPLE OF THE STATE OF CALIFORNIA, TO (name, address, and telephone number of witness, if known):

Custodian of Records, Bureau of Automotive Repair, Subpoena - PRA Unit
10949 North Mather Boulevard, Rancho Cordova, CA 95670

- 1. YOU ARE ORDERED TO APPEAR AS A WITNESS in this case at the date, time, and place shown in the box below UNLESS your appearance is excused as indicated in box 4b below or you make an agreement with the person named in item 2 below.

a. Date: 5/20/2019 Time: 1:30 Dept.: Div.: Room:
b. Address: 110 North Grand Avenue, Los Angeles, CA 90012

- 2. IF YOU HAVE ANY QUESTIONS ABOUT THE TIME OR DATE YOU ARE TO APPEAR, OR IF YOU WANT TO BE CERTAIN THAT YOUR PRESENCE IS REQUIRED, CONTACT THE FOLLOWING PERSON BEFORE THE DATE ON WHICH YOU ARE TO APPEAR:

a. Name of subpoenaing party: Paul Jones b. Telephone number: 213-876-5555

- 3. **Witness Fees:** You are entitled to witness fees and mileage actually traveled both ways, as provided by law, if you request them at the time of service. You may request them before your scheduled appearance from the person named in item 2.

PRODUCTION OF DOCUMENTS AND THINGS

(Complete item 4 only if you want the witness to produce documents and things at the trial or hearing.)

- 4. YOU ARE (item a or b must be checked):
a. Ordered to appear in person and to produce the records described in the declaration on page two. The personal attendance of the custodian or other qualified witness and the production of the original records are required by this subpoena. The procedure authorized by Evidence Code sections 1560(b), 1561, and 1562 will not be deemed sufficient compliance with this subpoena.
b. Not required to appear in person if you produce (i) the records described in the declaration on page two and (ii) a completed declaration of custodian of records in compliance with Evidence Code sections 1560, 1561, 1562, and 1271. (1) Place a copy of the records in an envelope (or other wrapper). Enclose the original declaration of the custodian with the records. Seal the envelope. (2) Attach a copy of this subpoena to the envelope or write on the envelope the case name and number; your name; and the date, time, and place from item 1 in the box above. (3) Place this first envelope in an outer envelope, seal it, and mail it to the clerk of the court at the address in item 1. (4) Mail a copy of your declaration to the attorney or party listed at the top of this form.
- 5. IF YOU HAVE BEEN SERVED WITH THIS SUBPOENA AS A CUSTODIAN OF CONSUMER OR EMPLOYEE RECORDS UNDER CODE OF CIVIL PROCEDURE SECTION 1985.3 OR 1985.6 AND A MOTION TO QUASH OR AN OBJECTION HAS BEEN SERVED ON YOU, A COURT ORDER OR AGREEMENT OF THE PARTIES, WITNESSES, AND CONSUMER OR EMPLOYEE AFFECTED MUST BE OBTAINED BEFORE YOU ARE REQUIRED TO PRODUCE CONSUMER OR EMPLOYEE RECORDS.

DISOBEDIENCE OF THIS SUBPOENA MAY BE PUNISHED AS CONTEMPT BY THIS COURT. YOU WILL ALSO BE LIABLE FOR THE SUM OF FIVE HUNDRED DOLLARS AND ALL DAMAGES RESULTING FROM YOUR FAILURE TO OBEY.

(SEAL)

Date issued:

Clerk, by _____, Deputy

(See reverse for declaration in support of subpoena)

Page one of three

PLAINTIFF/PETITIONER: Paul Jones	CASE NUMBER: 19STSC12345
DEFENDANT/RESPONDENT: Joseph Smith Individually and DBA Joe's Auto R	

**DECLARATION IN SUPPORT OF
SMALL CLAIMS SUBPOENA FOR PERSONAL APPEARANCE
AND PRODUCTION OF DOCUMENT AND THINGS AT TRIAL OR HEARING
(Code Civil Procedure sections 1985, 1987.5)**

1. I, the undersigned, declare I am the plaintiff defendant judgment creditor
 other (specify): _____ in the above entitled action.
2. The witness has possession or control of the following documents or other things and shall produce them at the time and place specified on the *Small Claims Subpoena* on the first page of this form.
- a. For trial or hearing (specify the exact documents or other things to be produced by the witness):
For trial or hearing (specify the exact documents or other things to be produced by the witness):
Records for complaint number SE2010987456. Date closed 4/2/2019.
- Continued on Attachment 2a.
- b. After trial to enforce a judgment (specify the exact documents or other things to be produced by the party who is the judgment debtor or other witness possessing records relating to the judgment debtor):
- (1) Payroll receipts, stubs, and other records concerning employment of the party. Receipts, invoices, documents, and other papers or records concerning any and all accounts receivable of the party.
 - (2) Bank account statements, canceled checks, and check registers from any and all bank accounts in which the party has an interest.
 - (3) Savings account passbooks and statements, savings and loan account passbooks and statements, and credit union share account passbooks and statements of the party.
 - (4) Stock certificates, bonds, money market certificates, and any other records, documents, or papers concerning all investments of the party.
 - (5) California registration certificates and ownership certificates for all vehicles registered to the party.
 - (6) Deeds to any and all real property owned or being purchased by the party.
 - (7) Other (specify): _____

3. Good cause exists for the production of the documents or other things described in paragraph 2 for the following reasons:

The case record from the Bureau of Automotive Repair will provide evidence to prove my court case.

Continued on Attachment 3.

4. These documents are material to the issues involved in this case for the following reasons:

The case record will show that the defendant charged me for new parts, but actually used parts from a salvaged vehicle.

Continued on Attachment 4.

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

Date: 4/27/2019

..... Paul Jones
(TYPE OR PRINT NAME)

▶ Paul Jones
(SIGNATURE OF PARTY)

(See proof of service on page three)

PLAINTIFF/PETITIONER: Paul Jones	CASE NUMBER: 19STSC12345
DEFENDANT/RESPONDENT: Joseph Smith Individually and DBA Joe's Auto R	

**PROOF OF SERVICE OF SMALL CLAIMS SUBPOENA FOR PERSONAL APPEARANCE
AND PRODUCTION OF DOCUMENTS AND THINGS AT TRIAL OR HEARING
AND DECLARATION**

1. I served this *Small Claims Subpoena for Personal Appearance and Production of Documents and Things at Trial or Hearing and Declaration* by personally delivering a copy to the person served as follows:
 - a. Person served (*name*): Custodian of Records, Bureau of Automotive Repair, Subpoena - PRA Unit
 - b. Address where served: 10949 North Mather Boulevard, Rancho Cordova, CA 95670
 - c. Date of delivery: 4/28/2019
 - d. Time of delivery: 11:00 am
 - e. Witness fees (*check one*):
 - (1) were offered or demanded
and paid. Amount: \$ 15
 - (2) were not demanded or paid.
 - f. Fee for service: \$ None

2. I received this subpoena for service on (*date*):

3. Person serving:

- a. Not a registered California process server.
- b. California sheriff, marshal, or constable.
- c. Registered California process server.
- d. Employee or independent contractor of a registered California process server.
- e. Exempt from registration under Business & Professions Code section 22350(b).
- f. Registered professional photocopier.
- g. Exempt from registration under Business & Professions Code section 22451.
- h. Name, address, and telephone number and, if applicable, county of registration and number:

Paul Jones
456 Goodland Avenue
Los Angeles, CA 90012
Phone: 213-876-5555

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

Date: 5/29/2019

▶ Paul Jones
(SIGNATURE)

(For California sheriff, marshal, or constable use only)
I certify that the foregoing is true and correct.

Date: _____
▶ _____
(SIGNATURE)

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): John Smith 425 Stonehenge Ave. Soda Springs, CA 90756 TELEPHONE NO.: (565) 555-1234 FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: 110 N. Grand Ave CITY AND ZIP CODE: Los Angeles, CA 90230 BRANCH NAME: Stanley Mosk	
PLAINTIFF/ PETITIONER: John Smith DEFENDANT/ RESPONDENT: Mae Johnson	CASE NUMBER: 19STSC12345
NOTICE TO CONSUMER OR EMPLOYEE AND OBJECTION (Code Civ. Proc., §§ 1985.3, 1985.6)	

NOTICE TO CONSUMER OR EMPLOYEE

TO (name): Mae Johnson

- PLEASE TAKE NOTICE THAT REQUESTING PARTY (name): John Smith SEEKS YOUR RECORDS FOR EXAMINATION by the parties to this action on (specify date): 7/24/2019
 The records are described in the subpoena directed to witness (specify name and address of person or entity from whom records are sought): Pam Patterson, C.E.O. of Smiles Dental, Inc., 555 Minkler Street, Smartsville, CA 90301
 A copy of the subpoena is attached.
- IF YOU OBJECT to the production of these records, YOU MUST DO ONE OF THE FOLLOWING BEFORE THE DATE SPECIFIED. IN ITEM a. OR b. BELOW:
 - If you are a party to the above-entitled action, you must file a motion pursuant to Code of Civil Procedure section 1987.1 to quash or modify the subpoena and give notice of that motion to the witness and the deposition officer named in the subpoena at least five days before the date set for production of the records.
 - If you are not a party to this action, you must serve on the requesting party and on the witness, before the date set for production of the records, a written objection that states the specific grounds on which production of such records should be prohibited. You may use the form below to object and state the grounds for your objection. You must complete the Proof of Service on the reverse side indicating whether you personally served or mailed the objection. The objection should not be filed with the court. **WARNING: IF YOUR OBJECTION IS NOT RECEIVED BEFORE THE DATE SPECIFIED IN ITEM 1, YOUR RECORDS MAY BE PRODUCED AND MAY BE AVAILABLE TO ALL PARTIES.**
- YOU OR YOUR ATTORNEY MAY CONTACT THE UNDERSIGNED to determine whether an agreement can be reached in writing to cancel or limit the scope of the subpoena. If no such agreement is reached, and if you are not otherwise represented by an attorney in this action, YOU SHOULD CONSULT AN ATTORNEY TO ADVISE YOU OF YOUR RIGHTS OF PRIVACY.

Date: 6/24/2019

John Smith
 (TYPE OR PRINT NAME)

▶ John Smith
 (SIGNATURE OF REQUESTING PARTY ATTORNEY)

OBJECTION BY NON-PARTY TO PRODUCTION OF RECORDS

- I object to the production of all of my records specified in the subpoena.
- I object only to the production of the following specified records:

3. The specific grounds for my objection are as follows:

Requesting party does not have my authority to access my personal dental records.

Date: 6/25/2019

Mae Johnson
 (TYPE OR PRINT NAME)

▶ Mae Johnson
 (SIGNATURE)

(Proof of service on reverse)

PLAINTIFF/PETITIONER: John Smith	CASE NUMBER:
DEFENDANT/RESPONDENT: Mae Johnson	19STSC12345

PROOF OF SERVICE OF NOTICE TO CONSUMER OR EMPLOYEE AND OBJECTION
(Code Civ. Proc., §§ 1985.3, 1985.6)

Personal Service Mail

1. At the time of service I was at least 18 years of age and not a party to this legal action.
2. I served a copy of the *Notice to Consumer or Employee and Objection* as follows (check either a or b):
 - a. **Personal service.** I personally delivered the *Notice to Consumer or Employee and Objection* as follows:

(1) Name of person served:	(3) Date served:
(2) Address where served:	(4) Time served:
 - b. **Mail.** I deposited the *Notice to Consumer or Employee and Objection* in the United States mail, in a sealed envelope with postage fully prepaid. The envelope was addressed as follows:

(1) Name of person served: Mae Johnson	(3) Date of mailing: 6/24/2019
(2) Address: 505 Sierra St., Maywood, CA 90064	(4) Place of mailing (city and state): Los Angeles, CA

(5) I am a resident of or employed in the county where the *Notice to Consumer or Employee and Objection* was mailed.
 - c. My residence or business address is (specify): 105 Stonewall Ave., Los Angeles, CA 90756
 - d. My phone number is (specify): (454) 454-4444

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
Date: 6/24/2019

Mary Jo

(TYPE OR PRINT NAME OF PERSON WHO SERVED)

(SIGNATURE OF PERSON WHO SERVED)

PROOF OF SERVICE OF OBJECTION TO PRODUCTION OF RECORDS
(Code Civ. Proc., §§ 1985.3, 1985.6)

Personal Service Mail

1. At the time of service I was at least 18 years of age and not a party to this legal action.
2. I served a copy of the *Objection to Production of Records* as follows (complete either a or b):
 - a. ON THE REQUESTING PARTY
 - (1) **Personal service.** I personally delivered the *Objection to Production of Records* as follows:

(i) Name of person served:	(iii) Date served:
(ii) Address where served:	(iv) Time served:
 - (2) **Mail.** I deposited the *Objection to Production of Records* in the United States mail, in a sealed envelope with postage fully prepaid. The envelope was addressed as follows:

(i) Name of person served: John Smith	(iii) Date of mailing: 6/24/2019
(ii) Address: 425 Stonehenge Ave. Soda Springs, CA 90756	(iv) Place of mailing (city and state): Los Angeles

(v) I am a resident of or employed in the county where the *Objection to Production of Records* was mailed.
 - b. ON THE WITNESS
 - (1) **Personal service.** I personally delivered the *Objection to Production of Records* as follows:

(i) Name of person served:	(iii) Date served:
(ii) Address where served:	(iv) Time served:
 - (2) **Mail.** I deposited the *Objection to Production of Records* in the United States mail, in a sealed envelope with postage fully prepaid. The envelope was addressed as follows:

(i) Name of person served:	(iii) Date of mailing:
(ii) Address:	(iv) Place of mailing (city and state):

(v) I am a resident of or employed in the county where the *Objection to Production of Records* was mailed.
3. My residence or business address is (specify):
4. My phone number is (specify):

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
Date: 6/24/2019

Sam Johnson

(TYPE OR PRINT NAME OF PERSON WHO SERVED)

(SIGNATURE OF PERSON WHO SERVED)

PLAINTIFF/PETITIONER: John Smith	CASE NUMBER:
DEFENDANT/RESPONDENT: Mae Johnson	19STSC12345

PROOF OF SERVICE OF NOTICE TO CONSUMER OR EMPLOYEE AND OBJECTION
(Code Civ. Proc., §§ 1985.3, 1985.6)

Personal Service Mail


1. At the time of service I was at least 18 years of age and not a party to this legal action.
2. I served a copy of the *Notice to Consumer or Employee and Objection* as follows (check either a or b):
 - a. **Personal service.** I personally delivered the *Notice to Consumer or Employee and Objection* as follows:

(1) Name of person served:	(3) Date served:
(2) Address where served:	(4) Time served:
 - b. **Mail.** I deposited the *Notice to Consumer or Employee and Objection* in the United States mail, in a sealed envelope with postage fully prepaid. The envelope was addressed as follows:

(1) Name of person served: Mae Johnson	(3) Date of mailing: 6/24/2019
(2) Address: 505 Sierra St., Maywood, CA 90064	(4) Place of mailing (city and state): Los Angeles, CA
 - c. My residence or business address is (specify): 105 Stonewall Ave., Los Angeles, CA 90756
 - d. My phone number is (specify): (454) 454-4444

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
Date: 6/24/2019

Mary Jo
(TYPE OR PRINT NAME OF PERSON WHO SERVED)


(SIGNATURE OF PERSON WHO SERVED)

PROOF OF SERVICE OF OBJECTION TO PRODUCTION OF RECORDS
(Code Civ. Proc., §§ 1985.3, 1985.6)

Personal Service Mail

1. At the time of service I was at least 18 years of age and not a party to this legal action.
2. I served a copy of the *Objection to Production of Records* as follows (complete either a or b):
 - a. ON THE REQUESTING PARTY
 - (1) **Personal service.** I personally delivered the *Objection to Production of Records* as follows:

(i) Name of person served:	(iii) Date served:
(ii) Address where served:	(iv) Time served:
 - (2) **Mail.** I deposited the *Objection to Production of Records* in the United States mail, in a sealed envelope with postage fully prepaid. The envelope was addressed as follows:

(i) Name of person served:	(iii) Date of mailing:
(ii) Address:	(iv) Place of mailing (city and state):
 - (v) I am a resident of or employed in the county where the *Objection to Production of Records* was mailed.
- b. ON THE WITNESS
 - (1) **Personal service.** I personally delivered the *Objection to Production of Records* as follows:

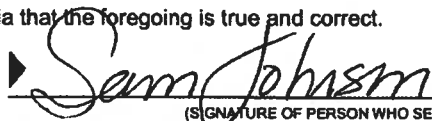
(i) Name of person served:	(iii) Date served:
(ii) Address where served:	(iv) Time served:
 - (2) **Mail.** I deposited the *Objection to Production of Records* in the United States mail, in a sealed envelope with postage fully prepaid. The envelope was addressed as follows:

(i) Name of person served: Pam Patterson, C.E.O. of Smiles Den	(iii) Date of mailing: 6/24/2019
(ii) Address: 555 Minkler St., Smartsville, CA 90301	(iv) Place of mailing (city and state): Los Angeles, CA
 - (v) I am a resident of or employed in the county where the *Objection to Production of Records* was mailed.

3. My residence or business address is (specify):
4. My phone number is (specify):

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
Date: 6/24/2019

Sam Johnson
(TYPE OR PRINT NAME OF PERSON WHO SERVED)


(SIGNATURE OF PERSON WHO SERVED)

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address): Gail Green 450 Goodland Ave Encino, CA 91316	TELEPHONE NO.:	FOR COURT USE ONLY
ATTORNEY FOR LIEN CLAIMANT: NAME OF COURT: Los Angeles Superior Court STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Stanley Mosk		
PLAINTIFF: Dana Cosgrove DEFENDANT: Bob the Builder, Inc.		
<p style="text-align: center;">NOTICE OF LIEN (Attachment—Enforcement of Judgment)</p>		CASE NUMBER: 19STSC12345

ALL PARTIES IN THIS ACTION ARE NOTIFIED THAT

1. A lien is created by this notice under
 - a. Article 3 (commencing with section 491.410) of Chapter 11 of Title 6.5 of Part 2 of the Code of Civil Procedure.
 - b. Article 5 (commencing with section 708.410) of Chapter 6 of Title 9 of Part 2 of the Code of Civil Procedure.
2. The lien is based on a
 - a. right to attach order and an order permitting the creation of a lien (copies attached).
 - b. money judgment.
3. The right to attach order or the money judgment is entered in the following action:
 - a. Title of court (specify): **Los Angeles Superior Court, Van Nuys Branch, Small Claims**
 - b. Name of case (specify): **Green vs Cosgrove**
 - c. Number of case (specify): **LAV12V02222**
 - d. Date of entry of judgment (specify): **09/20/18**
 - e. Dates of renewal of judgment (specify):
4. The name and address of the judgment creditor or person who obtained the right to attach order are (specify):
Green, Gail 456 Goodland Avenue, Encino, CA 91316
5. The name and last known address of the judgment debtor or person whose property is subject to the right to attach order are (specify):
Cosgrove, Dana 510 First Street, Los Angeles, CA 90012
6. The amount required to satisfy the judgment creditor's money judgment or to secure the amount to be secured by the attachment at the time this notice of lien is filed is
\$4,060.00
7. The lien created by this notice attaches to any cause of action of the person named in item 5 that is the subject of this action or proceeding and to that person's rights to money or property under any judgment subsequently procured in this action or proceeding.
8. No compromise, dismissal, settlement, or satisfaction of this action or proceeding or any of the rights of the person named in item 5 to money or property under any judgment procured in this action or proceeding may be entered into by or on behalf of that person, and that person may not enforce any rights to money or property under any judgment procured in this action or proceeding by a writ or otherwise, unless one of the following requirements is satisfied:
 - a. the prior approval by order of the court in this action or proceeding has been obtained;
 - b. the written consent of the person named in item 4 has been obtained or that person has released the lien; or
 - c. the money judgment of the person named in item 4 has been satisfied.

NOTICE The person named in item 5 may claim an exemption for all or any portion of the money or property within 30 days after receiving notice of the creation of the lien. The exemption is waived if it is not claimed in time.

Date: 11/14/2019

Gail Green
(TYPE OR PRINT NAME)

▶ 
(SIGNATURE OF LIEN CLAIMANT OR ATTORNEY)

- \$20 filing fee
- Must pay full amount
- Must make payable to "LA Superior Court"

- Check with court to confirm pay off amount plus include \$20 filing fee in check

SC-145

Name and Address of Court:

Stanley Mosk
110 N Grand Ave. #429, Los Angeles, CA 90012

SMALL CLAIMS CASE NO.: 19STSC12345

PLAINTIFF/DEMANDANTE (Name and address of each): Jane Doe 123 Main Street Los Angeles, CA 90001	DEFENDANT/DEMANDADO (Name and address of each): Mike Jones 456 Central Ave Los Angeles, CA 90009
--	---

See attached sheet for additional plaintiffs and defendants.

REQUEST TO PAY JUDGMENT TO COURT

- Instead of paying the judgment directly to the creditor, I want to pay it to the court.
- Date judgment was entered (specify): 03/01/2019
- Judgment creditor (the person or business you were ordered to pay)
 - Full name: Jane Doe
 - Address (use last known): 123 Main St, Los Angeles, CA 90001
- I understand that the amount of money I must pay to get a satisfaction of judgment is the total of the
 - principal amount of money the court ordered me to pay,
 - costs (if awarded by the court),
 - interest accrued on the judgment,
 - the court's processing fee, and
 - other charges the court has added to the judgment. (The court will calculate the total (see reverse).)
- Partial payment (Complete this section if you have ALREADY PAID PART of the judgment.)

I have already paid part of the judgment.

Amount paid: \$ _____ (check one or both of the boxes below.)

 - by check or money order. (Attach a copy of both sides of the canceled check or money order.)
 - by cash. (Attach a copy of the signed, dated cash receipt)
- I understand that if I pay by personal check, satisfaction of judgment will be delayed 30 days.
- I request the court to calculate the total amount required to enter a satisfaction of judgment, and to enter a satisfaction of judgment after I have paid the total amount to the court.

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

Date: 03/09/2019

Mike Jones
.....
(TYPE OR PRINT NAME)


.....
(SIGNATURE OF JUDGMENT DEBTOR)

Judgment creditor: See important notice on reverse.

<p style="text-align: center;">CERTIFICATION</p> <p>I certify that this document is a true and correct copy of the original on file with this court.</p> <p>(Seal)</p> <p>Clerk, by _____, Deputy</p>	<p style="text-align: center;">SATISFACTION OF JUDGMENT (for court use only)</p> <p>(1) <input type="checkbox"/> Full satisfaction of judgment entered as to judgment debtor (name): _____ on (date): _____</p> <p>(2) <input type="checkbox"/> Full satisfaction of judgment NOT entered as requested (state reason): _____</p> <p>Clerk, by _____, Deputy</p>
--	--

SC-220**Request to Make Payments**

Read the other side before you fill out this form.

- ① I am asking for permission to pay my small claims judgment in payments.

My name is: Michael Green

Mailing address: 823 White Oak Ave., Los Angeles, CA 90018

Phone: _____

- ② On (date): 6/17/2019, the court made the decision (judgment) that:

I owe (total amount): \$ 1,305.00

To (name of party you must pay): Elle Smith

Mailing address: 123 Main Street, Los Angeles, CA 90012

Phone: _____

- ③ I am asking for permission to make payments, instead of paying the full amount all at once, because (explain):

If your answer will not fit in the space below, check this box and attach your answer on a separate sheet of paper. Write "SC-220, Item 3" at the top.

Paying the judgment in full will cause my family severe financial hardship. I have too much debt and not enough income to take care of the basic needs of my family.

- ④ I ask the court to allow me to make payments on the following terms (check and complete all that apply):

a. Payments of \$ 50.00, on the 1st day of each (month, week, other): month

Starting (date): 8/1/19, until (date of final payment): 11/1/21; amount of final payment: \$ 5.00

b. Other payment schedule (specify): _____

c. The total amount of payments is \$ _____, which includes interest on the unpaid balance of the judgment. The actual amount of that interest may be different if the payments are made late or early. Attach a page that shows how you calculated the interest and write "SC-220, Item 4c" at the top.

d. The total amount of payments is the same as the judgment. If all payments are made in full and on time, no interest will be owed on the judgment, and the judgment will be paid in full.

e. Other (specify): _____

Warning! If any payment is not made in full and on time, the judgment creditor may notify the court to cancel the payment plan and the entire unpaid balance will become due and collectible.

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

Date: 6/29/2019

Michael Green

Type or print your name

Michael Green
Sign here

Clerk stamps here when form is filed.

- Attach form EJ-165
- Prevents further collections processes

Interest is usually waived as long as all payments are made

Fill in the court name and street address:

Superior Court of California, County of

Fill in your case number and case name:

Case Number:

19STSC01234

Case Name:

Payments in Small Claims Cases

General Information

If the court ordered you to pay money, you can ask the court for permission to make payments. Here's how:

- Read this form.
- Fill out Form SC-220, *Request to Make Payments*. Fill out one form for each plaintiff or defendant (judgment creditor) you want to make payments to.
- Fill out Form EJ-165, *Financial Statement*.
- File your completed forms with the small claims court clerk.

The court will mail all other plaintiffs and defendants in the case copies of your *Request to Make Payments* and *Financial Statement*, and a blank Form SC-221, *Response to Request to Make Payments*.

The other parties will have 10 days to file a *Response*. Then, the court will mail all plaintiffs and defendants in the case:

- A decision on the *Request to Make Payments* or
- A notice to go to a hearing.

If the court ordered someone to pay you money, and that person has filed a *Request to Make Payments*...

- Read this form and the *Request*.
- If you agree with the *Request*, you do not need to do anything.
- If you do not agree with the *Request* or you want to be paid interest, file a *Response* within 10 days after the court clerk mailed the *Request* to you. (This date is on the *Clerk's Certificate of Mailing*.) If you do not do this, the court may allow the person who owes you money to make payments. And, you may lose your rights to collect interest on the judgment.

To file your *Response*:

- Fill out Form SC-221, *Response to Request to Make Payments*.
- Have your *Response* served on all other plaintiffs and defendants in your case. (See Form SC-112A, *Proof of Service By Mail*.)
- File your *Response* and *Proof of Service* with the small claims court clerk.

Answers to Common Questions

When is the judgment due?

Unless the court orders otherwise, small claims judgments are due immediately. If the judgment is not paid in full within 30 days, the judgment creditor (person to whom the money is owed) can take legal steps to collect any unpaid amount. (Collection may be postponed if an appeal or a request to vacate (cancel) or correct the judgment is filed.)

Can the judgment debtor make payments?

A party who was ordered to pay a small claims judgment (the judgment debtor) can ask the court for permission to make payments. If the court agrees, the party who is owed money (the judgment creditor) cannot take any other steps to collect the money as long as the payments are made on time.

Is interest added after the judgment?

Interest (10 percent per year) is usually added to the unpaid amount of the judgment from the date the judgment is entered until it is paid in full. Interest can only be charged on the unpaid amount of the judgment (the principal); interest cannot be charged on any unpaid

interest. If a partial payment is received, the money is applied first to unpaid interest and then to unpaid principal.

When the court allows payments, the court often does not order any interest, as long as all payments are made in full and on time. Unless the creditor asks for interest to be included in the order allowing payments, the creditor may lose any claims for interest. But, if the debtor does not make full payments on time, interest on the missed payment or the entire unpaid balance might become due and collectible.

How do I calculate interest?

If you are proposing a payment schedule that includes interest, you need to itemize the principal and interest for each payment. To do this, you can search on the Internet for "free amortization calculator." Enter the total amount of the judgment as the principal, the interest rate of 10 percent per year, the frequency of payments (monthly, weekly, etc.), and the number or length of payments. Print the results showing the payment amount and how each payment is divided between principal and interest. Attach this to your *Request* or *Response*.



Need help?

For free help, contact your county's small claims advisor:

Or go to "County-Specific Court Information" at www.courts.ca.gov/selfhelp-smallclaims.htm

SHORT TITLE: Doe vs Jones	LEVYING OFFICER FILE NO.	COURT CASE NO. 19STSC12345
------------------------------	--------------------------	-------------------------------

FINANCIAL STATEMENT
(Wage Garnishment—Enforcement of Judgment)

NOTE: If you are married, this form must be signed by your spouse unless you and your spouse are living separate and apart. If this form is not signed by your spouse, check the applicable box on the reverse in Item 9.

1. The following persons other than myself depend, in whole or in part, on me or my spouse for support:

NAME	AGE	RELATIONSHIP TO ME	MONTHLY TAKE-HOME INCOME & SOURCE
a. Jenny Jones	29	Spouse	\$0
b. Mike Jones, Jr.	10	Son	\$0
c. Jaime Jones	15	Daughter	\$0
d.			
e.			

2. My monthly income

- a. My gross monthly pay is: 2a. \$ 2,700
- b. My payroll deductions are (specify purpose and amount):
 - (1) Federal and state withholding, FICA, and SDI. \$ 215.00
 - (2) Medicare \$ 21.23
 - (3) Life Insurance \$ 50.21
 - (4) Retirement \$ 159.34
- My TOTAL payroll deduction amount is (add (1) through (4)): b. \$ 445.78
- c. My monthly take-home pay is (a minus b): c. \$ 2254.22
- d. Other money I get each month from (specify source):
_____ is d. \$ _____

e. TOTAL MONTHLY INCOME (c plus d)	e. \$ <u>2254.22</u>
--	----------------------

3. I, my spouse, and my other dependents own the following property:

- a. Cash 3a. \$ 0
- b. Checking, savings, and credit union accounts (list banks):
 - (1) LA Financial Savings \$ 150.00
 - (2) Wells Fargo Checking \$ 750.00
 - (3) \$ _____
- b. \$ 900.00
- c. Cars, other vehicles, and boat equity (list make, year of each):
 - (1) '90 Honda Civic \$ 1,500
 - (2) '99 Toyota Camry \$ 5,000
 - (3) \$ _____
- c. \$ 6,500
- d. Real estate equity d. \$ 0
- e. Other personal property (jewelry, furniture, furs, stocks, bonds, etc.) (list separately):
.....
.....
- e. \$ 0

SHORT TITLE: Doe vs Jones	LEVYING OFFICER FILE NO	COURT CASE NO 19STSC12345
------------------------------	-------------------------	------------------------------

4. The monthly expenses for me, my spouse, and my other dependents

- a. Rent or house payment and maintenance 4 a. \$ 1,000
- b. Food and household supplies b. \$ 300
- c. Utilities and telephone c. \$ 100
- d. Clothing d. \$ 20
- e. Medical and dental payments e. \$ 0
- f. Insurance (life, health, accident, etc.) f. \$ 0
- g. School, child care g. \$ 0
- h. Child, spousal support (prior marriage) h. \$ 0
- i. Transportation & auto expenses (insurance, gas, repair) (list car payments in item 5) i. \$ 200
- j. Installment payments (insert total and itemize below in item 5) j. \$ 250
- k. Laundry and cleaning k. \$ 30
- l. Entertainment l. \$ 100
- m. Other (specify):

m. \$ 0

n. TOTAL MONTHLY EXPENSES (add a through m):	n. \$ 1,900
--	-------------

5. I, my spouse, and my other dependents owe the following debts:

CREDITOR'S NAME	FOR	MO. PAYMENTS	BALANCE OWED	OWED BY (State person's name)
WFN Financial	Toyota	\$250.00	\$4,500.00	Mike Jones

6. Other facts which support this Claim of Exemption (i.e., unusual medical needs, school tuition, expenses for recent family emergencies, or other unusual expenses to help your creditor and the judge understand your budget) (describe): (If more space is needed, attach page labeled Attachment 6.)

7. An earnings withholding order is now in effect with respect to my earnings or those of my spouse or dependents named in item 1 (specify each person's name and monthly amount):

8. A wage assignment for support is now in effect with respect to my earnings or those of my spouse or dependents named in item 1 (specify each person's name and monthly amount):

- 9. My spouse has signed below.
- I have no spouse.
- My spouse and I are living separate and apart.

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

Date: 6/29/2019

Mike Jones

(TYPE OR PRINT NAME)

Jenny Jones

(TYPE OR PRINT NAME OF SPOUSE)

▶ Mike Jones

(SIGNATURE)
▶ Jenny Jones

(SIGNATURE OF SPOUSE)

Response to Request to Make Payments

Clerk stamps here when form is filed.

- Respond within 10 days
- File with court

Read both sides of Form SC-220, Request to Make Payments, before you fill out this form.

1 I am a judgment creditor in this small claims case.

My name is: Elle Smith

Mailing address: 123 Main Street, Los Angeles

Phone:

2 The judgment debtor who asked to make payments in this case is:

(Name): Michael Green

Fill in the court name and street address:

Superior Court of California, County of

3 I agree to accept the payment plan in the Request.

Fill in your case number and case name:

Case Number: 19STSC01234
Case Name:

4 I agree to accept a different payment plan (check and complete all that apply):

a. Payments of \$ 100.00 on the 1st day of each (month, week, other): month
Starting (date): 8/1/19, until (date of final payment): 10/1/20; amount of final payment: \$ 5.00

b. Other payment schedule (specify):

c. The total amount of payments is \$, which includes interest on the unpaid balance of the judgment. The actual amount of that interest may be different if the payments are made late or early. Attach a page that shows how you calculated the interest and write "SC-221, Item 4c" at the top.

d. The total amount of payments is the same as the judgment. If all payments are made in full and on time, no interest will be owed on the judgment, and the judgment will be paid in full.

e. Other (specify):

Important! If any payment is not made in full and on time, you may notify the court to cancel the payment plan and the entire unpaid balance will become due and collectible.

5 I do not agree to accept payments because (explain):

If your answer will not fit in the space below, check this box and attach your answer on a separate sheet of paper. Write "SC-221, Item 5" at the top.

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

Date: 7/5/19

Elle Smith
Type or print your name

Elle Smith
Sign here

SC-223

Declaration of Default in Payment of Judgment

Clerk stamps here when form is filed.

-File with court once payment plan has been broken

Important: Read the other side before you fill out this form or if it was mailed to you. If you are the judgment debtor named in 2 and you disagree with this Declaration of Default in Payment of Judgment, you may file Response to Declaration of Default in Payment of Judgment (Form SC-224) within 10 days after the declaration was mailed to you.

1 I am asking the court to order that the remaining balance of a small claims judgment is now due and collectible because payments were not made as the court ordered.

My name is: Paul Johnson

Mailing address: 2601 E. Victoria St., Wilmington, CA 90220

Phone: E-mail (optional):

2 The judgment debtor who has not made payments as the court ordered is (complete a separate form for each judgment debtor who has not paid as ordered):

Name: Joseph Jones

Mailing address: 200 Easton Lane, Santa Monica, CA 90401

Phone: E-mail (optional):

3 On (date): 5/12/2019 the court ordered that the judgment debtor named in 2 must pay me, or someone who assigned the judgment to me, principal, prejudgment interest, and costs in the total amount of \$4,085.00

4 On (date): 6/20/2019 the court ordered that the judgment debtor named in 2 may pay the judgment described in 3 as follows:

a. [X] Payments of \$ 100.00 on the 1st day of each (month, week, other): month starting (date): 7/1/2019, until (date of final payment): PIF; amount of final payment: \$

b. [] Other payment schedule (specify): Note above: PIF stands for Paid in Full

5 The payments listed below, and no others, have been made on the judgment described in 3.

[] Check here if there is not enough space below. List the date and amount of each payment on a separate page and write "SC-223, Item 5" at the top.

Table with 8 columns: Date, Amount, Date, Amount, Date, Amount, Date, Amount. Rows include 7/1/2019 \$100.00, 9/1/2019 \$100.00, 8/1/2109 \$100.00.

6 The total amount of the payments that have been made on the judgment described in 3 is \$ 300.00, and the balance due, without adding any interest after the judgment, is \$ 3,785.00

7 I request interest on the judgment, in the amount of \$ 141.44, calculated as follows:

[] Check here if there is not enough space below. Explain how you calculated interest on a separate page and write "SC-223, Item 7" at the top.

Interest prior to installment payment (5/12/19 - 6/20/2019) = \$43.68 plus

Interest after default on installment payments (10/2/19 - 1/4/20) = \$97.76 for a total of \$141.44

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

Date: 1/4/2020

Paul Johson

Type or print your name

Paul Johnson

Sign here

Default in Payments on Small Claims Judgment

General Information

If the court ordered that another plaintiff or defendant (judgment debtor) may pay a small claims judgment in payments, and that judgment debtor has not made the payments as ordered, you can ask the court to order that the full balance of the judgment is due and collectible. Here's how:

- Read this form.
- Fill out page 1 of Form SC-223, *Declaration of Default in Payment of Judgment*. Fill out a separate form for each judgment debtor who did not make payments as ordered.
- File your completed form(s) with the small claims court clerk.

The court will mail all other plaintiffs and defendants in the case copies of the *Declaration* and a blank Form SC-224, *Response to Declaration of Default in Payment of Judgment*.

The judgment debtor will have 10 days to file a **Response**. Then the court will mail all plaintiffs and defendants in the case:

- A decision, or
- A notice to go to a hearing.

If the court ordered that you may make payments on a judgment, and another plaintiff, defendant, or person to whom the judgment has been assigned (judgment creditor) has filed Form SC-223, *Declaration of Default in Payment of Judgment*, asking the court to order that the full balance is now due and collectible because you did not make the payments:

- Read this form and the *Declaration*.
- If you agree with the court ordering that the amounts claimed in the *Declaration* are now due in full, you do not need to do anything.
- **If you do not agree with the *Declaration* or with the court ordering that the amounts it claims are now due in full, file a *Response* within 10 calendar days after the court clerk mailed the *Declaration* to you.** (This date is on the *Clerk's Certificate of Mailing*.)

To file your *Response*:

- Fill out Form SC-224, *Response to Declaration of Default in Payment of Judgment*.
- Have your *Response* served on the judgment creditor and all other plaintiffs and defendants in your case. (See Form SC-112A, *Proof of Service by Mail*.)
- File your *Response* and *Proof of Service* with the small claims court clerk.

Answers to Common Questions

When is the judgment due?

Unless the court orders otherwise, small claims judgments are due immediately. If the judgment is not paid in full within 30 days, the judgment creditor (person to whom the money is owed) can take legal steps to collect any unpaid amount. (Collection may be postponed if an appeal or a request to vacate (cancel) or correct the judgment is filed.)

When can the judgment debtor make payments?

A plaintiff or defendant who was ordered to pay a small claims judgment (judgment debtor) can ask the court for permission to make payments. If the court agrees, the plaintiff or defendant who is owed money (the judgment creditor) cannot take any other steps to collect the money as long as the payments are made on time. If payments are not made on time, the judgment creditor can ask the court to order that the remaining balance of the judgment is due and collectible.

Is interest added after the judgment?

Interest (10 percent per year) is usually added to the unpaid amount of the judgment from the date the judgment is entered until it is paid in full. Interest can only be charged on the unpaid amount of the judgment (the

principal); interest cannot be charged on any unpaid interest. If a partial payment is received, the money is applied first to unpaid interest and then to unpaid principal.

When the court allows payments, the court often does not order any interest, as long as all payments are made in full and on time. Unless the judgment creditor asks for interest to be included in the order allowing payments, the judgment creditor may lose any claims for interest. But if the judgment debtor does not make full payments on time, interest on the missed payment or the entire unpaid balance might become due and collectible.

How do I calculate interest?

If you are asking for interest or disagreeing with a request for interest, you need to explain your interest calculation. Interest, at the rate of 10 percent per year (.0274 percent per day), may be added to the full unpaid balance of the judgment or only to payments that were not made on time. To calculate interest, show the unpaid principal balance, the dates and number of days you want the court to allow interest on that amount, and the total interest for that period. If payments were made, you will need to make separate calculations for the reduced principal balance after each payment.



Need help?

For free help, contact your county's small claims advisor:

Or go to www.courts.ca.gov/smallclaims/advisor

SC-223 Declaration of Default in Payment of Judgment

#3: Total Judgment is issued on 5/12/19 in the amount of **\$4,085.00**.

#4: On 6/20/19 the court ordered installment payments; rate of **\$100/month**, beginning 7/1/19.

#5: List the dates and amounts of the installment payments that were completed.

****The judgment creditor has the right to claim interest from the day the judgment was issued (5/12/19) to the day the court ordered installment payments (6/20/19).**

To calculate interest (Total Judgment x Interest is 10% per year):

$$\text{\$4,085.00 (Total Judgment)} \times .10 \text{ (10\% per year)} = \text{\$408.50 (Total Interest per Year)}$$

To calculate Daily Interest (Total Interest per Year/365 Days in a Year):

$$\text{\$408.50 (Total Interest per Year)} / 365 \text{ (Days)} = \text{\$1.12 (Total Interest per Day)}$$

The Creditor can claim interest at the rate of \$1.12/day for the 39 days prior to the court issuing the installment plan:

$$\text{\$1.12 (Interest per Day)} \times 39 \text{ (days)} = \text{\$43.68 (Interest before Installment Payments were Approved)}$$

#6: Total Amount of payments made (**\$300**), the New Judgment Due without interest (**\$3,785.00**).

Remember, the interest cannot resume until the date the Debtor defaulted on 10/2/19 (day after the payment is expected). The Creditor filed the SC-223 on 1/4/2020, so the interest can be calculated from Judgment date (5/12/19) until the installment payments were ordered (6/20/19). Plus, interest can be calculated from default in installment payments (10/2/19) until the SC-223 is submitted to the court (1/4/2020).

#7: For the Description: interest prior to installment payment (5/12/19– 6/20/19 = **\$43.68**) plus interest after default on installment payments (10/2/19 – 1/4/2020 = **\$97.76**). for a total of **\$141.44**.

5/12/19 – 6/20/19 = **\$43.68** (see equations above)

10/2/19 – 1/4/2020 =

$$\text{\$3,785.00 (New Judgment)} \times .10 \text{ (10\% per year)} = \text{\$378.50 (Total Interest per Year)}$$

$$\text{\$378.50 (Total Interest per Year)} / 365 \text{ (Days in a Year)} = \text{\$1.04 (Total Interest per Day)}$$

$$\text{\$1.04 (Interest per Day)} \times 94 \text{ (Days from 10/2/19 – 1/4/2020)} = \text{\$97.76 (Interest After Default in Payments)}$$

SC-224**Response to Declaration of Default in Payment of Judgment**

Clerk stamps here when form is filed.

Important: If you disagree with a judgment creditor's *Declaration of Default in Payment of Judgment* (Form SC-223), you may file a *Response to Declaration of Default in Payment of Judgment* (Form SC-224) within 10 days after Form SC-223 was mailed to you. Read the other side before you fill out this form.

- ① I am responding to a *Declaration of Default in Payment of Judgment* (Form SC-223).

My name is: Joseph Jones

Mailing address: 123 E. Victoria St., Los Angeles CA 90020

Phone: _____ E-mail (optional): _____

- ② The plaintiff or defendant (judgment creditor) who filed the *Declaration of Default* is:

Name: Paul Johnson

Mailing address: 200 Easton Lane, Santa Monica, CA 90401

Phone: _____ E-mail (optional): _____

- ③ I agree with the information in the *Declaration of Default*.

- ④ I do not agree that the court ordered the payment schedule stated in item ④ of the *Declaration of Default*. (Describe your disagreement.)

- ⑤ I do not agree with the dates or amounts of the payments listed in item ⑤ of the *Declaration of Default*. The payments listed below have been made on the judgment.

Check here if there is not enough space below. List the date and amount of each payment on a separate page and write "SC-224, Item 5" at the top.

Date	Amount	Date	Amount	Date	Amount	Date	Amount
10/1/2018	\$100.00	11/1/2018	\$100.00	12/1/2018	\$100.00	1/1/2019	\$100.00
2/2/2019	\$100.00	3/1/2019	\$100.00	4/1/2019	\$100.00		

- ⑥ The total amount of the payments that have been made on the judgment is \$ 700.00, and the balance due, without adding any interest after the judgment, is \$ 3,385.00.

- ⑦ I agree that interest in the amount of \$ 77.28 may be added to the balance of the judgment. This interest is calculated as follows:

Check here if there is not enough space below. Explain how you calculated interest on a separate page and write "SC-224, Item 7" at the top.

Interest should be \$77.28 which was accrued prior to installment payments. All payments were mailed timely to the creditor but the payments for January 2019, February 2019, March 2019, and April 2019 were returned by the post office as undeliverable.

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

Date: 4/22/2019

Joseph Jones

Type or print your name

▶ Joseph Jones
Sign here

Fill in the court name and street address:

Superior Court of California, County of

Fill in your case number and case name:

Case Number:

19PDSC12345

Case Name:



Default in Payments on Small Claims Judgment

General Information

If the court ordered that you may make payments on a judgment, and another plaintiff, defendant, or person to whom the judgment was assigned (judgment creditor) has filed Form SC-223, *Declaration of Default in Payment of Judgment*, asking the court to order that the full balance is now due and collectible because you did not make the payments:

- Read this form and the *Declaration*.
- If you agree with the court ordering that the amounts claimed in the *Declaration* are now due in full, you do not need to do anything.
- If you do not agree with the *Declaration* or with the court ordering that the amounts it claims are now due in full, file a *Response* within 10 calendar days after the court clerk mailed the *Declaration* to you. (This date is on the *Clerk's Certificate of Mailing*.) If you do not do so, the court may order that the balance of the judgment is now due and collectible in full and may also order interest on the unpaid amount of the judgment.

To file your *Response*:

- Fill out Form SC-224, *Response to Declaration of Default in Payment of Judgment*.
- Have your *Response* served on all other plaintiffs and defendants in your case. (See Form SC-112A, *Proof of Service by Mail*.)
- File your *Response* and *Proof of Service* with the small claims court clerk.

The court will mail all plaintiffs and defendants in the case

- A decision, or
- A notice to go to a hearing.

Answers to Common Questions

When is the judgment due?

Unless the court orders otherwise, small claims judgments are due immediately. If the judgment is not paid in full within 30 days, the judgment creditor (person to whom the money is owed) can take legal steps to collect any unpaid amount. (Collection may be postponed if an appeal or a request to vacate (cancel) or correct the judgment is filed.)

When can the judgment debtor make payments?

A plaintiff or defendant who was ordered to pay a small claims judgment (the judgment debtor) can ask the court for permission to make payments. If the court agrees, the party who is owed money (the judgment creditor) cannot take any other steps to collect the money as long as the payments are made on time. If payments are not made on time, the judgment creditor can ask the court to order that the remaining balance of the judgment is due and collectible.

Is interest added after the judgment?

Interest (10 percent per year) is usually added to the unpaid amount of the judgment from the date the judgment is entered until it is paid in full. Interest can only be charged on the unpaid amount of the judgment (the

principal); interest cannot be charged on any unpaid interest. If a partial payment is received, the money is applied first to unpaid interest and then to unpaid principal.

When the court allows payments, the court often does not order any interest, as long as all payments are made in full and on time. Unless the judgment creditor asks for interest to be included in the order allowing payments, the judgment creditor may lose any claims for interest. But if the judgment debtor does not make full payments on time, interest on the missed payment or the entire unpaid balance might become due and collectible.

How do I calculate interest?

If you are asking for interest or disagreeing with a request for interest, you need to explain your interest calculation. Interest, at the rate of 10 percent per year (.0274 percent per day), may be added to the full unpaid balance of the judgment or only to payments that were not made on time. To calculate interest, show the unpaid principal balance, the dates and number of days you want the court to allow interest on that amount, and the total interest for that period. If payments were made, you will need to make separate calculations for the reduced principal balance after each payment.



Need help?

For free help, contact your county's small claims advisor:

Or go to www.courts.ca.gov/smallclaims/advisor.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, address, and State Bar number):
 After recording, return to:
Jane Doe
 123 Main St.
 Los Angeles, CA 90001

TEL NO.: _____ FAX NO. (optional): _____

E-MAIL ADDRESS (Optional): _____

ATTORNEY FOR JUDGMENT CREDITOR ASSIGNEE OF RECORD

SUPERIOR COURT OF CALIFORNIA, COUNTY OF _____

STREET ADDRESS: 111 N. Hill St

MAILING ADDRESS: _____

CITY AND ZIP CODE: Los Angeles, CA 90012

BRANCH NAME: Stanley Mosk

- File with Court
- Get a court stamped copy and take it to County Recorder where the Judgment Debtor's property is located.
- \$40 Filing fee
- Separate County Recorder fee approximately \$107

PLAINTIFF: Jane Doe DEFENDANT: Mike Jones	FOR RECORDER'S USE ONLY CASE NUMBER: 19STSC12345
--	--

ABSTRACT OF JUDGMENT—CIVIL AND SMALL CLAIMS Amended

FOR COURT USE ONLY

1. The judgment creditor assignee of record applies for an abstract of judgment and represents the following:

a. Judgment debtor's Name and last known address

Mike Jones
 456 Central Ave.
 Los Angeles, CA 90001

b. Driver's license no. [last 4 digits] and state: 4576 CA Unknown

c. Social security no. [last 4 digits]: Unknown

d. Summons or notice of entry of sister-state judgment was personally served or mailed to (name and address):

Same as above

2. Information on additional judgment debtors is shown on page 2.

3. Judgment creditor (name and address):
 Jane Doe
 123 Main Street
 Los Angeles, CA 90012

Date: 1/23/2019
 Jane Doe

 (TYPE OR PRINT NAME)

4. Information on additional judgment creditors is shown on page 2.

5. Original abstract recorded in this county:

a. Date:

b. Instrument No.:
 ▶ Jane Doe

 (SIGNATURE OF APPLICANT OR ATTORNEY)

6. Total amount of judgment as entered or last renewed: \$2759.62

7. All judgment creditors and debtors are listed on this abstract.

8. a. Judgment entered on (date): 11/05/2019
 b. Renewal entered on (date): _____

9. This judgment is an installment judgment.

[SEAL]

This abstract issued on (date): _____

10. An execution lien attachment lien is endorsed on the judgment as follows:

a. Amount: \$ _____

b. In favor of (name and address): _____

11. A stay of enforcement has

a. not been ordered by the court.

b. been ordered by the court effective until (date): _____

12. a. I certify that this is a true and correct abstract of the judgment entered in this action.

b. A certified copy of the judgment is attached.

Clerk, by _____, Deputy

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: NAME: Paul Jones FIRM NAME: STREET ADDRESS: 456 Goodland Ave CITY: Los Angeles STATE: CA ZIP CODE: 90012 TELEPHONE NO.: FAX NO.: EMAIL ADDRESS: ATTORNEY FOR (name): <input type="checkbox"/> ATTORNEY FOR <input checked="" type="checkbox"/> ORIGINAL JUDGMENT CREDITOR <input type="checkbox"/> ASSIGNEE OF RECORD	FOR COURT USE ONLY - \$40 filing fee - File 30 days after the final Notice of Entry of Judgment has been filed - Good for 6 months from date filed and issued by court - See the instruction sheet
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 N Hill Street MAILING ADDRESS: Los Angeles, CA 90012 CITY AND ZIP CODE: Stanley Mosk BRANCH NAME:	
PLAINTIFF/PETITIONER: Paul Jones DEFENDANT/RESPONDENT: Susan Smith	CASE NUMBER: 19STSC12345
WRIT OF <input checked="" type="checkbox"/> EXECUTION (Money Judgment) <input type="checkbox"/> POSSESSION OF <input type="checkbox"/> Personal Property <input type="checkbox"/> SALE <input type="checkbox"/> Real Property	<input checked="" type="checkbox"/> Limited Civil Case (including Small Claims) <input type="checkbox"/> Unlimited Civil Case (including Family and Probate)

1. To the Sheriff or Marshal of the County of: **Los Angeles**

You are directed to enforce the judgment described below with daily interest and your costs as provided by law.

2. To any registered process server: You are authorized to serve this writ only in accordance with CCP 699.080 or CCP 715.040.

3. (Name): **Paul Jones**

is the original judgment creditor assignee of record whose address is shown on this form above the court's name.

4. Judgment debtor (name, type of legal entity if not a natural person, and last known address):

Susan Smith
12223 Main Street
Los Angeles, CA 90012

Additional judgment debtors on next page

9. Writ of Possession/Writ of Sale information on next page.

10. This writ is issued on a sister-state judgment.

For items 11–17, see form MC-012 and form MC-013-INFO.

11. Total judgment (as entered or renewed)	\$ 4,085.00
12. Costs after judgment (CCP 685.090)	\$ 389.00
13. Subtotal (add 11 and 12)	\$ 4,474.00
14. Credits to principal (after credit to interest)	\$ 64.58
15. Principal remaining due (subtract 14 from 13)	\$ 4,409.42
16. Accrued interest remaining due per CCP 685.050(b) (not on GC 6103.5 fees)	\$ 00.00
17. Fee for issuance of writ (per GC 70626(a)(l))	\$ 40.00
18. Total amount due (add 15, 16, and 17)	\$ 4,449.42

5. Judgment entered on (date): **12/18/2019**
 (See type of judgment in item 22.)

6. Judgment renewed on (dates):

7. Notice of sale under this writ:

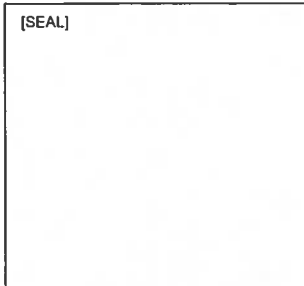
- a. has not been requested.
 b. has been requested (see next page).

8. Joint debtor information on next page.

19. Levying officer:

- a. Add daily interest from date of writ (at the legal rate on 15) (not on GC 6103.5 fees) \$
 b. Pay directly to court costs included in 11 and 17 (GC 6103.5, 68637; CCP 699.520(j)) \$

20. The amounts called for in items 11–19 are different for each debtor. These amounts are stated for each debtor on Attachment 20.



Date: _____ Clerk, by _____, Deputy

NOTICE TO PERSON SERVED: SEE PAGE 3 FOR IMPORTANT INFORMATION.

This Writ is part of LACIV 101 Writ of Execution- Attachment

EJ-130

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: NAME: Paris Park FIRM NAME: STREET ADDRESS: 123 Market St CITY: Anytown STATE: CA ZIP CODE: 90012 TELEPHONE NO.: 555-555-5555 FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name): <input checked="" type="checkbox"/> ORIGINAL JUDGMENT CREDITOR <input type="checkbox"/> ASSIGNEE OF RECORD	FOR COURT USE ONLY -\$40 Filing fee -Used when there are 2 or more defendants owing different amounts on the judgment.
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: 111 N. Hill Street MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Stanley Mosk	
Plaintiff: Paris Parker Defendant: Dale Dallas, Danka Divs	CASE NUMBER: 19STSC12345
WRIT OF <input checked="" type="checkbox"/> EXECUTION (Money Judgment) <input type="checkbox"/> POSSESSION OF <input type="checkbox"/> Personal Property <input type="checkbox"/> SALE <input type="checkbox"/> Real Property	<input checked="" type="checkbox"/> Limited Civil Case (including Small Claims) <input type="checkbox"/> Unlimited Civil Case (including Family and Probate)

1. To the Sheriff or Marshal of the County of: Los Angeles
 You are directed to enforce the judgment described below with daily interest and your costs as provided by law.
 2. To any registered process server: You are authorized to serve this writ only in accordance with CCP 699.080 or CCP 715.040.
 3. (Name): Paris Parker
 is the original judgment creditor assignee of record whose address is shown on this form above the court's name.
 4. Judgment debtor (name, type of legal entity if not a natural person, and last known address):
 Dale Dallas
 456 Hope St.
 Los Angeles, CA 90012
 5. Judgment entered on (date): 03/03/2019
 6. Judgment renewed on (dates):
 7. Notice of sale under this writ
 a. has not been requested.
 b. has been requested (see next page).
 8. Joint debtor information on next page.
 9. See next page for information on real or personal property to be delivered under a writ of possession or sold under a writ of sale.
 10. This writ is issued on a sister-state judgment.
- For Items 11–17, see form MC-012 and form MC-013-INFO**
- | | |
|---|---------------------|
| 11. Total judgment (as entered or renewed) | \$Tip: Answer |
| 12. Costs after judgment (CCP 685.090) | \$Questions 11 - 18 |
| 13. Subtotal (add 11 and 12) | \$on Attachment 20 |
| 14. Credits to principal (after credit to interest) | \$ |
| 15. Principal remaining due (subtract 14 from 13) | \$ |
| 16. Accrued interest remaining due per CCP 685.050(b) (not on GC 6103.5 fees) | \$ |
| 17. Fee for issuance of writ | \$ |
| 18. Total (add 15, 16, and 17) | \$ |
19. Levying officer:
 a. Add daily interest from date of writ (at the legal rate on 15) (not on GC 6103.5 fees) \$
 b. Pay directly to court costs included in 11 and 17 (GC 6103.5, 68637; CCP 699.520(i)) \$
20. The amounts called for in items 11–19 are different for each debtor. These amounts are stated for each debtor on Attachment 20.

(SEAL)

Issued on (date): 05/02/2019 Clerk, by _____, Deputy

NOTICE TO PERSON SERVED: SEE PAGE 3 FOR IMPORTANT INFORMATION.

Plaintiff: Paris Parker Defendant: Dale Dallas, Danka Divs	CASE NUMBER: 19STSC12345
---	-----------------------------

21. Additional judgment debtor (name, type of legal entity if not a natural person, and last known address):

Danaka Diva
456 Hope St.
Los Angeles, CA 90012

22. Notice of sale has been requested by (name and address):

23. Joint debtor was declared bound by the judgment (CCP 989-994)

a. on (date):
b. name, type of legal entity if not a natural person, and last known address of joint debtor:

a. on (date):
b. name, type of legal entity if not a natural person, and last known address of joint debtor:

c. Additional costs against certain joint debtors are itemized: Below On Attachment 23c

24. (Writ of Possession or Writ of Sale) Judgment was entered for the following:

a. Possession of real property: The complaint was filed on (date):
(Check (1) or (2). Check (3) if applicable. Complete (4) if (2) or (3) have been checked.)

- (1) The Prejudgment Claim of Right to Possession was served in compliance with CCP 415.46. The judgment includes all tenants, subtenants, named claimants, and other occupants of the premises.
- (2) The Prejudgment Claim of Right to Possession was NOT served in compliance with CCP 415.46.
- (3) The unlawful detainer resulted from a foreclosure sale of a rental housing unit. (An occupant not named in the judgment may file a Claim of Right to Possession at any time up to and including the time the levying officer returns to effect eviction, regardless of whether a Prejudgment Claim of Right to Possession was served.) (See CCP 415.46 and 1174.3(a)(2).)
- (4) If the unlawful detainer resulted from a foreclosure (item 24a(3)), or if the Prejudgment Claim of Right to Possession was not served in compliance with CCP 415.46 (item 24a(2)), answer the following:
 - (a) The daily rental value on the date the complaint was filed was \$
 - (b) The court will hear objections to enforcement of the judgment under CCP 1174.3 on the following dates (specify):

- b. Possession of personal property.
 If delivery cannot be had, then for the value (itemize in 24e) specified in the judgment or supplemental order.
- c. Sale of personal property.
- d. Sale of real property.
- e. The property is described: Below On Attachment 24e

NAME, ADDRESS, AND TELEPHONE NUMBER OF ATTORNEY OR PARTY WITHOUT ATTORNEY: Paris Parker 123 Market St Anytown, CA 90012		STATE BAR NUMBER	<i>Reserved for Clerk's File Stamp</i>	
ATTORNEY FOR (Name): SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES			-Attach to Writ of Execution	
COURTHOUSE ADDRESS: 111 N. Hill St. Room 113 Los Angeles, CA 90012				
PLAINTIFF: Paris Parker				
DEFENDANT: Dale Dallas, Danaka Diva				
WRIT OF EXECUTION – ATTACHMENT 20			CASE NUMBER: 19STSC12345	
Line Number/Item		Debtor #1	Debtor #2	
11.	Total Judgment	\$ 5,000.00	\$ 2,000.00	
12.	Costs after judgment (per filed order or memo pursuant to Code of Civil Procedure section 685.090)	\$ 95.00	\$	
13.	Subtotal (add 11 and 12)	\$ 5,095.00	\$ 2,000.00	
14.	Credits	\$ 0	\$ 0	
15.	Subtotal (subtract 14 from 13)	\$ 5,095.00	\$ 2,000	
16.	Interest after judgment (per filed affidavit pursuant to Code of Civil Procedure section 685.050)	\$ 82.19	\$ 32.87	
17.	Fee for issuance of writ	\$ 20.00	\$ 20.00	
18.	TOTAL (add 15, 16, and 17)	\$ 5,197.19	\$ 2,052.87	
19.	Levying officer: (a) Add daily interest from date of writ (at the legal rate on line 15)	\$	\$	
	(b) Pay directly to court costs included in lines 11 and 17 (Gov. Code, §§ 6103.5, 68511.3; Code Civ. Proc., § 699.520, subd. (i))	\$	\$	

Writ issued on: 05/02/2019
Dated

SHERRI R. CARTER, Executive Officer/Clerk

By _____
Deputy Clerk

WRIT OF EXECUTION-ATTACHMENT 20

NAME, ADDRESS, AND TELEPHONE NUMBER OF ATTORNEY OR PARTY WITHOUT ATTORNEY Jane Doe 12345 South St. Los Angeles, CA 90012	STATE BAR NUMBER	<i>Reserved for Clerk's File Stamp</i> -File with court, court will issue a replacement Writ
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES		
COURTHOUSE ADDRESS: 111 N. Hill St. Rm 113, Los Angeles CA 90012		
PLAINTIFF: Jane Doe		
DEFENDANT: Sam Smith		CASE NUMBER 19STSC01234
APPLICATION AND ORDER REGARDING LOST WRIT		

APPLICATION AND DECLARATION

1. I, the judgment creditor judgment creditor's attorney, apply for an order for issuance of a new writ.
2. On (date) 12/16/2019, a writ of execution for the County of Los Angeles was issued by the clerk, less than six months ago. (If writ was issued more than six months ago, request a new writ. Code Civ. Proc., § 712.010.)
3. The writ was delivered to the:
 - sheriff
 - other levying officer: _____
 - The writ was not delivered to any levying officer.
4. I have conducted a search for the writ as follows:
 - I have searched my files and elsewhere in my office.
 - I have asked the sheriff, or other levying officer to search for the writ.
 - I have asked my attorney service to search for the writ.
5. The writ has not been located.
6. I request that a replacement writ be issued.

<i>I declare under penalty of perjury, under the laws of the State of California, that the foregoing is true and correct.</i>		
DATED	TYPE OR PRINT DECLARANT'S NAME	SIGNATURE OF DECLARANT
1/20/2020	Jane Doe	<i>Jane Doe</i>

ORDER

1. The court finds that the writ identified above is lost.
2. THE COURT ORDERS:
The clerk may issue a new writ for the county named above.

Dated: _____

JUDICIAL OFFICER

NAME, ADDRESS, AND TELEPHONE NUMBER OF ATTORNEY OR PARTY WITHOUT ATTORNEY Jane Doe 12345 South St. Los Angeles, CA 90012	STATE BAR NUMBER	Reserved for Clerk's File Stamp -File with court, court will issue a replacement Writ
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES		
COURTHOUSE ADDRESS: 111 N. Hill St. Rm 113, Los Angeles CA 90012		
PLAINTIFF: Jane Doe		
DEFENDANT: Sam Smith		
APPLICATION AND ORDER REGARDING LOST WRIT		CASE NUMBER 19STSC01234

APPLICATION AND DECLARATION

- I, the judgment creditor judgment creditor's attorney, apply for an order for issuance of a new writ.
- On (date) 12/16/2019, a writ of execution for the County of Los Angeles was issued by the clerk, less than six months ago. (If writ was issued more than six months ago, request a new writ. Code Civ. Proc., § 712.010.)
- The writ was delivered to the:
 - sheriff
 - other levying officer: _____
 - The writ was not delivered to any levying officer.
- I have conducted a search for the writ as follows:
 - I have searched my files and elsewhere in my office.
 - I have asked the sheriff, or other levying officer to search for the writ.
 - I have asked my attorney service to search for the writ.
- The writ has not been located.
- I request that a replacement writ be issued.

<i>I declare under penalty of perjury, under the laws of the State of California, that the foregoing is true and correct.</i>		
DATED 1/20/2020	TYPE OR PRINT DECLARANT'S NAME Jane Doe	SIGNATURE OF DECLARANT <i>Jane Doe</i>

ORDER

- The court finds that the writ identified above is lost.
- THE COURT ORDERS:
The clerk may issue a new writ for the county named above.

Dated: _____

JUDICIAL OFFICER

ATTORNEY OR PARTY WITHOUT ATTORNEY NAME: Paul Jones FIRM NAME: STREET ADDRESS: 456 Goodland Ave CITY: Los Angeles TELEPHONE NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):		STATE BAR NUMBER: STATE: CA ZIP CODE: 90012 FAX NO.:	FOR COURT USE ONLY - See instruction sheet - DMV Fees CCP 116.820 #1a (8) -If claiming anything other than interest, have copy mailed to the other party by a third party, complete second page, and file with court.
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: 111 N. Hill Street MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME:			
PLAINTIFF: Paul Jones DEFENDANT: Susan Smith			
MEMORANDUM OF COSTS AFTER JUDGMENT, ACKNOWLEDGMENT OF CREDIT, AND DECLARATION OF ACCRUED INTEREST		CASE NUMBER: 19STSC12345	

1. **Postjudgment costs**

a. I claim the following costs after judgment incurred within the last two years (indicate if there are multiple items in any category):

	Dates Incurred	Amount
(1) Preparing and issuing abstract of judgment	02/07/2019	\$ 40.00
(2) Recording and indexing abstract of judgment	02/08/2019	\$ 104.00
(3) Filing notice of judgment lien on personal property		\$
(4) Issuing writ of execution, to extent not satisfied by Code Civ. Proc., § 685.050 (specify county):		\$
(5) Levying officers fees, to extent not satisfied by Code Civ. Proc., § 685.050 or wage garnishment	01/22/2019	\$ 60.00
(6) Approved fee on application for order for appearance of judgment debtor, or other approved costs under Code Civ. Proc., § 708.110 et seq.	01/23/2019	\$ 80.00
(7) Attorney fees, if allowed by Code Civ. Proc., § 685.040		\$
(8) Other: Bench Warrant (Statute authorizing cost): CCP 685.080	03/05/2019	\$ 120.00
(9) Total of claimed costs for current memorandum of costs (add items (1)-(8))		\$ 404.00
b. All previously allowed postjudgment costs		\$ 0.00
c. Total of all postjudgment costs (add items a and b)		\$ 404.00

2. **Credits to interest and principal**

a. I acknowledge total payments to date in the amount of: \$200.00 (including returns on levy process and direct payments). The payments received are applied first to the amount of accrued interest, and then to the judgment principal (including postjudgment costs allowed) as follows: credit to accrued interest: \$135.42; credit to judgment principal \$64.58

b. **Principal remaining due:** The amount of judgment principal remaining due is \$4,020.42. (See Code Civ. Proc., § 680.300)

3. **Accrued interest remaining due:** I declare interest accruing (at the legal rate) from the date of entry or renewal and on balances from the date of any partial satisfactions (or other credits reducing the principal) remaining due in the amount of \$0.00

4. I am the: judgment creditor agent for the judgment creditor attorney for the judgment creditor.
 I have knowledge of the facts concerning the costs claimed above. To the best of my knowledge and belief, the costs claimed are correct, reasonable, and necessary, and have not been satisfied.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
 Date: 04/18/2019

Paul Jones (TYPE OR PRINT NAME) ▶ Paul Jones (SIGNATURE OF DECLARANT)

NOTICE TO THE JUDGMENT DEBTOR

If this memorandum of costs is filed at the same time as an application for a writ of execution, any statutory costs, not exceeding \$100 in aggregate and not already allowed by the court, may be included in the writ of execution. The fees sought under this memorandum may be disallowed by the court upon a motion to tax filed by the debtor, notwithstanding the fees having been included in the writ of execution. (Code Civ. Proc., § 685.070(e).) A motion to tax costs claimed in this memorandum must be filed within 10 days after service of the memorandum. (Code Civ. Proc., § 685.070(c).)

Page 1 of 2

Short Title: Jones V Smith

CASE NUMBER:
19STSC12345

PROOF OF SERVICE

 Mail Personal Service

1. At the time of service I was at least 18 years of age and not a party to this legal action.
2. My residence or business address is:
5974 Regent Street, Los Angeles, CA 90027
3. I mailed or personally delivered a copy of the *Memorandum of Costs After Judgment, Acknowledgment of Credit, and Declaration of Accrued Interest* as follows (complete either a or b):
 - a. **Mail.** I am a resident of or employed in the county where the mail occurred.
 - (1) I enclosed a copy in an envelope AND
 - (a) **deposited** the sealed envelope with the United States Postal Service with the postage fully prepaid.
 - (b) **placed** the envelope for collection and mailing on the date and at the place shown in items below 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.
 - (2) The envelope was addressed and mailed as follows:
 - (a) Name of person served: Susan Smith
 - (b) Address on envelope: 1223 Main Street, Los Angeles, CA 90012
 - (c) Date of mailing: 04/18/2019
 - (d) Place of mailing (*city and state*): Los Angeles, CA
 - b. **Personal delivery.** I personally delivered a copy as follows.
 - (1) Name of person served:
 - (2) Address where delivered:
 - (3) Date delivered:
 - (4) Time delivered:

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

Date: 04/18/2019

Jessica Johnson
(TYPE OR PRINT NAME)

▶ Jessica Johnson
(SIGNATURE OF DECLARANT)

How to Complete the Memorandum of Costs After Judgment (MC-012)

For Adding Costs to Small Claims Judgments in Los Angeles County

The MC 012 is used to keep a running total of all costs, credits/payments, and interest accrued after the final Entry of Judgment

Number 1

- a) I claim the following costs after Judgment incurred within the last two years.
 - 1) Complete if you filed an *Abstract of Judgment* (Form EJ-001). The current fee is \$40.00
 - 2) Complete if you recorded an *Abstract of Judgment* with the County Registrar Recorder's Office. Currently the estimate of the fee \$106 (fee may differ is additional defendants are added).
 - 3) Complete if you have filed a *Notice of Judgment Lien*. This form is used to place a lien on a business, so they would not be able to sell inventory. This is not a Small Claims form, this form is filed and registered with the California Secretary of State, not the court. The filing fee is \$10.00
 - 4) Complete if you filed a *Writ of Execution* (Form EJ-130), but only when the collection method (i.e. bank levy, wage garnishment, etc.) was unsuccessful. **NOTE: Add the cost only after the *Writ of Execution* has expired, which is 180 days after it was issued.** Currently the fee is \$40.00.
 - 5) Complete if you paid a levying officer (Sheriff) to execute a *Writ of Execution* and it was unsuccessful. The costs can be added only when the Writ expires.
 - 6) Complete if you filed an *Application and Order to Produce Statement of Assets and to Appear for Examination* (Form SC-134). Currently the fee is \$60.00. Additionally, this section is used to include the Sheriff's fee to serve either the SC-134 or *Small Claims Subpoena* (Form SC-107) used to request specific information for the hearing. Sherriff's fee is currently \$40.00 for each document served.
 - 7) Attorney fees may cannot be claimed for Small Claims judgments. Upon request, reimbursement of attorney's fees may be awarded at the appeal hearing by the judge up to \$150.00 (CCP 116.780(c))
 - 8) Complete if you have incurred other miscellaneous fees to collect your judgment. Examples are fees to issue a bench warrant or fees to suspend a driver's license. Specify the statute that authorizes the addition of these expenses. You can find the statute that authorizes the addition of these expenses. You can find the statutes in the **California Code of the Civil Procedure**.
- 9) Input the sum total 1 through 8
- b) Complete if a *Memorandum of Costs After Judgment* has been previously filed. If this is the first time filing a *Memorandum of Costs After Judgment*, then the amount listed is \$0.
- c) This is the sum of Sections A and B

Number 2

- Complete if the judgment debtor has made any payments to satisfy the judgment. If payments have been made, also complete the *Acknowledgment of Satisfaction of Judgment* (Form EJ-130) to indicate a partial satisfaction of the judgment.
- a) Acknowledge total credits received, apply credit towards accrued interest and then credit the remaining amount to judgment principal.
- b) Apply the principle remaining due plus post judgment costs (costs on 1c).

How to Complete the Memorandum of Costs After Judgment (MC-012)

For Adding Costs to Small Claims Judgments in Los Angeles County

Number 3

- Complete if the creditor wants to claim interest or remaining interest after applied credits. Interest is calculated at 10 percent per year and compounded (the exception being if the debtor is a Government entity then the rate is 7 percent). The calculation of interest begins from the date of the final Entry of Judgment through the date the MC 012 is filed. Interest can be collected on the unpaid portion of the judgment and on unpaid costs that have been previously claimed on a *Memorandum of Costs After Judgment*. (CCP 685.090). **Note:** If the court has made an installment payment order for the judgment debtor, the creditor cannot claim interest while the order is in effect. When the court makes an installment payment order, legal rate of interest is stayed as long as the judgment debtor makes timely payments (CCP 685.020).

Number 4

- Check appropriate box. Judgment Creditor is almost always checked.

***If you are only claiming interest, then you are not required to serve the *Memorandum of Costs After Judgment* on the Judgment Debtor.**

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Penny Anderson 465 Park Street Los Angeles, CA 90002 TELEPHONE NO.: 213-550-0000 FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (Name):		LEVYING OFFICER (Name and Address): -File with Sheriff (\$40) -Form is available at the Sheriff's Office
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 N. Hill Street MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Stanley Mosk		
PLAINTIFF/PETITIONER: Penny Anderson DEFENDANT/RESPONDENT: Michael Bray		COURT CASE NUMBER: 19STSC12345
APPLICATION FOR EARNINGS WITHHOLDING ORDER (Wage Garnishment)		LEVYING OFFICER FILE NUMBER:

TO THE SHERIFF OR ANY MARSHAL OR CONSTABLE OF THE COUNTY OF: **Los Angeles**
 OR ANY REGISTERED PROCESS SERVER

1. The judgment creditor (name): **Penny Anderson** requests
 issuance of an Earnings Withholding Order directing the employer to withhold the earnings of the judgment debtor (employee).
 Name and address of employer Name and address of employee

Happy Hour Restaurant 77 Noble Avenue Los Angeles, CA 90011		Michael Bray 678 Central Avenue Los Angeles, CA 90001	

2. The amounts withheld are to be paid to Social Security no. on form WG-035 unknown
 a. The attorney (or party without an attorney) named at the top of this page. b. Other (name, address, and telephone):

3. a. Judgment was entered on (date): 06/28/2012
 b. Collect the amount directed by the Writ of Execution unless a lesser amount is specified here: \$ _____

4. Check any that apply:
 a. The Writ of Execution was issued to collect delinquent amounts payable for the support of a child, former spouse, or spouse of the employee.
 b. The Writ of Execution was issued to collect a judgment based entirely on a claim for elder or dependent adult financial abuse.
 c. The Writ of Execution was issued to collect a judgment based in part on a claim for elder or dependent adult financial abuse. The amount that arises from the claim for elder or dependent adult financial abuse is (state amount): \$ _____

5. Special instructions (specify):

6. Check a or b:
 a. I have not previously obtained an order directing this employer to withhold the earnings of this employee.
 -OR-
 b. I have previously obtained such an order, but that order (check one):
 was terminated by a court order, but I am entitled to apply for another Earnings Withholding Order under the provisions of Code of Civil Procedure section 706.105(h).
 was ineffective.

Penny Anderson
 (TYPE OR PRINT NAME)

Penny Anderson
 (SIGNATURE OF ATTORNEY OR PARTY WITHOUT ATTORNEY)

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

Date: 10/17/2019

Penny Anderson
 (TYPE OR PRINT NAME)

Penny Anderson
 (SIGNATURE OF DECLARANT)

**[NOT FOR WAGE GARNISHMENT]
RETURN TO LEVYING OFFICER. DO NOT FILE WITH COURT**

EJ-160

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Steven Jones 654 Central Avenue Los Angeles, CA 90002 TELEPHONE NO.: 213-888-8888 FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):	FOR LEVYING OFFICER USE ONLY (Levying Officer Name and Address) -Form is used for Levy, Keeper, Rent Levy, etc -File with Sheriff along with EJ-165 (1 original, 1 copy) -Have 10 days to file from the date the money was taken out LEVYING OFFICER FILE NUMBER: FOR COURT USE ONLY CASE NUMBER: <p align="center" style="font-size: 1.2em;">19STSC12345</p>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: 111 N. Hill Avenue MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, CA BRANCH NAME: Stanley Mosk	
PLAINTIFF/PETITIONER: Jane Wright DEFENDANT/RESPONDENT: Steven Jones	
CLAIM OF EXEMPTION (Enforcement of Judgment)	

Copy all the information required above (except the top left space) from the Notice of Levy. The top left space is for your name or your attorney's name and address. The original and one copy of this form must be filed with the levying officer. DO NOT FILE WITH THE COURT.

1. My name is: Steven Jones
2. Papers should be sent to:
 - me.
 - my attorney (I have filed with the court and served on the judgment creditor a request that papers be sent to my attorney and my attorney has consented in writing on the request to receive these papers.)
at the address shown above following (specify):
3. I am not the judgment debtor named in the notice of levy. The name and last known address of the judgment debtor is (specify):
4. The property I claim to be exempt is (describe):
Bank account.
5. The property is claimed to be exempt under the following code and section (specify):
CCP 704.080
6. The facts which support this claim are (describe):
7. The claim is made pursuant to a provision exempting property to the extent necessary for the support of the judgment debtor and the spouse and dependents of the judgment debtor. A **Financial Statement form is attached to this claim.**
8. The property claimed to be exempt is
 - a. a motor vehicle, the proceeds of an execution sale of a motor vehicle, or the proceeds of insurance or other indemnification for the loss, damage, or destruction of a motor vehicle.
 - b. tools, implements, materials, uniforms, furnishings, books, equipment, a commercial motor vehicle, a vessel, or other personal property used in the trade, business or profession of the judgment debtor or spouse.
 - c. all other property of the same type owned by the judgment debtor, either alone or in combination with others, is (describe):
9. The property claimed to be exempt consists of the loan value of unexpired life insurance policies (including endowment and annuity policies) or benefits from matured life insurance policies (including endowment and annuity policies). All other property of the same type owned by the judgment debtor or the spouse of the judgment debtor, either alone or in combination with others, is (describe):

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

Date: 06/03/2019

Steven Jones

 (TYPE OR PRINT NAME)



 (SIGNATURE OF DECLARANT)

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Michael Bray 456 Central Avenue Los Angeles, CA 90001 TELEPHONE NO.: 213-555-5555 FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):	FOR LEVYING OFFICER USE ONLY (Levying Officer Name and Address) File with Sheriff: - Original WG-006 plus 1 copy and - Original EJ-165 plus 1 copy
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: 111 N. Hill Street MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME:	LEVYING OFFICER FILE NUMBER:
PLAINTIFF/PETITIONER: Penny Smith DEFENDANT/RESPONDENT: Michael Bray	FOR COURT USE ONLY
CLAIM OF EXEMPTION (Wage Garnishment)	
<p style="text-align: center;">READ EMPLOYEE INSTRUCTIONS (FORM WG-003) BEFORE COMPLETING THIS FORM</p> <p><i>Copy all the information required above (except the top left space) from the Earnings Withholding Order. The top left space is for your name or your attorney's name and address. The original and one copy of this form with the Financial Statement attached must be filed with the levying officer.</i></p> <p style="text-align: center;">DO NOT FILE WITH THE COURT.</p>	
	CASE NUMBER: <p style="text-align: center;">19STSC12345</p>

1. My name is : Michael Bray
2. I need the following earnings to support myself or my family (check a or b):
 - a. All earnings.
 - b. \$ each pay period.
3. Please send all papers to
 - me.
 - my attorney
 at the address shown above following (specify):
4. I am willing for the following amount to be withheld from my earnings each pay period during the withholding period. I understand that the judgment creditor can accept this offer by not opposing the Claim of Exemption, which will result in the following sum being withheld each pay period (check a or b):
 - a. None
 - b. Withhold \$ each pay period.
5. I am paid

<input type="checkbox"/> daily	<input type="checkbox"/> every two weeks	<input type="checkbox"/> monthly
<input type="checkbox"/> weekly	<input checked="" type="checkbox"/> twice a month	<input type="checkbox"/> other (specify):

NOTE: You must attach a properly completed Financial Statement form to this Claim of Exemption.
 The Financial Statement form is available without charge from the levying officer.

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

Date: 7/14/2019

Michael Bray
 (TYPE OR PRINT NAME)

▶ Michael Bray
 (SIGNATURE OF DECLARANT)

EXEMPTIONS FROM THE ENFORCEMENT OF JUDGMENTS

The following is a list of assets that may be exempt from levy in enforcing a judgment.

Exemptions are found in the United States Code (USC) and in the California codes, primarily the Code of Civil Procedure (CCP).

Because of periodic changes in the law, the list may not include all exemptions that apply in your case. The exemptions may not apply in full or under all circumstances. Some are not available after a certain period of time. You or your attorney should read the statutes.

If you believe the assets that are being levied on are exempt, file the claim of exemption form that you received from the levying officer.

AMOUNT OF EXEMPTIONS: For the exemption amount, please refer to the code section listed below for each type of property. The current amounts of certain exemptions are listed in *Current Dollar Amounts of Exemptions From Enforcement of Judgments* (form EJ-156). The amounts of some of the exemptions are amended every three years and become effective immediately on April 1 under the provisions of Code of Civil Procedure section 703.150.

<u>Type of Property</u>	<u>Code and Section</u>	<u>Type of Property</u>	<u>Code and Section</u>
ABLE Accounts	Welf & I C § 4880(c)	Benefit Payments (cont.)	
Accounts (See Deposit Accounts)		Relocation Benefits	CCP § 704.180
Appliances	CCP § 704.020	Retirement Benefits and Contributions:	
Art and Heirlooms	CCP § 704.040	Private	CCP § 704.115
Automobiles	CCP § 704.010	Public	CCP § 704.110
BART District Benefits	CCP § 704.110 Pub Util C § 28896	Segregated Benefit Funds	Ins C § 10498.5
Benefit Payments:		Social Security Benefits	42 USC § 407
BART District Benefits	CCP § 704.110 Pub Util C § 28896	Strike Benefits	CCP § 704.120
Charity	CCP § 704.170	Transit District Retirement Benefits (Alameda and Contra Costa Counties)	CCP § 704.110 Pub Util C § 25337
Civil Service Retirement Benefits (Federal)	5 USC § 8346	Unemployment Benefits and Contributions	CCP § 704.120
County Employees Retirement Benefits	CCP § 704.110 Govt C § 31452	Veterans Benefits	38 USC § 3101
Disability Insurance Benefits	CCP § 704.130	Veterans Medal of Honor Benefits	38 USC § 562
Fire Service Retirement Benefits	CCP § 704.110 Govt C § 32210	Welfare Payments	CCP § 704.170 Welf & I C § 17409
Fraternal Organization Funds Benefits	CCP § 704.130 CCP § 704.170	Workers Compensation	CCP § 704.160
Health Insurance Benefits	CCP § 704.130	Boats	CCP § 704.080 CCP § 704.710
Irrigation System Retirement Benefits	CCP § 704.110	Books	CCP § 704.060
Judges Survivors Benefits (Federal)	28 USC § 376(n)	Building Materials (Residential)	CCP § 704.030
Legislators Retirement Benefits	CCP § 704.110 Govt C § 9359.3	Business:	
Life Insurance Benefits:		Licenses	CCP § 695.060 CCP § 699.720(a)(1) CCP § 704.060
Group	CCP § 704.100	Tools of Trade	
Individual	CCP § 704.100	Cars and Trucks (including proceeds)	CCP § 704.010
Lighthouse Keepers Widows Benefits	33 USC § 775	Cash	CCP § 704.070
Longshore & Harbor Workers Compensation or Benefits	33 USC § 916	Cemeteries:	
Military Benefits:		Land Proceeds	Health & SC § 7925
Retirement	10 USC § 1440	Plots	CCP § 704.200
Survivors	10 USC § 1450	Charity	CCP § 704.170
Municipal Utility District Retirement Benefits	CCP § 704.110 Pub Util C § 12337	Claims, Actions and Awards:	
Peace Officers Retirement Benefits	CCP § 704.110 Govt C § 31913	Personal Injury	CCP § 704.140
Pension Plans (and Death Benefits):		Worker's Compensation	CCP § 704.160
Private	CCP § 704.115	Wrongful Death	CCP § 704.150
Public	CCP § 704.110	Clothing	CCP § 704.020
Public Assistance	CCP § 704.170 Welf & I C § 17409	Condemnation Proceeds	CCP § 704.720(b)
		County Employees Retirement Benefits	CCP § 704.110 Govt C § 31452
		Damages (See Personal Injury and Wrongful Death)	
		Deposit Accounts:	
		Escrow or Trust Funds	Fin C § 17410
		Social Security Direct Deposits	CCP § 704.080

EXEMPTIONS FROM THE ENFORCEMENT OF JUDGMENTS

(Continued)

<u>Type of Property</u>	<u>Code and Section</u>	<u>Type of Property</u>	<u>Code and Section</u>
Direct Deposit Account:		Municipal Utility District	
Social Security	CCP § 704.080	Retirement Benefits	CCP § 704.110
Disability Insurance Benefits	CCP § 704.130	Peace Officers Retirement	Pub Util C § 12337
Dwelling House	CCP § 704.740	Benefits	CCP § 704.110
Earnings	CCP § 704.070	Pension Plans:	Govt C § 31913
	CCP § 706.050	Private	CCP § 704.115
Educational Grant	15 USC § 1673(a)	Public	CCP § 704.110
	Ed C § 21116	Personal Effects	CCP § 704.020
Employment Bonds	Lab C § 404	Personal Injury Actions	
Financial Assistance:		or Damages	CCP § 704.140
Charity	CCP § 704.170	Prisoner's Funds	CCP § 704.090
Public Assistance	CCP § 704.170	Property Not Subject to	
	Welf & I C § 17409	Enforcement of Money	
Student Aid	CCP § 704.190	Judgments	CCP § 704.210
Welfare (See Public Assistance)		Prosthetic and Orthopedic	
Fire Service Retirement	CCP § 704.110	Devices	CCP § 704.050
	Govt C § 32210	Provisions (for Residence)	CCP § 704.020
Fraternal Organizations		Public Assistance	CCP § 704.170
Funds and Benefits	CCP § 704.130	Public Employees:	Welf & I C § 17409
	CCP § 704.170	Death Benefits	CCP § 704.110
Fuel for Residence	CCP § 704.020	Pension	CCP § 704.110
Furniture	CCP § 704.020	Retirement Benefits	CCP § 704.110
General Assignment for		Vacation Credits	CCP § 704.113
Benefit of Creditors	CCP § 1801	Railroad Retirement Benefits	45 USC § 2281
Health Aids	CCP § 704.050	Railroad Unemployment	
Health Insurance Benefits	CCP § 704.130	Insurance	45 USC § 352(e)
Home:		Relocation Benefits	CCP § 704.180
Building Materials	CCP § 704.030	Retirement Benefits and	
Dwelling House	CCP § 704.740	Contributions:	
Homestead	CCP § 704.720	Private	CCP § 704.115
	CCP § 704.730	Public	CCP § 704.110
Housetrailer	CCP § 704.710		Ins C § 10498.5
Mobilehome	CCP § 704.710	Segregated Benefit Funds	Ins C § 10498.6
Homestead	CCP § 704.720	Servicemembers Property	50 USC § 523(b)
	CCP § 704.730	Social Security	42 USC § 407
Household Furnishings	CCP § 704.020	Social Security Direct Deposit	
Insurance:		Account	CCP § 704.080
Disability Insurance	CCP § 704.130	Strike Benefits	CCP § 704.120
Fraternal Benefit Society	CCP § 704.110	Student Aid	CCP § 704.190
Group Life	CCP § 704.100	Tools of Trade	CCP § 704.060
Health Insurance Benefits	CCP § 704.130	Transit District Retirement	
Individual	CCP § 704.100	Benefits (Alameda and Contra	
Insurance Proceeds—		Costa Counties)	CCP § 704.110
Motor Vehicle	CCP § 704.010	Travelers Check Sales Proceeds	Pub Util C § 25337
Irrigation System	CCP § 704.040	Unemployment Benefits and	
Retirement Benefits	CCP § 704.110	Contributions	CCP § 704.120
Jewelry		Uniforms	CCP § 704.060
Judges Survivors Benefits		Vacation Credits (Public	
(Federal)	28 USC § 376(n)	Employees)	CCP § 704.113
Legislators Retirement		Veterans Benefits	38 USC § 3101
Benefits	CCP § 704.110	Veterans Medal of Honor	
	Govt C § 9359.3	Benefits	38 USC § 562
Licenses	CCP § 695.060	Wages	CCP § 704.070
	CCP § 720(a)(1)		CCP § 706.050
Lighthouse Keepers Widows			CCP § 706.051
Benefits	33 USC § 775	Welfare Payments	CCP § 704.170
Longshore and Harbor Workers			Welf & I C § 17409
Compensation or Benefits	33 USC § 916	Workers Compensation	
Military Benefits:		Claims or Awards	CCP § 704.160
Retirement	10 USC § 1440	Wrongful Death Actions or	
Survivors	10 USC § 1450	Damages	CCP § 704.150
Military Personnel—Property			
Motor Vehicle (Including			
Proceeds)	CCP § 704.010		
	CCP § 704.060		

CURRENT DOLLAR AMOUNTS OF EXEMPTIONS FROM ENFORCEMENT OF JUDGMENTS
Code of Civil Procedure sections 703.140(b) and 704.010 et seq.

EXEMPTIONS UNDER SECTION 703.140(b)

The following lists the current dollar amounts of exemptions from enforcement of judgment under Code of Civil Procedure section 703.140(b) used in a case under title 11 of the United States Code (bankruptcy).

These amounts are effective April 1, 2019. Unless otherwise provided by statute after that date, they will be adjusted at each three-year interval, ending on March 31. The amount of the adjustment to the prior amounts is based on the change in the annual California Consumer Price Index for All Urban Consumers for the most recent three-year period ending on the preceding December 31, with each adjusted amount rounded to the nearest \$25. (See Code Civ. Proc., § 703.150(d).)

<u>Code Civ. Proc., § 703.140(b)</u>	<u>Type of Property</u>	<u>Amount of Exemption</u>
(1)	The debtor's aggregate interest in real property or personal property that the debtor or a dependent of the debtor uses as a residence, or in a cooperative that owns property that the debtor or a dependent of the debtor uses as a residence,	\$ 29,275
(2)	The debtor's interest in one or more motor vehicles	\$ 5,850
(3)	The debtor's interest in household furnishings, household goods, wearing apparel, appliances, books, animals, crops, or musical instruments, that are held primarily for the personal, family, or household use of the debtor or a dependent of the debtor (value is of any particular item)	\$ 725
(4)	The debtor's aggregate interest in jewelry held primarily for the personal, family, or household use of the debtor or a dependent of the debtor	\$ 1,750
(5)	The debtor's aggregate interest, plus any unused amount of the exemption provided under paragraph (1), in any property	\$ 1,550
(6)	The debtor's aggregate interest in any implements, professional books, or tools of the trade of the debtor or the trade of a dependent of the debtor	\$ 8,725
(8)	The debtor's aggregate interest in any accrued dividend or interest under, or loan value of, any unmaturing life insurance contract owned by the debtor under which the insured is the debtor or an individual of whom the debtor is a dependent	\$ 15,650
(11)(D)	The debtor's right to receive, or property traceable to, a payment on account of personal bodily injury of the debtor or an individual of whom the debtor is a dependent	\$ 29,275

CURRENT DOLLAR AMOUNTS OF EXEMPTIONS FROM ENFORCEMENT OF JUDGMENTS
Code of Civil Procedure sections 703.140(b) and 704.010 et seq.
EXEMPTIONS UNDER SECTION 704.010 et seq.

The following lists the current dollar amounts of exemptions from enforcement of judgment under title 9, division 2, chapter 4, article 3 (commencing with section 704.010) of the Code of Civil Procedure.

The amount of the automatic exemption for a deposit account under section 704.220(a) is effective July 1, 2021, and unless otherwise provided by statute after that date, will be adjusted annually effective July 1 by the Department of Social Services under Welf. & Inst. Code, § 11453 to reflect the minimum basic standard of care for a family of four as established by § 11452.*

The other amounts are all effective April 1, 2019. Unless otherwise provided by statute after that date, they will be adjusted at each three-year interval, ending on March 31. The amount of the adjustment to the prior amounts is based on the change in the annual California Consumer Price Index for All Urban Consumers for the most recent three-year period ending on the preceding December 31, with each adjusted amount rounded to the nearest \$25. (See Code Civ. Proc., § 703.150(d).)

<u>Code Civ. Proc. Section</u>	<u>Type of Property</u>	<u>Amount of Exemption</u>
704.010	Motor vehicle (any combination of aggregate equity, proceeds of execution sale, and proceeds of insurance or other indemnification for loss, damage, or destruction)	\$ 3,325
704.030	Material to be applied to repair or maintenance of residence	\$ 3,500
704.040	Jewelry, heirlooms, art	\$ 8,725
704.060	Personal property used in debtor's or debtor's spouse's trade, business, or profession (amount of exemption for commercial motor vehicle not to exceed \$4,850)	\$ 8,725
704.060	Personal property used in debtor's and spouse's common trade, business, or profession (amount of exemption for commercial motor vehicle not to exceed \$9,700)	\$ 17,450
704.220	Deposit account, generally (exemption without claim; amount per judgment debtor, section 704.220(a),(e)) ¹	\$ 1,826*
704.080	Deposit account with direct payment of social security or public benefits (exemption without claim, section 704.080(b)) ²	
	• Public benefits, one depositor is designated payee	\$ 1,750
	• Social security benefits, one depositor is designated payee	\$ 3,500
	• Public benefits, two or more depositors are designated payees ³	\$ 2,600
	• Social security benefits, two or more depositors are designated payees ³	\$ 5,250
704.090	Inmate trust account	\$ 1,750
	Inmate trust account (restitution fine or order)	\$ 325 ⁴
704.100	Aggregate loan value of unmaturing life insurance policies	\$ 13,975

1 This exemption does not preclude or reduce other exemptions for deposit accounts. However, if the exemption amount for the deposit account applicable under other automatic exemptions—such as those applicable for direct deposit of social security benefits or public benefits—is greater under the other exemptions, then those apply instead of this one. (Code Civ. Proc., § 704.220(b).)

2 The amount of a deposit account with direct deposited funds that exceeds exemption amounts shown is also exempt to the extent it consists of payments of public benefits or social security benefits. (Code Civ. Proc., § 704.080(c).)

3 If only one joint payee is a beneficiary of the payment, the exemption is in the amount available to a single designated payee. (Code Civ. Proc., § 704.080(b)(3) and (4).)

4 This amount is not subject to adjustments under Code Civ. Proc., § 703.150.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address): Jane Doe 123 Main St Los Angeles, CA 90001		TELEPHONE NO.: 213-444-5555	FOR COURT USE ONLY - See procedure manual for instructions
ATTORNEY FOR (Name): NAME OF COURT: STREET ADDRESS: 111 N. Hill Street MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Stanley Mosk			
PLAINTIFF: Jane Doe DEFENDANT: Mike Jones			
NOTICE OF OPPOSITION TO CLAIM OF EXEMPTION (Enforcement of Judgment)		LEVYING OFFICER FILE NO.:	COURT CASE NO.: 19STSC12345

— DO NOT USE THIS FORM FOR WAGE GARNISHMENTS —

The original of this form and a Notice of Hearing on Claim of Exemption must be filed with the court.

A copy of this Notice of Opposition and the Notice of Hearing *must* be filed with the levying officer.

A copy of this Notice of Opposition and the Notice of Hearing must be served on the judgment debtor and other claimant at least 10 days before the hearing.

TO THE LEVYING OFFICER:

1. Name and address of judgment creditor

Jane Doe
123 Main St
Los Angeles, CA 90001

2. Name and address of judgment debtor

Mike Jones
456 Central Ave.
Los Angeles, CA 90001

Social Security Number (if known):

3. Name and address of claimant (if other than judgment debtor)

4. The notice of filing claim of exemption states it was mailed on (date): 12/30/2018

5. The item or items claimed as exempt are

- a. not exempt under the statutes relied upon in the Claim of Exemption.
- b. not exempt because the judgment debtor's equity is greater than the amount provided in the exemption.
- c. other (specify):

6. The facts necessary to support item 5 are

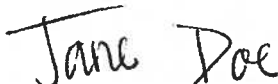
- continued on the attachment labeled Attachment 6.
- as follows:

\$350 Entertainment Excessive
\$200 Clothing Excessive

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

Date: 1/2/2019

Jane Doe
(TYPE OR PRINT NAME)


(SIGNATURE OF DECLARANT)

<p>ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Jane Doe 123 Main Street Los Angeles, CA 90001 TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (Name):</p>	<p>LEVYING OFFICER (Name and Address) - See procedure manual for instructions</p>
<p>SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: 111 N. Hill Street CITY AND ZIP CODE: Los Angeles 90012 BRANCH NAME: Stanley Mosk</p>	
<p>PLAINTIFF/PETITIONER: Jane Doe DEFENDANT/RESPONDENT: Michael Jones</p>	<p>COURT CASE NUMBER: 19STSC12345</p>
<p align="center">NOTICE OF OPPOSITION TO CLAIM OF EXEMPTION (Wage Garnishment)</p>	

TO THE LEVYING OFFICER:

<p>1. Name and address of judgment creditor</p> <p>Jane Doe 123 Main Street Los Angeles, CA 90001</p>	<p>2. Name and address of employee</p> <p>Michael Jones 456 Central Avenue Los Angeles, CA 90001</p>
<p>Social Security No. <input type="checkbox"/> on form WG-035 <input checked="" type="checkbox"/> unknown</p>	

3. The Notice of Filing Claim of Exemption states it was mailed on (date): 11/15/2019
4. The earnings claimed as exempt are
- a. not exempt.
 - b. partially exempt. The amount not exempt per month is: \$
5. The judgment creditor opposes the claim of exemption because
- a. the following expenses of the debtor are not necessary for the support of the debtor or the debtor's family (specify):
 - \$1,500 toward house payments are paid be tenants
 - \$800.00 clothing expense excessive
 - \$250.00 laundry expense excessive
 - b. the debt was for attorney's fees based on a court order under Family Code section 2030, 3121, or 3557.
 - c. other (specify):
6. The judgment creditor will accept: \$ \$250.00 per pay period for payment on account of this debt.

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

Date: 11/21/2019

Jane Doe (TYPE OR PRINT NAME) ▶ Jane Doe (SIGNATURE OF DECLARANT)

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address) Jane Doe 123 Main Street Los Angeles, CA 90001 ATTORNEY FOR (Name)	TELEPHONE NO.	FOR COURT USE ONLY -\$60 Filing fee -See procedure manual for instructions	
NAME OF COURT, JUDICIAL DISTRICT OR BRANCH COURT, IF ANY Stanley Mosk, Central District			
PLAINTIFF: Jane Doe DEFENDANT: Michael Jones			
NOTICE OF HEARING ON CLAIM OF EXEMPTION (Wage Garnishment—Enforcement of Judgment)		LEVYING OFFICER FILE NO.	COURT CASE NO. 19STSC12345

1. TO:

Name and address of levying officer Los Angeles County Sheriff's Department 111 N. Hill Street Room 525 Los Angeles, CA 90012 <input type="checkbox"/> Claimant, if other than judgment debtor (name and address):	Name and address of judgment debtor Michael Jones 456 Bird Lane Los Angeles, CA 90001 <input type="checkbox"/> Judgment debtor's attorney (name and address):
---	--

2. A hearing to determine the claim of exemption of

judgment debtor
 other claimant

will be held as follows:

a. date: 12/11/2019	time: 1:30 pm	<input checked="" type="checkbox"/> dept.: 092	<input type="checkbox"/> div.:	<input type="checkbox"/> rm.:
---------------------	---------------	--	--------------------------------	-------------------------------

b. address of court:

111 N. Hill Street
Los Angeles, CA 90012

3. The judgment creditor will not appear at the hearing and submits the issue on the papers filed with the court.

Date: 11/24/2019

Jane Doe

(TYPE OR PRINT NAME)

Jane Doe

(SIGNATURE OF JUDGMENT CREDITOR OR ATTORNEY)

If you do not attend the hearing, the court may determine your claim based on the Claim of Exemption, Financial Statement (when one is required), Notice of Opposition to Claim of Exemption, and other evidence that may be presented.

SHORT TITLE: Doe v Jones	LEVYING OFFICER FILE NO.	COURT CASE NO. 19STSC12345
-----------------------------	--------------------------	-------------------------------

PROOF OF SERVICE BY MAIL

I am over the age of 18 and not a party to this cause. I am a resident of or employed in the county where the mailing occurred. My residence or business address is *(specify)*:

5900 White Oak Avenue
 Encino, CA 91604

I served the attached Notice of Hearing on Claim of Exemption and the attached Notice of Opposition to Claim of Exemption by enclosing true copies in a sealed envelope addressed to each person whose name and address is given below and depositing the envelope in the United States mail with the postage fully prepaid.

(1) Date of deposit: 11/24/2019

(2) Place of deposit *(city and state)*:

Encino, CA

NAME AND ADDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED

Michael Jones
 456 Central Avenue
 Los Angeles, CA 90001

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

Date: 11/24/2019

James Johnson

(TYPE OR PRINT NAME)

James Johnson

(SIGNATURE OF DECLARANT)

PROOF OF SERVICE—PERSONAL DELIVERY

I am over the age of 18 and not a party to this cause. My residence or business address is *(specify)*:

I served the attached Notice of Hearing on Claim of Exemption and the attached Notice of Opposition to Claim of Exemption by personally delivering copies to the person served as shown below.

PERSONS SERVED

Name	Delivery At	Time:	Address:
	Date:		

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, address, and State Bar number):
 After recording, return to:
 Susan Edwards
 222 Chestnut Street
 Los Angeles, CA 90007

TEL NO.: _____ FAX NO. (optional): _____

E-MAIL ADDRESS (Optional): _____

ATTORNEY FOR JUDGMENT CREDITOR ASSIGNEE OF RECORD

SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles

STREET ADDRESS: 111 N. Hill Street

MAILING ADDRESS: _____

CITY AND ZIP CODE: Los Angeles 90012

BRANCH NAME: Stanley Mosk

- \$45 Filing fee
- File along with EJ-195
- File with court and serve to other party, see procedure manual

PLAINTIFF: Susan Edwards DEFENDANT: Nancy Garcia	FOR RECORDER'S USE ONLY CASE NUMBER: 01M12345
APPLICATION FOR AND RENEWAL OF JUDGMENT	
<input checked="" type="checkbox"/> Judgment creditor <input type="checkbox"/> Assignee of record applies for renewal of the judgment as follows:	FOR COURT USE ONLY

1. Applicant (name and address):
 Susan Edwards
 222 Chestnut Street, Los Angeles, CA 90003
2. Judgment debtor (name and last known address):
 Nancy Garcia
 789 Fremont Avenue, Los Angeles, CA 90003
3. Original judgment
 - a. Case number (specify): 01M12345
 - b. Entered on (date): 06/27/2019
 - c. Recorded:
 - (1) Date:
 - (2) County:
 - (3) Instrument No.:
4. Judgment previously renewed (specify each case number and date):

5. Renewal of money judgment

a. Total judgment	\$ 1,500.00
b. Costs after judgment	\$ 00.00
c. Subtotal (add a and b)	\$ 1,500.00
d. Credits after judgment	\$ 00.00
e. Subtotal (subtract d from c)	\$ 1,500.00
f. Interest after judgment	\$ 1,350.00
g. Fee for filing renewal application	\$ 45.00
h. Total renewed judgment (add e, f, and g)	\$ 2,890.00

i. The amounts called for in items a–h are different for each debtor.
 These amounts are stated for each debtor on Attachment 5.

SHORT TITLE: Edwards vs. Garcia	CASE NUMBER: 01M12345
---	---------------------------------

6. Renewal of judgment for possession.
 sale.

a. If judgment was not previously renewed, terms of judgment as entered:

b. If judgment was previously renewed, terms of judgment as last renewed:

c. Terms of judgment remaining unsatisfied:

SAMPLE

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

Date: 01/10/2020

Susan Edwards

 (TYPE OR PRINT NAME)

▶ *Susan Edwards*

 (SIGNATURE OF DECLARANT)

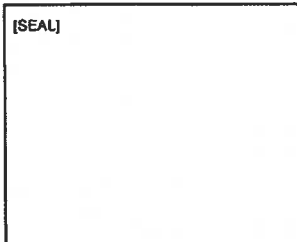
<p>ATTORNEY OR PARTY WITHOUT ATTORNEY</p> <p>STATE BAR NUMBER:</p> <p>NAME: Susan Edwards</p> <p>FIRM NAME:</p> <p>STREET ADDRESS: 222 Chestnut Street</p> <p>CITY: Los Angeles</p> <p>TELEPHONE NO.:</p> <p>E-MAIL ADDRESS:</p> <p>ATTORNEY FOR (name):</p>	<p>FOR COURT USE ONLY</p> <p>-File with court and serve to other party, see procedure manual</p> <p>-File along with EJ-190</p>
<p>SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES</p> <p>STREET ADDRESS: 110 N. Grand Avenue</p> <p>MAILING ADDRESS:</p> <p>CITY AND ZIP CODE: Los Angeles, CA 90012</p> <p>BRANCH NAME: Stanley Mosk</p>	
<p>PLAINTIFF: Susan Edwards</p> <p>DEFENDANT: Nancy Garcia</p>	
<p>NOTICE OF RENEWAL OF JUDGMENT</p>	<p>CASE NUMBER: 01M12345</p>

TO JUDGMENT DEBTOR (name): Nancy Garcia

1. This renewal extends the period of enforceability of the judgment until 10 years from the date the application for renewal was filed.
2. If you object to this renewal, you may make a motion to vacate or modify the renewal with this court.
3. You must make this motion within 30 days after service of this notice on you.
4. A copy of the Application for and Renewal of Judgment is attached (Cal. Rules of Court, rule 3.1900).

Date: _____

Clerk, by _____, Deputy



See CCP 683.160 for information on method of service

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, address, and State Bar number):
 After recording, return to:
Joseph Durant
 234 Central Ave.
 Los Angeles, CA 90012

TEL NO.: _____ FAX NO. (optional): _____

E-MAIL ADDRESS (Optional): _____

ATTORNEY FOR JUDGMENT CREDITOR ASSIGNEE OF RECORD

SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles
 STREET ADDRESS: 110 N. Grand Ave.
 MAILING ADDRESS:
 CITY AND ZIP CODE: Los Angeles,
 BRANCH NAME: Stanley Mosk

- Used when Abstract of Judgment is recorded
- Fill out 2 copies, DO NOT sign, go to Notary to sign both
- File one with court
- Mail other to Judgment Debtor
- May also be used for partial satisfaction

FOR RECORDER'S OR SECRETARY OF STATE'S USE ONLY

PLAINTIFF: Joseph Durant	CASE NUMBER: 17STSC12345
DEFENDANT: Michael Weber	

ACKNOWLEDGMENT OF SATISFACTION OF JUDGMENT <input checked="" type="checkbox"/> FULL <input type="checkbox"/> PARTIAL <input type="checkbox"/> MATURED INSTALLMENT	FOR COURT USE ONLY
---	--------------------

1. Satisfaction of the judgment is acknowledged as follows:
- a. Full satisfaction
 - (1) Judgment is satisfied in full.
 - (2) The judgment creditor has accepted payment or performance other than that specified in the judgment in full satisfaction of the judgment.
 - b. Partial satisfaction
 The amount received in partial satisfaction of the judgment is \$ _____
 - c. Matured installment
 All matured installments under the installment judgment have been satisfied as of (date): _____

2. Full name and address of judgment creditor:*
 Joseph Durant
 234 Central Ave. Los Angeles, CA 90012
3. Full name and address of assignee of record, if any: _____
4. Full name and address of judgment debtor being fully or partially released:*
 Michael Weber
 123 Main Street Los Angeles, CA 90012


5. a. Judgment entered on (date): 10/04/2018
 b. Renewal entered on (date): _____
6. An abstract of judgment certified copy of the judgment has been recorded as follows (complete all information for each county where recorded):

COUNTY	DATE OF RECORDING	INSTRUMENT NUMBER
Los Angeles	12/20/2018	20181234567

7. A notice of judgment lien has been filed in the office of the Secretary of State as file number (specify): _____

NOTICE TO JUDGMENT DEBTOR: If this is an acknowledgment of full satisfaction of judgment, it will have to be recorded in each county shown in item 6 above, if any, in order to release the judgment lien, and will have to be filed in the office of the Secretary of State to terminate any judgment lien on personal property.

Date: 01/11/2019


 (SIGNATURE OF JUDGMENT CREDITOR OR ASSIGNEE OF CREDITOR OR ATTORNEY**)

SC-290

Acknowledgment of Satisfaction of Judgment

Clerk stamps here when form is filed.

- Filed by Judgment Creditor

See instructions on other side.

To the court clerk:

① My name is: Roger Dixon
Mailing address: 2424 Goodland Avenue
Encino, CA 91316
Phone: _____

② I am the (check one):
a. Judgment creditor.
b. Assignee of record.

③ I acknowledge that the judgment owed to (name): Roger Dixon
was paid or otherwise satisfied on (date): 12-18-2019
as follows (check and complete one):
a. The judgment has been fully paid or satisfied as to all judgment debtors.
b. The judgment has been fully paid or satisfied as to these judgment debtors only (names and addresses of judgment debtors who have fully paid or satisfied judgment):

Fill in the court name and street address:

Superior Court of California, County of

Fill in your case number and case name:

Case Number:
09M87654

Case Name:
Dixon v Beal

(1) Name: _____
Mailing address: _____
street city state zip

(2) Name: _____
Mailing address: _____
street city state zip

(3) Name: _____
Mailing address: _____
street city state zip

(4) Name: _____
Mailing address: _____
street city state zip

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

Date: 12-26-2019

Roger Dixon
Type or print your name

Roger Dixon
Judgment creditor or assignee signs here

Instructions for Form SC-290, *Acknowledgment of Satisfaction of Judgment*

(This page is not part of the *Acknowledgment of Satisfaction of Judgment* and does not need to be copied, served, or filed.)

Warning to the judgment creditor or person to whom the judgment has been assigned!

- When a small claims judgment has been fully paid or satisfied, you must file an *Acknowledgment of Satisfaction of Judgment* with the small claims court immediately.
- If the *Acknowledgment* is not filed within 14 days after the judgment debtor requests it, you may have to pay the judgment debtor damages and a penalty.

Use Form SC-290 to acknowledge payment of a small claims judgment if:

- You are the judgment creditor (or assignee), and the judgment debtor has paid the full judgment (or satisfied it in another way), and
- Form EJ-001, *Abstract of Judgment—Civil and Small Claims*, has NOT been recorded for this judgment.

Use Form EJ-100 to acknowledge payment if:

- The judgment debtor has paid only part of the judgment, or
- Form EJ-001, *Abstract of Judgment—Civil and Small Claims*, has been recorded.



Need help?

For free help, contact your county's small claims advisor:

Or go to "County-Specific Court Information" at www.courtinfo.ca.gov/selfhelp/smallclaims.

<small>NAME, ADDRESS, AND TELEPHONE NUMBER OF PARTY</small> Michael Jones 456 Page Road Los Angeles, CA 90003	<small>Reserved for Clerk's File Stamp</small> -Filed by Judgment Debtor with court May also be filed with the LACIV 040 if Abstract Judgment was recorded
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES SMALL CLAIMS	
<small>COURTHOUSE ADDRESS:</small> 111 N. Hill Street, Room 113, Los Angeles, CA 90012	
<small>PLAINTIFF:</small> Susan Smith	
<small>DEFENDANT:</small> Michael Jones	
DECLARATION OF JUDGMENT DEBTOR REGARDING SATISFACTION OF JUDGMENT	
<small>CASE NUMBER:</small> 18STSC12345	

1. I am the judgment debtor in this case.
2. Judgment was entered against me on 08/12/2018.
3. I have satisfied (paid) the judgment, as follows:
 - Fully, including accrued interest, costs and administrative fees, if applicable.
 - Partially in the amount of \$ _____ . The judgment creditor refuses to accept any more payments.
4. I have requested that the judgment creditor file an acknowledgement of satisfaction of judgment. I made my request orally in writing on (date) 03/25/2019 . As of the date of this declaration, the judgment creditor has failed or refused to comply with my request.
 - I have been unable to contact the judgment creditor because his/her present address is unknown.
5. The following document(s), which constitutes evidence of full partial payment of the judgment is attached:
 - Cancelled check money order written by me after judgment and made payable to, and endorsed by, the judgment creditor.
 - Cash, receipt for the amount paid, signed by the judgment creditor.
 - Other: _____

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

<small>DATE</small>	<small>TYPE OR PRINT JUDGMENT DEBTOR'S NAME</small>	<small>SIGNATURE OF JUDGMENT DEBTOR</small>
05/12/2019	Michael Jones	<i>Michael Jones</i>

**NOTE: THIS DOCUMENT IS NOT INTENDED FOR USE BY THE COUNTY RECORDER'S OFFICE.
CLERK'S NOTATION OF ENTRY OF SATISFACTION**

Satisfaction of judgment entered in register of action pursuant to Code Civ. Proc., § 116.850, subdivision (c) as follows:

- Full Satisfaction.
- Partial Satisfaction in the amount of \$ _____.
- Clerk's Certificate of Satisfaction of Judgment (LACIV 040) issued.

SHERRI R. CARTER, Executive Officer/Clerk

Date: _____ By: _____, Deputy

ATTORNEY OR PARTY WITHOUT ATTORNEY (name, state bar number, and address)
 After recording return to:
 Michael Jones
 456 Page Roads
 Los Angeles, CA 90012
 TELEPHONE NO: (323) 123-4567
 FAX NO E-MAIL ADDRESS
 ATTORNEY FOR

Note: This form is filed by the Debtor when an Abstract is recorded on a property but Creditor has failed to file a satisfaction.

-Judgment Debtor must File the SCLA 003 first

SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES
 STREET ADDRESS: 110 North Grand Ave
 MAILING ADDRESS:
 CITY AND ZIP CODE: Los Angeles, CA 90012
 BRANCH NAME: Stanley Mosk

FOR RECORDER'S USE ONLY

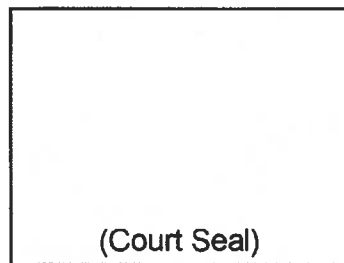
PLAINTIFF: Susan Smith	CASE NUMBER: 17STSC00001
DEFENDANT: Michael Jones	

CLERK'S CERTIFICATE OF ENTRY OF SATISFACTION OF JUDGMENT

I, clerk of the above-named court, certify that a full satisfaction of the judgment described below has been entered in the register of actions.

DESCRIPTION OF JUDGMENT

NAME(S) OF JUDGMENT CREDITOR(S) Susan Smith	
NAME(S) OF JUDGMENT DEBTOR(S) Michael Jones	
DATE OF ENTRY OF JUDGMENT IN REGISTER OF ACTIONS 08/12/2018	DATE(S) OF RENEWAL(S) (if any)
DATE OF ENTRY OF SATISFACTION 05/12/2019	DATE THIS CERTIFICATE ISSUED



SHERRI R. CARTER, Executive Officer/Clerk

By _____
Deputy Clerk

NOTICE TO JUDGMENT DEBTOR: To release a judgment lien, this form must be recorded with the county recorder of each county where an abstract of judgment has been recorded.

TO BE COMPLETED BY THE JUDGMENT DEBTOR

An abstract of judgment has been recorded as follows: (Complete all information for each county where recorded)

COUNTY	DATE OF RECORDING	RECORDER ID NUMBER
Los Angeles	11/01/2018	201812345367
Orange	11/01/2018	20187654321

05/12/2019
Date

Michael Jones
Signature of Judgment Debtor



Certificate of Facts RE Unsatisfied Judgment
(SEE INSTRUCTIONS ON NEXT PAGE)

(Do not complete or sign until 30 days after finality of judgment unless the court ordered installment payments.) After completion of this form, please mail it with your nonrefundable check or money order in the amount of \$20 to: DMV, Mail Station J237, P.O. Box 942884, Sacramento, CA 94284-0884. DO NOT TAKE IT TO YOUR LOCAL DEPARTMENT OF MOTOR VEHICLES.

Title of Court Los Angeles Superior Court, Stanley Mosk Small Claims
(INCLUDE COUNTY, JUDICIAL DISTRICT OR DIVISION)

Court Code 19462
(AVAILABLE FROM COURT CLERK)

STATE OF CALIFORNIA

Plaintiff : Sarah Lee Defendant : Robert Smith

John Lee vs. _____

Case No. : 19STSC12345 Date Filed : 06/13/2019

The undersigned Clerk/Judge of the Court hereby certifies as follows:

- 1. The above judgment was based on a tort claim as a result of a motor vehicle accident.
- 2. The judgment was entered on 09 15 2019, and became final 10 15 2019, and remained unsatisfied for 30 days thereafter.
MONTH DAY YEAR MONTH DAY YEAR

3. Judgment was entered against Robert Smith

- a. Bodily injury _____
 - b. Damage to property \$5,600.00
 - c. Wrongful death _____
 - d. Costs \$145.00
 - e. Loss of use _____
 - f. Any other ground _____
- TOTAL \$5,745.00

4. The court (ordered, did not order) the judgment paid in installments.
(If so ordered, a certified copy of such order must be attached as required by California Vehicle Code (CVC) §16379.)

DATE _____ SIGNED **X**
OFFICIAL TITLE _____

The undersigned creditor/attorney hereby certifies the following (lines 5 through 13 apply to the judgment debtor(s) only):

5. The date of the accident was 01 05 2019
MONTH DAY YEAR

FOR DMV USE ONLY:

6. Did accident occur in California? Yes No

7. Was the judgment awarded in a California court? Yes No

8. The vehicle involved in the accident was owned by Robert Smith

9. The vehicle involved in the accident was operated by Robert Smith

10. The ownership of the vehicle resulted in a judgment against Robert Smith

11. The operation of the vehicle resulted in a judgment against Robert Smith

12. Debtor's vehicle information (vehicle involved in the accident) LUV123 2010 Honda
LICENSE PLATE NUMBER YEAR MAKE

13. Judgment debtor(s) identifying information:
A Robert Smith B 9997 Bird Lane, Los Angeles, CA 90012 C D445566
DEBTOR FULL NAME CURRENT ADDRESS CA DRIVER LICENSE NUMBER

D 02/25/1992 E unkown F unkown
BIRTHDATE (Month, Day, Year) DEBTOR FORMER NAME(S) OR AKA ANY ADDITIONAL ADDRESS

Include any additional judgment debtor(s) information on a separate sheet of paper.

14. Name, address and telephone number of judgment creditor or attorney: Sarah Lee/John Lee
123 Main Street
Los Angeles, CA 90012 (213) 333-1234

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

SIGNED **X** Sarah Lee DATE 12/12/2019

Court Report of Judgments (Reference CVC §16373)

The clerk of a court, or the judge of a court which has no clerk, shall issue upon the request of a judgment creditor, a certified copy of the judgment or a certified copy of the docket entries in an action resulting in a judgment for damages, and a certificate of facts relative to such judgment on a form provided by the Department, the rendering and nonpayment of which judgment requires the Department to suspend the driver license of the judgment debtor. The document shall be forwarded immediately upon the expiration of thirty days after the judgment has become final and when the court has not been stayed or satisfied within the amounts specified in this chapter as shown by the records of the court.

**CERTIFICATE OF FACTS RE UNSATISFIED JUDGMENT (DL 30)
INSTRUCTION SHEET**

Use this form **ONLY** for a judgment over \$1,000 (\$750 if prior to January 1, 2017) issued by a California Court and based on a tort claim as a result of a motor vehicle accident occurring in California.

In accordance with *California Vehicle Code (CVC) §16482*, the department will not suspend an individual upon receipt of a renewed judgment if an unsatisfied judgment suspension was previously taken for the same accident.

COMPLETE THE FORM AS FOLLOWS:

The top portion down to #4 must be completed by a California Court. Submit one DL 30 per defendant.

The location of court rendering judgment, court name, court code, case number, and date filed must always be complete and reflect information that is identical to the information that is on the judgment.

2. Must have both ENTERED and FINAL dates.
3. Must show name(s) of judgment debtor(s). **(Must agree with judgment exactly)**
 - a-d) Items 3a through 3d will be completed as applicable. Total amount of judgment, not including court cost. **Item 3a, b, or c must show an amount.**
 - a,c) If the judgment is based on bodily injury or wrongful death, action will be taken on any amount.
 - b) If the judgment is based solely on property damage to one party, it must be in excess of \$1,000 (\$750 if prior to January 1, 2017), excluding court costs.
 - d) Total amount may be under \$1,000 (\$750 if prior to January 1, 2017) if it includes both property damage and bodily injury.
4. The Certificate of Facts (DL 30) must be **dated, signed, and certified** by the Court Clerk or Judge.
 - a) If the court **did not order** installment payments, 30 days must elapse between the final date on line 2 and the date the Certificate of Facts is dated on line 4.
 - b) Amounts on DL 30 and the Judgment must match exactly.
 - c) If the court **ordered** installment payments, no time lapse is required from judgment finality date.
5. Must show the complete date of the accident.
6. All accidents must have occurred in the **STATE OF CALIFORNIA**, as defined in CVC §§360, 590, and 16000.1.
7. Judgment must be issued by a California court.
- 8-11. Items 8 through 11 must give basis for suspension of judgment debtor(s) as owner and/or operator of the vehicle involved. **Items 9 and 10 must agree exactly with Item 3.**
12. Item 12 must show license plate number, year, and model of debtor's vehicle involved in accident if owner suspension is requested.
13. Item 13 must provide sufficient identifying information to match the person to a California driver record which requires their name, date of birth, address, and California driver license number. In addition, to request suspension of vehicle owner(s), provide evidence of vehicle ownership (i.e. registration printout).
14. Item 14 must show the name, address and telephone number of the judgment creditor (plaintiff) or attorney.

The fee for processing the judgment is \$20 per case, which is nonrefundable. Please make check or money order payable to the Department of Motor Vehicles. Processing fees will not be refunded when DMV is unable to take a suspension action or when unacceptable or incomplete judgment documents are submitted; however, a new fee is **not required** when you resubmit judgment documents returned to you with a request for additional information.

Mail the completed and certified DL 30, A CERTIFIED COPY OF THE ORIGINAL JUDGMENT, and a nonrefundable \$20 judgment processing fee to the address listed below (do not take into your local DMV field office):

Department of Motor Vehicles
ATTN: Civil Judgment, Mail Station J237
P.O. Box 942884
Sacramento, CA 94284-0884

If you have any questions regarding the completion of this form, please contact our customer service representatives at (916) 657-7573.



NOTICE OF UNSATISFIED JUDGMENT OF \$1,000 OR LESS
(\$750 or Less for Accidents Prior to January 1, 2017)
(READ INSTRUCTIONS ON BACK BEFORE COMPLETING)

This form is to be completed by the judgment creditor and may not be completed until 90 days after the judgment is final. The judgment of the small claims court must be attached to the form. The judgment must set forth the judge's determination that the judgment resulted from a motor vehicle accident occurring in California caused by the judgment debtor's operation of a motor vehicle.

Title of Court Los Angeles Superior Court, Stanley Mosk Small Claims
(Include county, judicial district or division)

Court Code 19462
(Available from Court Clerk)

STATE OF CALIFORNIA

Plaintiff : Jane Doe Defendant : Lola Williams
Donald Williams
vs.

Case No. : 19STSC65789 Date Filed : 01/20/2019

The above judgment was based on a tort claim as a result of a motor vehicle accident.

1. The judgment was entered on 11 13 2019, and became final 12 13 2019, and remained unsatisfied for 90 days thereafter.
MONTH DAY YEAR MONTH DAY YEAR

2. Name of driver Lola Williams

3. Amount of judgment (excluding court costs) \$1,000 or less

4. Was the judgment for damages resulting from an accident involving a motor vehicle driven by the judgment debtor? YES

5. Did the accident occur in California YES

6. Date of accident 09/30/2019

7. Vehicle license plate number of vehicle driven by the judgment debtor in the accident 123AQLW

8. Identifying information for judgment debtor

Full name Lola Williams Former name N/A

Current address 8855 Ventura Blvd., Van Nuys, CA 91405

Additional address _____

Birth date 10/17/1984 California Driver License Number D0034567
MM / DD / YYYY

CERTIFICATION

The undersigned judgment creditor hereby certifies:

I am the judgment creditor in the attached small claims court judgment. This judgment has not been satisfied by the judgment debtor.

Full name and address of judgment creditor.

Jane Doe

123 Main Street

Los Angeles, CA 90012

Telephone number (213) 333-8426

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

Signed: Jane Doe Date: 01/20/2019

FOR DMV USE ONLY:

NOTICE OF UNSATISFIED JUDGMENT OF \$1,000* OR LESS (DL 17) INSTRUCTIONS

*($\$750$ or Less for Accidents Prior to January 1, 2017)

ALL ENTRIES ON THE DL 17 FORM MUST BE COMPLETED

- Title of the court (same as shown on judgment). **Must be issued by a California Justice or Small Claims Court.**
- Accident must have occurred and judgment received in California.
- The judgment must be against the **vehicle operator only**, pursuant to *California Code of Civil Procedures* §116.880.
- The title of the case (plaintiff vs. defendant) must agree with judgment exactly.
- Case number and date filed (must agree with judgment exactly).

Numbered Entries:

1. The judgment entered and final dates should be taken from the judgment document.
3. Total amount must be $\$1,000$ or less ($\$750$ or less prior to January 1, 2017), excluding court costs.
5. To take an action, the accident must have occurred on a public street, highway, or private property **in the State of California.**
6. Must show the complete date of the accident (month/day/year).
8. Item 8 must provide sufficient identifying information to match the person to a California driver record.

CERTIFICATION portion - must be completed, signed and dated by judgment creditor. **(The certificate should not be signed, dated, and submitted prior to 90 days after final date.)**

COURT JUDGMENT DOCUMENT (REQUIRED)

To be acceptable, the court judgment must contain the following information:

- Title, court and case number,
- Name of the judgment debtor,
- Amount of the judgment,
- Date the judgment was entered, and
- Judge's signature or court certification with Clerk's signature.

The fee for processing the judgment is $\$20$, which is nonrefundable. Please make check or money order payable to the Department of Motor Vehicles. Mail the fee, the completed DL 17 certification form, and the small claims court judgment (**do not** take into your local DMV field office) to:

Department of Motor Vehicles
ATTN: Civil Judgment
P.O. Box 942884
Mail Station J237
Sacramento, CA 94284-0884

If you have any questions regarding the completion of this form, please contact our customer service representatives at (916) 657-7573.

FOR COURT OR OFFICIAL USE ONLY

Postmark date if received by mail: _____

GOVERNMENT CLAIM-JUDICIAL BRANCH

(Government Code section 910.4)

CLAIMANT

Name of Claimant John Woods	Home Telephone 213-323-8577	Work Telephone
Mailing Address 745 Sally Drive	City Los Angeles	State CA
	Zip Code 90012	
Send notices regarding this claim to (if different from above):		
Name		
Mailing Address	City	State
		Zip Code

CLAIM INFORMATION

Date of Incident (Month/Day/Year) 4/22/2019	Time of Incident 3:00 PM
Location of Incident Stanley Mosk Court 111 N Hill Street, Los Angeles, CA 90012	

Describe the indebtedness, obligation, injury, damage, or loss incurred as a result of the incident.
The bailiff dropped and broke my crystal lamp.

State the circumstances that gave rise to this claim. (State the facts that support your claim and why you believe the court or another judicial branch entity is responsible for the alleged damage or injury.) If known, provide the name of the official or employee who allegedly caused the injury, damage, or loss (if there is more than one official or employee, name each). If you need more space, please attach additional sheets of paper.

On 4/22/2019 at 3:00 PM I appeared before Commissioner Bailey. I was suing Bekins Moving and Storage Company They shattered one of a matched pair of crystal lamps. I brought the remaining lamp to court to show the Commissioner. I handed the lamp to the bailiff, and he dropped and broke it while walking to the Judges' bench.

If the total amount of your claim is up to \$10,000:

Amount of damage as of this date: \$2,200
Estimated amount of future damages: _____
Total amount claimed: \$2,200

If the amount of your claim is more than \$10,000, indicate whether your claim would be a limited civil case or an unlimited civil case (check one):

- Limited civil (amount is \$25,000 or less)
- Unlimited civil (amount is more than \$25,000)

State how the amount of your claim was computed (include copies of supporting documentation such as billing statements, invoices, receipts, and estimates).

Appraised value from Hye Lighting Company Inc/
18754 Ventura Blvd, Tarzana, CA 91356

List the names, addresses, and telephone numbers of all witnesses to the incident.

Commissioner James Bailey, Stanley Mosk Courthouse 444-567-8910
Linda Lopez, 3209 Silver Hill Road, Encno CA 91316 555-987-1524

Provide any additional information that might be helpful in considering this claim.

REPRESENTATIVE (Complete only if claim is presented by someone acting on claimant's behalf)

Name of Authorized Representative _____ Telephone _____

Mailing Address _____ City _____ State _____ Zip Code _____

PLEASE NOTE: Presentation of a false claim with intent to defraud is a criminal offense (Penal Code Section 72).

Signature of Claimant or Authorized Representative (check one) _____ Date 5/15/2019

Deliver or mail this claim form to:

Attention: Office of Court Counsel
Superior Court of California, County of Los Angeles
Stanley Mosk Courthouse
111 North Hill Street, Room 546
Los Angeles, CA 90012

COMPLAINT ABOUT A CALIFORNIA JUDGE, COURT COMMISSIONER OR REFEREE

*Confidential under California Constitution
Article VI, Section 18, and Commission Rule 102*

For information about the Commission on Judicial Performance and instructions on filling out
and submitting this form, please visit our website at <http://cjp.ca.gov>.

Today's date: 09/08/2019

Your name: Mary Jones

Your telephone number: 213-945-8516

Your address: 588 Bird Lane, Los Angeles, CA 90008

Your attorney's name:

Your attorney's telephone number:

Name of judge:

OR

Name of court commissioner or referee: James Bailey

(If your complaint involves a court commissioner or referee, you must first submit your complaint to the local court. If you have done so, please attach copies of your correspondence to and from that court.)

Court: Superior

County: Los Angeles

Name of case and case number: Mary Jones vs. Macy's Inc 19STSC54921

Please specify what action or behavior of the judge, court commissioner or referee is the basis of your complaint. Provide relevant dates and the names of others present. (Use additional pages if necessary.)

On 08/05/2019 at 8:30 A.M. I appeared before Commissioner James Bailey. I was suing Macy's Inc. for a return of the money I paid for a chair which collapsed the first month after purchase. I happen to be an attractive plus size woman. During the trial the Commissioner said, "I'm surprised that the chair supported your weight for one whole month. You are so big, the chair should have broken the first day."


*Please indicate how you became aware of the Commission on Judicial Performance,

Return to: Commission on Judicial Performance
455 Golden Gate Avenue, Suite 14400
San Francisco, California 94102

Telephone: (415) 557-1200

Fax: (415) 557-1266

**SHERIFF'S INSTRUCTIONS
MISCELLANEOUS PROCESS**

ATTORNEY OR PARTY WITHOUT ATTORNEY NAME: Jane Waters STREET ADDRESS: 554 Goody Ave CITY, STATE AND ZIP: Los Angeles CA 90012 TELEPHONE: (213) 555-8486	 Leroy D. Baca, Sheriff
COURT COURT NAME: ADDRESS: 111 N Hill St #113, Los Angeles, CA 90012 PLAINTIFF/PETITIONER: Jane Waters DEFENDANT/RESPONDENT: Roberts Patts CASE NO: 19STSC19735	
SHERIFF'S BRANCH OFFICE BRANCH NAME: Los Angeles ADDRESS: 111 N Hill St Rm 525 Los Angeles, CA 90012 TELEPHONE: (213) 116-5755 LEVYING OFFICER NO:	

To the Los Angeles County Sheriff, you are instructed to:

Please serve the Defendant at his home. If he is not home, please substitute service anyone he lives with

Defendant/Respondent/Witness to be served:

NAME AND CAPACITY: Robert Patts BUSINESS NAME (if any): STREET ADDRESS: 772 White Oaks Ave CITY: Los Angeles CA ZIP CODE: 90018
--

Comments (physical description, work hours, etc.):

Robert Patts is usually home from 1 pm onwards.

Payments/Refunds:

Make all refunds to the following (if different from the party at the top of this form): PAYEE NAME: Jane Waters ADDRESS: 554 Goody Ave, Los Angeles, CA, 90012 TELEPHONE: (213) 555-8486
--

All instructions must be submitted by the above party. All correspondence will be sent to said party.

DATE: 05/20/2019

BY: Jane Waters
(SIGNATURE OF ABOVE PARTY)

INSTRUCTIONS TO THE SHERIFF OF THE COUNTY OF SACRAMENTO:
 (The Sheriff must have written and signed instructions by the Plaintiff representing himself/herself or the Attorney of record in accordance with California Civil Procedure Code 262.)

TYPE OR PRINT CLEARLY

Court Case # 19STSC01001
John Smith
 PLAINTIFF'S NAME

Sheriff's File # (if re-levy) _____
Mega Store Inc
 DEFENDANT'S NAME

vs.

PARTY TO BE SERVED (Name must be **EXACTLY** the same as listed on the document which is to be served. Also include agent's name IF serving a corporation.) We **ONLY** accept **PHYSICAL** addresses, we do not serve PO Boxes and do not provide mail service.

Name: Mega Store Inc

Name: _____

Agent: CSC Lawyers Incorporating Service

Agent: _____

Address: 2710 Gateway Oaks Dr, Ste 150N
Only if Applicable

Address: _____
Only if Applicable

City & Zip: Sacramento, CA 95833 Apt #/Ste. #

City & Zip: _____ Apt # Ste. #

Phone: _____

Phone: _____

Employer's Name: _____

Employer's Name: _____

Address: _____

Address: _____

City & Zip: _____ Apt #/Ste.#

City & Zip: _____ Apt # Ste.#

Is the person to be served violent toward Peace Officers **Y / N**
 PHYSICAL DESCRIPTION: Sex: _____ Date of Birth: _____

Is the person to be served violent toward Peace Officers **Y / N**
 PHYSICAL DESCRIPTION: Sex: _____ Date of Birth: _____

Age: _____ Height: _____ Weight: _____ Hair Color: _____

Age: _____ Height: _____ Weight: _____ Hair Color: _____

Eye Color: _____ Race: _____

Eye Color: _____ Race: _____

Distinguishing Marks, Scars or Tattoos: _____

Distinguishing Marks, Scars or Tattoos: _____

Vehicle Description: _____

Vehicle Description: _____

NORMAL HOURS FOR SERVICE ARE MONDAY THROUGH FRIDAY, 8:00 A.M. to 3:00 P.M.

Best Time for Service: _____

Best Time for Service: _____

Additional Comments

SIGNATURE: John Smith
 (Required) Party (In Pro Per) or Party's Attorney requesting service

DATE: 4/8/2019

PRINT YOUR NAME: John Smith E-MAIL: _____

MAILING ADDRESS: 123 Street Ave, Los Angeles, CA, 90012
Street Apt #/Ste.# City State Zip Code

PREFERRED PHONE: (213) 123-4567 MOBILE PHONE: () _____

NOTE: The Sheriff is entitled to his/her fees for service, whether or not the service is successful (Government Codes 26736 and 26738)
 You will receive a copy of the proof of service in the mail. **PLEASE DO NOT PHONE.**

COUNTY OF SACRAMENTO SHERIFF'S DEPARTMENT—CIVIL DIVISION
 3341 POWER INN ROAD, #313, SACRAMENTO, CA 95826

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address): Mary Brooks 1293 Boardwalk Blvd Bronx, NY 10372		TELEPHONE NO.:	FOR COURT USE ONLY -Filing fee varies by State
ATTORNEY FOR (Name):			
NAME OF COURT: Bronx County- Civil STREET ADDRESS: 851 Grand Concourse MAILING ADDRESS: CITY AND ZIP CODE: Bronx, 10451 BRANCH NAME:			
PLAINTIFF: Mary Brooks DEFENDANT: David Patts			
APPLICATION FOR ENTRY OF JUDGMENT ON SISTER-STATE JUDGMENT <input checked="" type="checkbox"/> AND ISSUANCE OF WRIT OF EXECUTION OR OTHER ENFORCEMENT <input type="checkbox"/> AND ORDER FOR ISSUANCE OF WRIT OR OTHER ENFORCEMENT			CASE NUMBER: Sister- State Case Number

Judgment creditor applies for entry of a judgment based upon a sister-state judgment as follows:

1. Judgment creditor (name and address):

Mary Brooks
1293 Boardwalk Blvd
Bronx, NY 10372

2. a. Judgment debtor (name): David Patts

b. An individual (last known residence address): 588 S Spring St, Los Angeles, CA, 90012

c. A corporation of (specify place of incorporation):

(1) Foreign corporation

qualified to do business in California
 not qualified to do business in California

d. A partnership (specify principal place of business):

(1) Foreign partnership which

has filed a statement under Corp C 15700
 has not filed a statement under Corp C 15700

3. a. Sister state (name): New York

b. Sister-state court (name and location): Bronx County- Civil
851 Grand Concourse, Bronx, NY, 10451

c. Judgment entered in sister state on (date): 11/01/2019

4. An authenticated copy of the sister-state judgment is attached to this application. Include accrued interest on the sister-state judgment in the California judgment (item 5c).

a. Annual interest rate allowed by sister state (specify):

b. Law of sister state establishing interest rate (specify):

5. a. Amount remaining unpaid on sister-state judgment: \$ 5,700
b. Amount of filing fee for the application: \$ 435
c. Accrued interest on sister-state judgment: \$ 47.79
d. Amount of judgment to be entered (total of 5a, b, and c): \$ 6,182.79

(Continued on reverse)

SHORT TITLE:	CASE NUMBER: Sister- State Case Number
--------------	---

6. Judgment creditor also applies for issuance of a writ of execution or enforcement by other means before service of notice of entry of judgment as follows:
- a. Under CCP 1710.45(b).
- b. A court order is requested under CCP 1710.45(c). Facts showing that great or irreparable injury will result to judgment creditor if issuance of the writ or enforcement by other means is delayed are set forth as follows:

SAMPLE

continued in attachment 6b.

7. An action in this state on the sister-state judgment is not barred by the statute of limitations.
8. I am informed and believe that no stay of enforcement of the sister-state judgment is now in effect in the sister state.
9. No action is pending and no judgment has previously been entered in any proceeding in California based upon the sister-state judgment.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct except as to those matters which are stated to be upon information and belief, and as to those matters I believe them to be true.

Date: 12/5/2019

.....
Mary Brooks
(TYPE OR PRINT NAME)

▶ 

(SIGNATURE OF JUDGMENT CREDITOR OR ATTORNEY)

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name and Address</i>)		TELEPHONE NO	FOR COURT USE ONLY -Filing fee varies by State
Mary Brooks 1293 Boardwalk Blvd Bronx, NY 10372			
ATTORNEY FOR (<i>Name</i>):			
NAME OF COURT STREET ADDRESS MAILING ADDRESS CITY AND ZIP CODE BRANCH NAME		Bronx County- Civil 851 Grand Concourse Bronx 10451	
PLAINTIFF: Mary Brooks DEFENDANT: David Patts			
NOTICE OF ENTRY OF JUDGMENT ON SISTER-STATE JUDGMENT		CASE NUMBER: Sister- State Case Number	

1. TO JUDGMENT DEBTOR (*name*): David Patts

2. YOU ARE NOTIFIED

a. Upon application of the judgment creditor, a judgment against you has been entered in this court as follows:

(1) Judgment creditor (*name*): Mary Brooks

(2) Amount of judgment entered in this court: \$ 6,182.79

b. This judgment was entered based upon a sister-state judgment previously entered against you as follows:

(1) Sister state (*name*): New York

(2) Sister-state court (*name and location*): Bronx County- Civil
851 Grand Concourse, Bronx, NY, 10451

(3) Judgment entered in sister state on (*date*): 11/1/2019

(4) Title of case and case number (*specify*): Sister- state case name and number

3. **A sister-state judgment has been entered against you in a California court. Unless you file a motion to vacate the judgment in this court within 30 DAYS after service of this notice, this judgment will be final.**

This court may order that a writ of execution or other enforcement may issue. Your wages, money, and property could be taken without further warning from the court.

If enforcement procedures have already been issued, the property levied on will not be distributed until 30 days after you are served with this notice.

Date: _____ Clerk, by _____, Deputy

4. NOTICE TO THE PERSON SERVED: You are served

a. as an individual judgment debtor.

b. under the fictitious name of (*specify*):

c. on behalf of (*specify*):

Under:

CCP 416.10 (corporation)

CCP 416.20 (defunct corporation)

CCP 416.40 (association or partnership)

other:

CCP 416.60 (minor)

CCP 416.70 (conservatee)

CCP 416.90 (individual)

(*Proof of service on reverse*)

[SEAL]

PROOF OF SERVICE
(Use separate proof of service for each person served)

1. I served the Notice of Entry of Judgment on Sister-State Judgment as follows:

a. on judgment debtor (name): David Patts

b. by serving judgment debtor other (name and title or relationship to person served):

c. by delivery at home at business

(1) date:

(2) time:

(3) address:

d. by mailing

(1) date:

(2) place:

2. Manner of service (check proper box):

a. **Personal service.** By personally delivering copies. (CCP 415.10)

b. **Substituted service on corporation, unincorporated association (including partnership), or public entity.** By leaving, during usual office hours, copies in the office of the person served with the person who apparently was in charge and thereafter mailing (by first-class mail, postage prepaid) copies to the person served at the place where the copies were left. (CCP 415.20(a))

c. **Substituted service on natural person, minor, conservatee, or candidate.** By leaving copies at the dwelling house, usual place of abode, or usual place of business of the person served in the presence of a competent member of the household or a person apparently in charge of the office or place of business, at least 18 years of age, who was informed of the general nature of the papers, and thereafter mailing (by first-class mail, postage prepaid) copies to the person served at the place where the copies were left. (CCP 415.20(b)) *(Attach separate declaration or affidavit stating acts relied on to establish reasonable diligence in first attempting personal service.)*

d. **Mall and acknowledgment service.** By mailing (by first-class mail or airmail, postage prepaid) copies to the person served, together with two copies of the form of notice and acknowledgment and a return envelope, postage prepaid, addressed to the sender. (CCP 415.30) *(Attach completed acknowledgment of receipt.)*

e. **Certified or registered mail service.** By mailing to an address outside California (by first-class mail, postage prepaid, requiring a return receipt) copies to the person served. (CCP 415.40) *(Attach signed return receipt or other evidence of actual delivery to the person served.)*

f. Other (specify code section):

Additional page is attached.

3. The "Notice to the Person Served" was completed as follows:

a. as an individual judgment debtor.

b. as the person sued under the fictitious name of (specify):

c. on behalf of (specify):

under: CCP 416.10 (corporation)

CCP 416.20 (defunct corporation)

CCP 416.40 (association or partnership)

CCP 416.60 (minor)

CCP 416.70 (conservatee)

CCP 416.90 (individual)

other:

4. At the time of service I was at least 18 years of age and not a party to this action.

5. Fee for service: \$ 450

6. Person serving:

a. California sheriff, marshal, or constable.

b. Registered California process server.

c. Employee or independent contractor of a registered California process server.

d. Not a registered California process server.

e. Exempt from registration under Bus. & Prof. Code 22350(b).

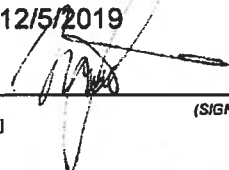
f. Name, address and telephone number and, if applicable, county of registration and number:

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

(For California sheriff, marshal, or constable use only)
I certify that the foregoing is true and correct.

Date: 12/5/2019

Date:



(SIGNATURE)



(SIGNATURE)

[EJ-110]

(SIGNATURE)

Plaintiff (list names):

Case Number: _____

1 The plaintiff (the person, business, or public entity that is suing) is:

Demandante #1 Name: Nombre y Apellido o Nombre del Negocio Phone: Numero de Telefono
Street address: Domicilio Ciudad EstadoCodigo Postal
Mailing address (if different): Direccion de correo si es diferente al domicilio
Email address (if available): Correo electronico

If more than one plaintiff, list next plaintiff here:

Demandante #2 (si lo hay) Name: Phone:
Street address:
Mailing address (if different):
Email address (if available):

- Check here if more than two plaintiffs and attach form SC-100A.
Check here if either plaintiff listed above is doing business under a fictitious name and attach form SC-103.
Check here if any plaintiff is a "licensee" or "deferred deposit originator" (payday lender) under Financial Code sections 23000 et seq.

2 The defendant (the person, business, or public entity being sued) is:

Acusado #1 Name: Nombre y Apellido o Nombre del Negocio Phone: Numero de Telefono
Street address: Domicilio Ciudad EstadoCodigo Postal
Mailing address (if different): Direccion de correo si es diferente al domicilio

If the defendant is a corporation, limited liability company, or public entity, list the person or agent authorized for service of process here:

Solo si demanda a una empresa Name: Nombre y Apellido Job title, if known: Agente de Servicio de Proceso
Address: Direccion Ciudad EstadoCodigo Postal

- Check here if your case is against more than one defendant and attach form SC-100A.
Check here if any defendant is on active military duty and write defendant's name here:

3 The plaintiff claims the defendant owes \$ Cantidad de dinero que le debe el acusado. (Explain below and on next page.)

(Note: A claim for COVID-19 rental debt cannot be made on this form. Use form SC-500, Plaintiff's Claim and ORDER to Go to Small Claims Court (COVID-19 Rental Debt).)

- a. Why does the defendant owe the plaintiff money?
Por que le debe el demandado dinero? Esto tiene que ser escrito en ingles.



Plaintiff (list names):

Case Number: _____

- 3 b. When did this happen? (Date): Cuando sucedio el incidente (fecha)
 If no specific date, give the time period: Date started: _____ Through: _____
- c. How did you calculate the money owed to you? (Do not include court costs or fees for service.)
Como calculo el dinero que le deben? Esto tiene que ser escrito en ingles.
- _____
- _____

Check here if you need more space. Attach one sheet of paper or form MC-031 and write "SC-100, Item 3" at the top.

- 4 You must ask the defendant (in person, in writing, or by phone) to pay you before you sue. If your claim is for possession of property, you must ask the defendant to give you the property. Have you done this? Debe pedirle al Acusado (en persona, por escrito o por telefono) que le pague antes de presentar una demanda. Ha hecho esto?
- Yes No If no, explain why not: _____
- Si no, explique por que no. Esto tiene que ser escrito en ingles.
- _____
- _____

5 Why are you filing your claim at this courthouse?

This courthouse covers the area (check the one that applies):

Por que esta presentando su demanda en esta corte?

- a. (1) Where the defendant lives or does business. (4) Where a contract (written or spoken) was made, signed, performed, or broken by the defendant or where the defendant lived or did business when the defendant made the contract.
- (2) Where the plaintiff's property was damaged.
- (3) Where the plaintiff was injured.
- b. Where the buyer or lessee signed the contract, lives now, or lived when the contract was made, if this claim, is about an offer or contract for personal, family, or household goods, services, or loans. (Code Civ. Proc., § 395(b).)
- c. Where the buyer signed the contract, lives now, or lived when the contract was made, if this claim is about a retail installment contract (like a credit card). (Civ. Code, § 1812.10.)
- d. Where the buyer signed the contract, lives now, or lived when the contract was made, or where the vehicle is permanently garaged, if this claim is about a vehicle finance sale. (Civ. Code, § 2984.4.)
- e. Other (specify): _____

- 6 List the zip code of the place checked in 5 above (if you know): Codigo postal del lugar en el #5

- 7 Is your claim about an attorney-client fee dispute? Yes No Esta demanda es sobre una cuota de abogado?
 If yes, and if you have had arbitration, fill out form SC-101, attach it to this form, and check here:

- 8 Are you suing a public entity? Yes No Esta demandando al gobierno?
 If yes, you must file a written claim with the entity first. A claim was filed on (date): _____
 If the public entity denies your claim or does not answer within the time allowed by law, you can file this form.



Plaintiff (list names):

Case Number: _____

- 9 **Have you filed more than 12 other small claims within the last 12 months in California?**
 Yes No *If yes, the filing fee for this case will be higher.* **Ha hecho mas de 12 reclamos menores en este año en California?**
- 10 **Is your claim for more than \$2,500?** Yes No **Su reclamo es mas de \$2,500?**
If you answer yes, you also confirm that you have not filed, and you understand that you may not file, more than two small claims cases for more than \$2,500 in California during this calendar year.
- 11 **I understand that by filing a claim in small claims court, I have no right to appeal this claim.** **Yo entiendo que archivando un reclamo menor no tengo el derecho de apelar el caso.**

I declare under penalty of perjury under the laws of the State of California that the information above and on any attachments to this form is true and correct.

Date: Fecha

Nombre en letra de molde
Plaintiff types or prints name here

▶ Firma
Plaintiff signs here

Date: _____

Second plaintiff types or prints name here

▶ _____
Second plaintiff signs here



Requests for Accommodations

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least five days before the trial. For these and other accommodations, contact the clerk’s office for form [MC-410, Disability Accommodation Request](#). (Civ. Code, § 54.8.)



El secretario pone un sello con la fecha aquí cuando se presenta el formulario.

**Solo para información
No entregue a la corte**

Si recibe beneficios públicos, tiene bajos ingresos o no tiene ingresos suficientes para pagar las necesidades básicas de su hogar y además las cuotas de la corte, puede usar este formulario para solicitar a la corte una exención de cuotas. La corte le puede ordenar que responda a preguntas sobre su situación económica. Si la corte lo exime del pago de las cuotas, es posible que las tenga que pagar más adelante si:

- No le puede demostrar a la corte que es elegible,
- Su situación económica mejora durante este caso. o
- Resuelve su caso civil con un fallo a su favor por **\$10,000** o más. La corte de primera instancia que exima sus cuotas impondrá un derecho de retención sobre dicho fallo por el monto de las cuotas y costos eximidos. La corte también puede cobrarle los gastos de cobranza, si los hay.

Ponga el nombre y dirección de la corte:

Corte Superior de California, Condado de

1 Su información (persona que pide la exención de cuotas):

Nombre: **Solo para información**

Domicilio o dirección postal: _____

Ciudad: _____ Estado: _____ Cód. postal: _____

Teléfono: _____

Ponga el número y nombre del caso:

Número del caso:

Solo para información

Nombre del caso:

2 Su empleo, si tiene uno (puesto): _____

Nombre del empleador: _____

Dirección del empleador: _____

3 Su abogado, si tiene uno (nombre, firma o afiliación, dirección, teléfono y número del Colegio de Abogados del estado): _____

a. ¿Aceptó el abogado adelantar el monto total o una parte de sus cuotas y costos? (Marque una): Sí No

(Si responde "sí," su abogado tiene que firmar aquí) Firma del abogado: _____

b. Si su abogado no le cobre por los servicios legales con base en sus bajos ingresos, es posible que tenga que explicar al juez por qué solicita una exención de cuotas.

4 ¿Para cuáles cuotas o costos de la corte solicita una exención?

Cuotas de la Corte Superior (Vea la Hoja Informativa sobre la exención de cuotas y costos de la Corte Superior (formulario FW-001-INFO S))

Cuotas de la Corte Suprema, Corte de Apelación o División de Apelaciones de la Corte Superior (Vea la Hoja Informativa sobre la exención de cuotas y costos de la corte de apelación (formulario APP-015/FW-015-INFO).)

5 ¿Por qué le pide a la corte una exención de cuotas?

a. Recibo (marque todos los que correspondan; vea las definiciones en el formulario FW-001-INFO):

Cupones de alimentos SSI SSP Medi-Cal Ayuda general IHSS
 CalWORKS o TANF Tribal CAPI

b. Los ingresos mensuales de mi hogar (antes de deducir impuestos) son menos del monto indicado a continuación. (Si marcó 5b, tiene que llenar los puntos 7, 8 y 9 en la página 2 de este formulario.)

Tamaño de familia	Ingresos familiares	Tamaño de familia	Ingresos familiares	Tamaño de familia	Ingresos familiares	Si hay más de 6 personas en el hogar, agregue \$433.34 por cada persona adicional.
1	\$1,226.05	3	\$2,092.71	5	\$2,959.38	
2	\$1,659.38	4	\$2,526.05	6	\$3,392.71	

c. No tengo ingresos suficientes para pagar las necesidades básicas de mi hogar y además las cuotas de la corte. Pido a la corte que (marque una y tiene que llenar la página 2):

me exima de pagar todas las cuotas de la corte me exima de pagar algunas cuotas de la corte
 me permita pagar las cuotas en plazos

6 Marque aquí si en los últimos seis meses ha pedido a la corte una exención de cuotas para este caso. (Si tiene la solicitud anterior o la puede conseguir razonablemente, adjúntela a este formulario y marque aquí:)

Declaro bajo pena de perjurio conforme a las leyes del estado de California, que la información que proporcioné en este formulario y en todos los adjuntos es verdadera y correcta.

Fecha: _____

Solo para información

Firme aquí

Su nombre en letra de molde

Su nombre: _____

Solo para información

Número de caso:

No entregue a la corte

Si marcó el punto 5a en la página 1, no tiene que llenar esta página. Si marcó el punto 5b, conteste las preguntas 7, 8 y 9. Si marcó el punto 5c, tiene que llenar toda esta página. Si necesita más espacio, adjunte el formulario MC-025 o una hoja separada, y escriba "Financial Information", su nombre y número de caso en la parte superior de la hoja.

7 Marque aquí si sus ingresos cambian mucho de un mes para otro, y llene este formulario usando el promedio de sus ingresos durante los últimos 12 meses.

8 Sus ingresos brutos mensuales

a. Indique el origen y monto de **cualquier** otro ingreso que reciba por mes, como por ejemplo: sueldo u otro ingreso del trabajo (antes de deducir los impuestos), manutención del cónyuge/hijo, jubilación, seguro social, discapacidad, desempleo, asignación militar básica para vivienda (BAQ), pagos a veteranos de guerra, dividendos, intereses, ingresos de fideicomisos, anualidades, ingresos netos de negocio o renta, reembolsos de gastos relacionados con el trabajo, ganancias de juegos de apuestas o lotería, etc.

- (1) _____ \$ _____
(2) _____ \$ _____
(3) _____ \$ _____
(4) _____ \$ _____

b. Sus ingresos mensuales totales: \$ _____

9 Ingresos del hogar

a. Indique los ingresos de todas las otras personas que viven en su hogar y que dependen de usted para mantenerse, por completo o en parte, o de quienes dependa usted para mantenerse, ya sea por completo o en parte.

Table with 4 columns: Nombre, Edad, Relación, Ingresos mensuales brutos. Rows (1) through (4) with blank lines for data entry.

b. Ingresos mensuales totales de las personas arriba indicadas: \$ _____

Ingresos mensuales totales más ingresos del hogar (8b más 9b): \$ _____

Si desea poner otros datos que la corte deba conocer, como por ejemplo gastos médicos inusuales, etc., adjunte el formulario MC-025 o adjunte una hoja separada, y escriba "Financial Information", su nombre y número de caso en la parte superior de la hoja. Si adjunta otra hoja, marque aquí. ¡Importante! Si su situación económica o su capacidad para pagar las cuotas de la corte mejoran, tiene que notificar a la corte dentro de cinco días utilizando el formulario FW-010.

10 Su dinero y sus bienes

a. Efectivo \$ _____

- b. Todas sus cuentas financieras (Indique el nombre del banco y el monto):
(1) _____ \$ _____
(2) _____ \$ _____
(3) _____ \$ _____

c. Carros, lanchas y otros vehículos. Table with 3 columns: Marca / Año, Valor justo de mercado, Cuánto debe todavía. Rows (1) through (3) with blank lines for data entry.

d. Bienes raíces. Table with 3 columns: Dirección, Valor justo de mercado, Cuánto debe todavía. Rows (1) through (2) with blank lines for data entry.

e. Otros bienes personales (joyas, muebles, pieles, acciones, bonos, etc.). Table with 3 columns: Descripción, Valor justo de mercado, Cuánto debe todavía. Rows (1) through (2) with blank lines for data entry.

11 Sus deducciones y gastos mensuales

a. Indique cada deducción de nómina y el monto mensual a continuación:

- (1) _____ \$ _____
(2) _____ \$ _____
(3) _____ \$ _____
(4) _____ \$ _____

- b. Pago de su casa o alquiler, más mantenimiento \$ _____
c. Comida e insumos del hogar \$ _____
d. Servicios públicos y teléfono \$ _____
e. Ropa \$ _____
f. Lavandería y limpieza \$ _____
g. Gastos médicos y dentales \$ _____
h. Seguro (de vida, de salud, contra accidentes, etc.) \$ _____
i. Escuela, cuidado de niños \$ _____
j. Manutención de hijos, del cónyuge (otro matrimonio) \$ _____
k. Transporte, gasolina, reparación y seguro de automóviles \$ _____

l. Pagos a plazos (indique todos a continuación): Pagado a: (1) _____ \$ _____ (2) _____ \$ _____ (3) _____ \$ _____

m. Sueldos/Ingresos retenidos por orden de la corte \$ _____

n. Cualquier otro gasto mensual (indique todos a continuación). Pagado a: ¿Cuánto? (1) _____ \$ _____ (2) _____ \$ _____ (3) _____ \$ _____

Gastos mensuales totales (sume 11a - 11n de arriba): \$ _____

SC-150

Request to Postpone Trial

Clerk stamps here when form is filed.

See instructions on other side.

① My name is: NOMBRE
Mailing address: DOMICILIO

Phone: NÚMERO DE TELÉFONO

I am a (check one): plaintiff defendant in this case.
YO SOY: DEMANDANTE ACUSADO

② My trial is now scheduled for (date): MI FECHA DE CORTE ACTUAL

#3 LE PIDO A LA **③** I ask the court to postpone my trial until (approximate date):
CORTE QUE POSPONGA _____
MI FECHA EN CORTE _____
HASTA: _____

④ I am asking for this postponement because (explain):
 If your answer will not fit in the space below, check this box and attach your answer on a separate sheet of paper. Write "SC-150, Item 4" at the top.

#4 PORQUÉ ESTOY
PIDIENDO POSPONER _____
MI FECHA EN CORTE: _____

⑤ If your trial is scheduled within the next 10 days, explain why you did not ask for a postponement sooner.
 If your answer will not fit in the space below, check this box and attach your answer on a separate sheet of paper. Write "SC-150, Item 5" at the top.

#5 SI SU CASO ESTA EN
CALENDARIO DENTRO DE
DIEZ(10) DÍAS, EXPLIQUE
PORQUÉ PIDIO POSPONER SU
CASO ANTES: _____

⑥ ¿SU RECLAMO A SIDO SERVIDO POR UN MÉTODO PERMITIDO POR LA LEY?
Has your claim been served by a method allowed by law? (See form SC-104B, What Is "Proof of Service"?.
for information about how the claim can be served. Check and complete all that apply):

(A) NO, SOY EL DEMANDADO Y NO E ARCHIVADO UN RECLAMO EN ESTE CASO. If your answer will not fit in the space below, check this box and attach your answer on a separate sheet of paper. Write "SC-150, Item 6" at the top.

a. No. I am a defendant and have not filed a claim in this case.
b. Yes. The parties listed below have been served:
(1) NOMBRE, who lives in: CONDADO, was served on: FECHA
name county date

(2) _____, who lives in: _____, was served on: _____
name county date

(C) NO, LOS PARTIDOS NO HAN SIDO SERVIDOS. Y SU NOMBRE, CONDADO Y FECHA. No. The parties listed below have not been served (list names):
(1) _____ (2) _____

(D) NO SE, EL SECRETARIO DE ACTAS ENVIÓ MI RECLAMO POR COREO CERTIFICADO. I do not know. The court clerk mailed my claim, and I do not know if the court received the signed receipt for these parties (list names):
(1) _____ (2) _____

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

Date: FECHA
NOMBRE EN LETRA DE MOLDE
Type or print your name

Firma
Sign here

Fill in the court name and street address:
Superior Court of California, County of

Fill in your case number and case name:
Case Number:
NÚMERO DE CASO
Case Name:

Dirección de la corte

SMALL CLAIMS CASE NO.: Número de caso

Si usted tiene más de 2 demandantes o más de 2 acusados, marque esta caja y llene la página siguiente

PLAINTIFF/DEMANDANTE (Name, street address, and telephone number of each):

DEFENDANT/DEMANDADO (Name, street address, and telephone number of each):

Nombre y dirección del demandante

Nombre y dirección del acusado

Telephone No.: Teléfono

Telephone No.: Teléfono

Nombre y dirección del demandante si hay más de un demandante

Nombre y dirección del acusado si hay más de un acusado

Telephone No.: Teléfono

Telephone No.: Teléfono

See attached sheet for additional plaintiffs and defendants.

NOTICE TO (Name): Nombre y dirección de todos los demás involucrados

One of the parties has asked the court to CANCEL the small claims judgment in your case. If you disagree with this request, you should appear in this court on the hearing date shown below. If the request is granted, ANOTHER TRIAL may immediately be held. Bring all witnesses, books, receipts, and other papers or things with you to support your case.

NOTICE OF MOTION TO VACATE (CANCEL) JUDGMENT

- 1. A hearing will be held in this court at which I will ask the court to cancel the judgment entered against me in this case. If you wish to oppose the motion you should appear at the court on

Table with columns: HEARING DATE, FECHA DEL JUICIO, DATE, DAY, TIME, PLACE, COURT USE. Rows 1, 2, 3.

- 2. I am asking the court to cancel the judgment for the reasons stated in item 5 below. My request is based on this notice of motion and declaration, the records on file with the court, and any evidence that may be presented at the hearing.

DECLARATION FOR MOTION TO VACATE (CANCEL) JUDGMENT

- 3. Judgment was entered against me in this case on (date): Fecha de juicio
4. I first learned of the entry of judgment against me on (date): Fecha que descubrió
5. I am asking the court to cancel the judgment for the following reason: Estoy pidiendo que anulen la sentencia porque
a. I did not appear at the trial of this claim because (specify facts): No fui a el juicio porque
b. Other (specify facts): Otra razón, especifique
6. I understand that I must bring with me to the hearing on this motion all witnesses, books, receipts, and other papers or things to support my case.

Elija (A) o (B) y llenar

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

Date: Fecha

Nombre

(TYPE OR PRINT NAME)

Firma

(SIGNATURE)

CLERK'S CERTIFICATE OF MAILING

I certify that I am not a party to this action. This Notice of Motion to Vacate Judgment and Declaration was mailed first class, postage prepaid, in a sealed envelope to the responding party at the address shown above. The mailing and this certification occurred at (place): , California, on (date): Clerk, by , Deputy

- The county provides small claims advisor services free of charge. -

SC-104 Proof of Service

Use this form to serve a **person**, a **business**, or a **public entity**. To learn more about proof of service, read *What Is "Proof of Service"?*, Form SC-104B. To learn more about how to serve a business or entity, read *How to Serve a Business or Public Entity*, Form SC-104C.

To serve a **business**, you must serve **one** of the following people:

- Owner (for a sole proprietorship)
- Partner (for a partnership) or general partner (for a limited partnership)
- Any officer or general manager (corporation or association)
- Any person authorized for service by the business (corporation, association, general partnership, limited partnership)
- Any person authorized for service with the Secretary of State (corporation, association, limited liability company [LLC], limited liability partnership [LLP], limited partnership)

To serve a **public entity**, you must first file a claim with that entity, then serve **one** of the following people:

- Clerk (of a city or county)
- Chief officer or director (of a public agency)
- Any person authorized for service by the entity

① a. If you are serving a **person**, write the person's name below:

Nombre de la persona recibiendo los documentos

b. If you are serving a **business** or **entity**, write the name of the business or entity, the person authorized for service, and that person's job title:

Nombre de negocio

Business or Agency Name

Persona recibiendo los documentos y título profesional

Person Authorized for Service

Job Title

② **Instructions to Server:**

You must be at least 18 years old and **not be named in this case**. Follow these steps:

- Give a copy of all the documents checked in ③ to the person in ①, *or*
 - Give a copy of all the documents checked in ③ to one of the following people:
 - a. A competent adult (at least 18) living with, and at the home of the person in ①, *or*
 - b. An adult (at least 18) who seems to be in charge at the usual workplace of the person in ①, *or*
 - c. An adult (at least 18) who seems to be in charge where the person in ① usually receives mail (but not a U.S. Post Office box), if there is no known physical address for the person in ①.
- and* mail a copy of the documents left with one of the adults in a, b, or c above to the person in ①.

THEN

- Complete and sign this form, and
- Give or mail your completed form to the person who asked you to serve these court papers, *in time for the form to be filed with the court at least 5 days before the hearing.*

③ **I served the person in ① a copy of the documents checked below:**

- a. SC-100, *Plaintiff's Claim and ORDER to Go to Small Claims Court*
- b. SC-120, *Defendant's Claim and ORDER to Go to Small Claims Court*
- c. Order for examination (*This form must be personally served. Check the form that was served*):

Note: The court can issue a civil arrest warrant if the served party does not come to court only if the order for examination was personally served by a registered process server, sheriff, marshal, or someone appointed by the court.

- (1) SC-134, *Application and Order to Produce Statement of Assets and to Appear for Examination*
- (2) AT-138/EJ-125, *Application and Order for Appearance and Examination*

d. Other (*specify*): _____

Clerk stamps date here when form is filed.

Fill in court name and street address:

Superior Court of California, County of _____

Fill in case number, case name, hearing date, day, time, and department below:

Case Number:

Número de caso

Case Name:

Hearing Date:

Fecha de corte

Time: Hora

Dept.: Departamento

Llenar solo (A) o (B)

Elija (A), (B), (C), o (D) y especifique



Case Number:

Número de caso

Case name: _____

4 Fill out "a" or "b" below:

Llenar solo
(A) o (B)

a. **Personal Service:** I personally gave copies of the documents checked in **(3)** to the person in **(1)**:

On (date): Fecha _____ At (time): Hora _____ a.m. p.m.

At this address: Dirección _____

City: Ciudad _____

State: Estado Zip: Código postal _____

b. **Substituted Service:** I personally gave copies of the documents checked in **(3)** (a, b, or d) to (check one):

A competent adult (at least 18) at the home of, and living with the person in **(1)**, or

An adult who seems to be in charge where the person in **(1)** usually works, or

An adult who seems to be in charge where the person in **(1)** usually receives mail, or has a private post office box (not a U.S. Post Office box), if there is no known physical address for the person in **(1)**.

I told that adult, "Please give these court papers to (name of person in **(1)**)."

I did this on (date): Fecha _____ At (time): Hora _____ a.m. p.m.

At this address: Dirección _____

City: Ciudad _____

State: Estado Zip: Código postal _____

Name or description of the person I gave the papers to: Nombre o descripción de la persona a la que le di los papeles _____

After serving the court papers, I put copies of the documents listed in **(3)** in an envelope, sealed the envelope, and put first-class prepaid postage on it. I addressed the envelope to the person in **(1)** at the address where I left the copies.

I mailed the envelope on (date): Fecha _____ from (city, state): Ciudad y estado _____

by leaving it (check one):

a. At a U.S. Postal Service mail drop, or

b. At an office or business mail drop where I know the mail is picked up every day and deposited with the U.S. Postal Service, or

c. With someone else I asked to mail the documents to the person in **(1)**, and I have attached that person's completed Form SC-104A.

5 Server's Information

Name: Nombre de la persona que sirvió los papeles _____ Phone: Teléfono _____

Address: Dirección de la persona que sirvió los papeles _____

City: Ciudad _____

State: Estado Zip: Código postal _____

Fee for service: \$ Costo _____

If you are a registered process server:

County of registration: Si está registrado, en qué condado _____ Registration number: Número de registro _____

6 I declare under penalty of perjury under California state law that I am at least 18 years old and not named in this case and that the information above is true and correct.

Date: Fecha _____

Nombre de la persona que sirvió los papeles _____

Type or print server's name

▶ Firma _____
Server signs here after serving