

SAMPLE FORMS 2024

| | |
|--|----|
| 1. SC-Plaintiff's Claim: | |
| - Individual v. Individual Page 2 through Page 4 | 06 |
| - Individual v. LLC | 09 |
| - 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 Department 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 Questions #7-9) | 31 |
| - 5c) Does NOT Qualify with 5a or 5b, but Needs a Waiver: | |
| i. Page 1 of 2 | 32 |
| ii. Page 2 of 2 (complete entire page) | 33 |
| 3. SC-120 Defendants Claim | 34 |
| 4. SC-500 Plaintiff Claim (COVID-19 Rental Debt) | 36 |
| - SC-500A Other Plaintiffs or Defendants | 39 |
| 5. SC-109 Authorization to Appear | 40 |
| 6. SC-101 Attorney Fee Dispute | 41 |
| 7. CIV-010 Application and Order for Appointment of Guardian Ad Litem: | |
| - Applicant is Parent for Minor Child | |
| i. Page 1 of 2 | 42 |
| ii. Page 2 of 2 | 43 |

SAMPLE FORMS 2024

| | |
|---|----|
| - Applicant is Minor 14 Years of Age or Older | |
| i. Page 1 of 2 | 44 |
| ii. Page 2 of 2 | 45 |
| - Applicant is Interested Person for Incompetent Person | |
| i. Page 1 of 2 | 46 |
| ii. Page 2 of 2 | 47 |
| 8. MC-410 Request for Accommodations by Persons with Disabilities | 48 |
| 9. SCLA-014 Application and Order for Transfer | 49 |
| 10. SC-104 Proof of Service | |
| - Personal Service | |
| i. Page 1 of 2 | 50 |
| ii. Page 2 of 2 | 51 |
| - Substituted Service | |
| i. Page 1 of 2 | 52 |
| ii. Page 2 of 2 | 53 |
| - DBA Sample | |
| i. Page 1 of 2 | 54 |
| ii. Page 2 of 2 | 55 |
| 11. SC-112A Proof of Service by Mail | 56 |
| 12. CIV-110 Request for Dismissal | |
| - Page 1 of 2 | 57 |
| - Page 2 of 2 | 58 |
| 13. SC-150 Request to Postpone Trial | |
| - Plaintiff Requesting a Postponement..... | 59 |
| - Defendant Requesting a Postponement..... | 60 |
| 14. MC-030 Declaration | 61 |
| 15. MC-040 Notice of Change of Address or Other Contact Information | |
| - Page 1 of 2 | 62 |
| - Page 2 of 2 | 63 |
| 16. LACIV-015 Affidavit of Prejudice Peremptory Challenge to Judicial Officer | 64 |
| 17. Military Members-Request for Stay of Legal Proceedings | 65 |
| 18. VL-110 Request to File New Litigation by Vexatious Litigant | 66 |
| 19. SC-108 Request to Correct or Cancel Judgement and Answer | |
| - Clerical Error | |
| i. Request | 67 |
| ii. Answer | 68 |
| - Legal Error | |
| i. Request | 69 |
| ii. Answer | 70 |

SAMPLE FORMS 2024

| | |
|--|-----|
| 20. SC-105 Request for Court Order and Answer: | |
| - Motion for Reconsideration | |
| i. Request | 71 |
| ii. Answer | 72 |
| - Motion to Vacate Dismissal | 73 |
| - Motion for Clarification | 74 |
| - Motion to Amend Name (Individual) | 75 |
| - Motion to Amend Name (Corporations) | 76 |
| - Motion to Amend Name (DBA) | 77 |
| - Motion for an Assignment Order of Rents | 78 |
| - Motion for an Assignment Order for Commission | 79 |
| - Motion to Modify Judgement Resulting from Auto Accident | 80 |
| - Motion to Garnish Non-Debtor Spouse's Wages | 81 |
| - Motion to Serve through Secretary of State | 82 |
| - Motion Court Retains Jurisdiction After Mediation | 83 |
| 21. SC-140 Notice of Filing Notice of Appeal | 84 |
| 22. SC-135 Notice of Motion to Vacate (Cancel) Judgement | 85 |
| 23. EJ-125 Application and Order for Appearance and Examination (Debtor): | 86 |
| 24. EJ-125 Application and Order for Appearance and Examination (Third Party): | 87 |
| 25. LACIV-057 Affidavit for Appearance & Examination of a 3 rd Person | 88 |
| 26. SC-134 Order to Produce Statement of Assets and to Appear for Examination: | |
| - SC-134 for an Individual | 89 |
| - SC-134 for a Business | 90 |
| 27. SC-107 Small Claims Subpoena and Declaration: | |
| - Judgment Debtor, Order to Appear in Person | |
| i. Page 1 of 2 | 91 |
| ii. Page 2 of 2 | 92 |
| iii. Page 3 of 3 | 93 |
| - Custodian of Records, Not Required to Appear in Person | |
| i. Page 1 of 2 | 94 |
| ii. Page 2 of 2 | 95 |
| iii. Page 3 of 3 | 96 |
| 28. SUBP-025 Notice to Consumer or Employee and Objection: | |
| - Page 1 of 2 | 97 |
| - Proof of Service for Consumer Page 2 of 2 | 98 |
| - Proof of Service for Third Party Page 2 of 2 | 99 |
| 29. EJ-185 Notice of Lien | 100 |
| 30. SC-145 Request to Pay Judgment to Court | 101 |
| 31. SC-220 Request to Make Payments | 102 |

SAMPLE FORMS 2024

| | |
|---|-----|
| 32. EJ-165 Financial Statement: | |
| - Page 1 of 2 | 103 |
| - Page 2 of 2 | 104 |
| 33. SC-221 Response to Request to Make Payments | 105 |
| 34. SC-223 Declaration of Default in Payment of Judgment | 106 |
| 35. SC-224 Response to Declaration of Default in Payment of Judgment | 107 |
| 36. EJ-001 Abstract of Judgment | 108 |
| 37. EJ-130 Writ of Execution | 109 |
| 38. EJ-130 Writ of Execution with Part of Attachment 20: | |
| - Page 1 of 2 | 110 |
| - Page 2 of 2 | 111 |
| - LACIV-101 Writ of Execution-Attachment 20 | 112 |
| 39. LACIV-106 Application & Order Regarding Lost Writ: | |
| - Litigant Lost their Writ | 113 |
| - Levying Officer/Sheriff Lost the Writ | 114 |
| 40. MC-012 Memorandum of Costs After Judgment: | |
| - Page 1 of 2 | 115 |
| - Page 2 of 2 | 116 |
| - Information Sheet for Calculating Interest & Amount Owed on Judgment ... | 117 |
| 41. WG-001 Application for Earnings Withholding Order (Wage Garnishment) | 120 |
| 42. EJ-160 Claim of Exemption (Enforcement of Judgment) | 121 |
| 43. WG-006 Claim of Exemption (Wage Garnishment) | 122 |
| 44. EJ-155 Exemptions from the Enforcement of Judgments: | |
| - Page 1 of 2 | 123 |
| - Page 2 of 2 | 124 |
| 45. EJ-156 Current Dollar Amount of Exemptions from Enforcement: | |
| - Page 1 of 2 | 125 |
| - Page 2 of 2 | 126 |
| 46. EJ-170 Notice of Opposition to Claim of Exemption | |
| - Enforcement of Judgment | 127 |
| 47. WG-009 Notice of Opposition to Claim of Exemption (Wage Garnishment) ... | 128 |
| 48. EJ-175 Notice of Hearing on Claim of Exemption: | |
| - Page 1 of 2 | 129 |
| - Page 2 of 2 | 130 |
| 49. EJ-190 Application for and Renewal of Judgment: | |
| - Page 1 of 2 | 131 |
| - Page 2 of 2 | 132 |
| 50. EJ-195 Notice of Renewal of Judgment | 133 |
| 51. EJ-100 Acknowledgement of Satisfaction of Judgement | 134 |

SAMPLE FORMS 2024

| | |
|---|-----|
| 52. SC-290 Acknowledgment of Satisfaction of Judgement, Small Claims | 135 |
| 53. SCLA-003 Declaration of Debtor Regarding Satisfaction of Judgment | 136 |
| 54. LACIV-040 Clerk's Certificate of Entry of Satisfaction of Judgment | 137 |
| 55. DL-30 Certificate of Facts RE Unsatisfied Judgment | |
| - Driver is Registered Owner..... | 138 |
| - Registered Owner & Driver (Driver is Not a Registered Owner)..... | 139 |
| 56. DL-17 Notice of Unsatisfied Judgement of \$750 or Less | 140 |
| 57. Government Claim Judicial Branch | |
| - Page 1 of 2 | 141 |
| - Page 2 of 2 | 142 |
| 58. Complaint about a California Judge, Court Commissioner or Referee | 143 |
| 59. Sheriff Instruction Sheets (These are NOT Court forms, provided by Sheriff) | |
| - Sheriff Instructions (Los Angeles) | 144 |
| - Sheriff Instructions (Sacramento) | 145 |
| 60. EJ-105 Application for Entry of Judgment on Sister-State Judgment: | |
| - Page 1 of 2 | 147 |
| - Page 2 of 2 | 148 |
| 61. EJ-110 Notice of Entry of Judgment on Sister-State Judgment: | |
| - Page 1 of 2 | 149 |
| - Page 2 of 2 | 150 |
| 62. EJ-150 Notice of Levy | |
| - Notice to Judgment Debtor | 151 |
| - Notice to Bank | 152 |
| 63. SER-001 Request for Sheriff to Serve Court Papers | |
| - Serving SC-100 to an Individual | 153 |
| - Serving SC-100 to a Corporation | 157 |
| - Bank Levy on Bank of America | 161 |
| - Bank Levy on Wells Fargo | 165 |
| 64. SER-001A Special Instructions for Writ and Levies-Attachment | |
| - Bank Levy on Bank of America | 169 |
| - Bank Levy on Wells Fargo | 172 |

Filing Fee:
\$0,000 - \$ 1,500 = \$30
Plaintiff (list names): \$1,500.01 - \$5,000 = \$50
\$5,000.01- \$12,500 = \$75
If you have filed more than 12 cases = \$100

- File with court then serve defendant
- Cannot be served by the plaintiff

Case Number:

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

Name: Jane Doe Phone: _____

Street address: 123 Main St 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: _____

Street address: 456 White Oak Ave Los Angeles 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 from me and never paid me back



Plaintiff (list names):

Case Number:

- 3 b. When did this happen? (Date): 01/13/2024
 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: 05/24/2024

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.)



Filing Fee:
\$0,000 - \$ 1,500 = \$30
Plaintiff (list names): \$1,500.01 - \$5,000 = \$50
\$5,000.01- \$12,500 = \$75
If you have filed more than 12 cases = \$100

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

| |
|--------------|
| Case Number: |
|--------------|

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

Name: Jane Doe Phone: _____
Street address: 123 Main St 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: _____
Street address: 456 White Oak Ave Los Angeles 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
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



Filing Fee:

- Attach SC-103 Fictitious Business Name

\$0,000 - \$ 1,500 = \$30

Plaintiff (list names): \$1,500.01 - \$5,000 = \$50

\$5,000.01- \$12,500 = \$75

If you have filed more than 12 cases = \$100

Case Number:

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

Name: Jane Doe DBA Acapulco Restaurant Phone:

Street address: 123 Main St 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:

Street address: 456 White Oak Ave Los Angeles 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



SC-103

Fictitious Business Name

Case Number:

Fill in Case Number

This form is attached to: Form SC-100 Form SC-120 Form SC-500

1 If you want to file a small claim and you are doing business under a fictitious name (“doing business as,” or “dba”) give the following information. (Nonprofits and exempt real estate investment trusts do not have to file this form.)

Business name of the person suing: Acapulco Restaurant

Business address (not a U.S. Postal Service P.O. Box): 123 Main Street, Los Angeles, CA 90012

Mailing address (if different): _____

2 The business listed in **1** does business as (check ONLY one):

an individual

a corporation

an association

a limited liability company

a partnership

other (specify): _____

You must follow the laws for fictitious business names. If you have not followed these laws, including filing a fictitious business name statement in your county and publishing this information in a local newspaper, the court can dismiss your case.

3 Name of county where you filed your Fictitious Business Name Statement (dba):

Los Angeles

4 Your Fictitious Business Name Statement number: 2019123456

5 Date your Fictitious Business Name Statement expires: 01/04/2025

6 I declare under penalty of perjury under the laws of the State of California that the information above is true and correct. **Only the owner, president, chief executive officer (CEO), or other qualified officer can sign this form.**

Date: 03/14/2024

Jane Doe, Business Owner

Type or print your name and title

Jane Doe

Sign your name



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

Filing Fee:
\$0,000 - \$ 1,500 = \$30
Plaintiff (list names): \$1,500.01 - \$5,000 = \$50
\$5,000.01- \$12,500 = \$75
If you have filed more than 12 cases = \$100

- Substituted 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: _____

Street address: 123 Main St 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 DBA John's Towing Service Phone: _____

Street address: 456 White Oak Ave Los Angeles 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



Filing Fee:
\$0,000 - \$ 1,500 = \$30
Plaintiff (list names): \$1,500.01 - \$5,000 = \$50
\$5,000.01- \$12,500 = \$75
If you have filed more than 12 cases = \$100

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

Case Number:

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

Name: Jane Doe Phone: _____

Street address: 123 Main St 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: Place to Go, Inc Phone: _____

Street address: 456 White Oak Ave Los Angeles 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 defendant for round trip tickets, but when the tickets arrived they were only one way tickets



Filing Fee:
\$0,000.00 - \$1,500.00 = \$30
Plaintiff (list names): \$1,500.01 - \$5,000.00 = \$50
\$5,000.01 - \$12,500.00 = \$75
If you have filed more than 12 cases = \$100

-Prior to filing SC-100 Plaintiff's Claim a State Claim for Damages must be filed

| |
|--------------|
| Case Number: |
|--------------|

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

Name: Jane Doe Phone: _____

Street address: 123 Main St 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, A Public Entity Phone: _____

Street address: 1300 I Street Sacramento CA 95814
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: 1300 I Street Sacramento CA 95814
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 California Highway Patrol



Filing Fee:
\$0,000.00 - \$ 1,500.00 = \$30
Plaintiff (list names): \$1,500.01 - \$5,000.00 = \$50
\$5,000.01 - \$12,500.00 = \$75
If you have filed more than 12 cases = \$100

- Prior to filing SC-100 Plaintiff's Claim
a County Claim for Damages must be filed

| |
|--------------|
| Case Number: |
|--------------|

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

Name: Jane Doe Phone: _____
Street address: 123 Main St 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, A Public Entity Phone: _____
Street address: 500 W Temple St., Room 383, Hall of Administration 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 Administration 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 Fee:

\$0,000.00 - \$ 1,500.00 = \$30

\$1,500.01 - \$5,000.00 = \$50

\$5,000.01 - \$12,500.00 = \$75

If you have filed more than 12 cases = \$100

- Prior to filing SC-100 Plaintiff's Claim a City Claim for Damages must be filed

Plaintiff (list names):

Case Number:

Empty box for Case Number

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

Name: Jane Doe Phone:

Street address: 123 Main St 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: City of Los Angeles, A Public Entity Phone:

Street address: 200 N Main St., Room 395 Los Angeles CA 90012

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: City Clerk Job title, if known: City Clerk

Address: 200 N Main St., Room 360 Los Angeles CA 90012

- 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

Empty lines for explanation



Suing a Public Entity: Name on Entity on SC-100 Plaintiff's Claim

| |
|--|
| <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 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: 1300 I Street, Sacramento, CA 95814</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, 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
Plaintiff (list names): \$1,500.01 - \$5,000.00 = \$50.00
\$5,000.01 - \$12,500 = \$75.00
If have filed more than 12 cases = \$100.00

-Sue Driver and Registered Owner
-Do not include Defendant's insurance agency,
Judge will dismiss agency from the case

Case Number:

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

Name: Jane Doe (Registered Owner) or (R/O) Phone: _____

Street address: 123 Main St 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 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: 123 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: 12/14/2024


Jane Doe
Type or print your name

Date: _____

Type or print your name



Sign your name



Sign your name

Filing Fees:
\$0.00 - \$1,500.00 = \$30.00
Plaintiff (list names): \$1,500.01 - \$5,000.00 = \$50.00
\$5,000.01 - \$12,500 = \$75.00
If have filed more than 12 cases = \$100.00

-Must be filed with CIV-010

Case Number:

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

Name: Jane Doe Phone: _____

Street address: 123 Main St 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, by and through his guardian ad litem Mike Jones 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
Plaintiff (list names): \$1,500.01 - \$5,000.00 = \$50.00
\$5,000.01 - \$12,500 = \$75.00
If have filed more than 12 cases = \$100.00

- You can personally serve one partner on behalf of the partnership

Case Number:

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

Name: Jane Doe Phone: _____

Street address: 123 Main St 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?

Defendant served the plaintiff burning hot tea which caused personal injury and resulted in the plaintiff losing time from work



Filing Fees:

\$0.00 - \$1,500.00 = \$30.00

- Add the party who you've been paying rent to

Plaintiff (list names): \$1,500.01 - \$5,000.00 = \$50.00

\$5,000.01 - \$12,500 = \$75.00

If have filed more than 12 cases = \$100.00

Case Number: _____

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

Name: Jane Doe Phone: _____

Street address: 123 Main St 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?
Defendant failed to return my security deposit



Filing Fees:

\$0.00 - \$1,500.00 = \$30.00

Plaintiff (list names): \$1,500.01 - \$5,000.00 = \$50.00

\$5,000.01 - \$12,500 = \$75.00

If have filed more than 12 cases = \$100.00

-Refer to your CC&R for HOA name

Case Number:

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

Name: Jane Doe Phone: _____

Street address: 123 Main St 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



Plaintiff (list names):

Filing Fee:
\$0,000.00 - \$1,500.00 = \$30
\$1,500.01 - \$5,000.00 = \$50
\$5,000.01 - \$12,500.00 = \$75
If you have filed more than 12 cases = \$100

Case Number:

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

Name: Jane Doe Phone:

Street address: 123 Main St 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, A Public Entity Phone:

Street address: 9821 Business 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 Business 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, A Corporation

Street address: 456 Rooftop Rd 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: Legal Zoom, 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: 05/14/2024

Jane Doe
Type or print your name

Date: _____

Type or print your name

Jane Doe
Sign your name

Sign your name

***Include both the Registrar
and Contractor on the Claim.**

Naming the Registrar as a Defendant

If the Contractor State License Board (CSLB) website says the Registrar holds a cash deposit in lieu of the license bond, you must name the Registrar as the defendant in your Small Claims lawsuit in order to be paid. As of January 2024, this amount can be up to \$12,500.00.

How to name the Registrar on the SC-100 Plaintiff's Claim

Registrar of The Contractor State Licensing Board, A Public Entity
9821 Business Park Drive
Sacramento, CA 95827

Serve as follows:

Name: Registrar

Job Title: Agent for Service

Address: 9821 Business Park Dr., Sacramento, CA 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 registrar also, then the plaintiff has two options:

- Complete a form SC-105 Request for Court Order and Answer to request that the judge add the registrar as a dependent/debtor on the judgement.

OR

- Open a new case listing the registrar as a dependent and ask the court to consolidate the judgement with the first judgement.

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

California Code of Civil Procedure § 116.221

Filing Fee:
\$0,000.00 - \$1,500.00 = \$30
\$1,500.01 - \$5,000.00 \$50
\$5,000.01 - \$12,500.00 = \$75
If you have filed more than 12 cases = \$100

- Attach CIV-010

Plaintiff (list names):

Case Number:

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

Name: Tom Jones, by and through his Guardian ad Litem, Amy Jones Phone: _____

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: 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 \$ 3,000. (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.

Plaintiff (list names):

Filing Fee:
 \$0,000.00 - \$1,500.00 = \$30
 \$1,500.01 - \$5,000.00 = \$50
 \$5,000.01 - \$12,500.00 = \$75
 If you have filed more than 12 cases = \$100

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

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: _____

Street address: 123 Main St 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: 1120 N Street Sacramento CA 95814
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
- _____
- _____
- _____
- _____
- _____

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.

Clerk stamps date here when form is filed.

Fill in court name and street address:

Superior Court of California, County of
 Fill in Court name and address
 Example:
 Superior Court of California,
 County of Los Angeles
 Stanley Mosk Courthouse
 111 N Hill St
 Los Angeles, CA 90012

Fill in case number and name:

Case Number:
 Fill in your Case Number

Case Name:
 Fill in your Case Name

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: _____

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 WIC Unemployment
- 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 \$856.67 for each extra person. |
|-------------|---------------|-------------|---------------|-------------|---------------|--|
| 1 | \$2,430.00 | 3 | \$4,143.34 | 5 | \$5,856.67 | |
| 2 | \$3,286.67 | 4 | \$5,000.00 | 6 | \$6,713.34 | |
| | | | | | | |

- 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: 04/20/2023
Joey Jonez

Print your name here

Joey Jonez
 Sign here

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.

Clerk stamps date here when form is filed.

Fill in court name and street address:

Superior Court of California, County of
 Fill Court name and address
 Example:
 Superior Court of California,
 County of Los Angeles
 Stanley Mosk Courthouse
 111 N Hill St
 Los Angeles, CA 90012

Fill in case number and name:

Case Number:
 Fill in your Case Number

Case Name:
 Fill in your 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 WIC Unemployment
- 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 \$856.67 for each extra person. |
|-------------|---------------|-------------|---------------|-------------|---------------|--|
| 1 | \$2,430.00 | 3 | \$4,143.34 | 5 | \$5,856.67 | |
| 2 | \$3,286.67 | 4 | \$5,000.00 | 6 | \$6,713.34 | |
| | | | | | | |

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: 04/20/2023
Joey Jones

Joey Jones
 Sign here

Print your name 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

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.

10 Your Money and Property

- a. Cash \$
b. All financial accounts (List bank name and amount):
(1) \$
(2) \$
(3) \$

Table for cars, boats, and other vehicles with columns: Make / Year, Fair Market Value, How Much You Still Owe. Rows 1-3.

Table for real estate with columns: Address, Fair Market Value, How Much You Still Owe. Rows 1-2.

Table for other personal property with columns: Describe, Fair Market Value, How Much You Still Owe. Rows 1-2.

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): \$

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.

Clerk stamps date here when form is filed.

Fill in court name and street address:

Superior Court of California, County of
 Fill in Court name and address
 Example:
 Superior Court of California,
 County of Los Angeles
 Stanley Mosk Courthouse
 111 N Hill St
 Los Angeles, CA 90012

Fill in case number and name:

Case Number:
 Fill in your Case Number

Case Name:
 Fill in your 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 WIC Unemployment
- 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 \$856.67 for each extra person. |
|-------------|---------------|-------------|---------------|-------------|---------------|--|
| 1 | \$2,430.00 | 3 | \$4,143.34 | 5 | \$5,856.67 | |
| 2 | \$3,286.67 | 4 | \$5,000.00 | 6 | \$6,713.34 | |
| | | | | | | |

- 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: 04/20/2023
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

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.

10 Your Money and Property

- a. Cash \$ 40
b. All financial accounts (List bank name and amount):
(1) Wells Fargo Bank \$ 50
(2) \$
(3) \$

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

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

Table for other personal property 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 \$ 1,00
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

Filing Fee:
\$0,000.00 - \$1,500.00 = \$30
\$1,500.01 - \$5,000.00 = \$50
\$5,000.01 - \$12,500.00 = \$75
If have filed more than 12 cases = \$100

- Should look similar to SC-100 Plaintiff's Claim and ORDER to Go to Small Claims Court except Q#3

Defendant (list names):

Case Number:

Fill in your Case Number

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: Stephanie Pierce Phone: _____

Street address: 987 W Temple St Los Angeles CA 90012
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. (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): 03/24/2024
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.



Defendant (list names):

Case Number:

Fill in your Case Number

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: 05/20/2024 Steven Pierce  Steven Pierce
Defendant types or prints name here Defendant signs here

Date: 05/20/2024 Stephanie Pierce  Stephanie Pierce
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

Plaintiff (list names): **Filing Fees:**
\$0,000.00 - \$1,500.00 = \$30
\$1,500.01 - \$5,000.00 = \$50
\$5,000.01 - No Limit = \$75

Case Number:

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

Name: Larry Landlord Phone: _____

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: _____

Street address: 450 E 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: Tawny Tenant Phone: _____

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

Mailing address (if different): _____
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 \$ 19,000.00 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 \$1,000, April 1st 2020 \$1,000, May 1st 2020 \$1,000, June 1st 2020 \$1,000, July 1st 2020 \$1,000, August 1st 2020 \$1,000, September 1st 2020 \$1,000, October 1st 2020 \$1,000, November 1st, 2020 \$1,000, December 1st 2020 \$1,000, January 1st 2021 \$1,000, February 1st 2021 \$1,000, March 1st 2021 \$1,000, April 1st 2020 \$1,000, May 1st 2021 \$1,000, June 1st 2021 \$1,000, July 1st 2021 \$1,000, August 1st 2021 \$1,000, September 1st 2021 \$1,000

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 \$3,000 Rental Assistance Program (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:

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. [X] 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 [X] 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. [X] 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 tenant owes

10 [X] 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: 11/01/2021 Larry Landlord

Plaintiff types or prints name here



Larry Landlord

Plaintiff signs here

Date: Second plaintiff types or prints name here

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.)



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: _____

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

Mailing address (if different): _____
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: **07/08/2024**

Larry Landlord

Type or print your name

Date: _____

Type or print your name

▶ **Larry Landlord**

Sign your name

▶ _____
Sign your name

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.

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 Court Name and Address

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

Fill in your case number and case name below:

Case Number: Fill in your Case Number Case Name: Fill in your Case Name

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 Business, LLC [] 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: 03/29/2024

Dana Strauss Type or print your name

Dana Strauss Sign your name

This form is attached to form SC-100, item 7. It tells the court that you are suing about a disagreement for \$6,250 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? \$ 4,250 2 You are (check one): Attorney Client

3 What did the arbitrator decide? (Check one): a. The attorney client has to pay the other party this amount: \$ 3,250 b. Neither party has to pay the other party anything.

4 Write the date your Notice of Award was mailed here: 03/01/2024 (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. 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? 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: 03/28/2024 Thomas Williams Type or print your name

T. Williams Sign your name



| | | |
|--|--|---|
| ATTORNEY OR PARTY WITHOUT ATTORNEY NAME: FIRM NAME: Ella Jones STREET ADDRESS: 456 Bird Lane CITY: Los Angeles TELEPHONE NO.: (213) 978-4444 EMAIL ADDRESS: ATTORNEY FOR (name): | STATE BAR NUMBER: STATE: CA ZIP CODE: 90012 FAX NO.: | FOR COURT USE ONLY -File with SC-100 Plaintiff's Claim and ORDER to Go to Small Claims Court or SC-120 Defendant's Claim and ORDER to go to Small Claims Court -Do not serve copy to other parties |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 N Hill St MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, 90012 BRANCH NAME: Stanley Mosk Courthouse | | |
| PLAINTIFF/PETITIONER: Mark Jones, by and through his guardian ad litem Ella Jones DEFENDANT/RESPONDENT: John Doe OTHER PARENT/PARTY: | | |
| APPLICATION FOR APPOINTMENT OF GUARDIAN AD LITEM—CIVIL AND FAMILY LAW <input type="checkbox"/> EX PARTE | | CASE NUMBER: Fill in your Case Number |
| <i>This form is for use in a civil or family law proceeding in which a party is a minor, a person who lacks legal capacity to make decisions, or a person for whom a conservator has been appointed. A person who seeks the appointment of a guardian ad litem in a proceeding under the Probate Code—other than a proceeding under Probate Code sections 3500–3613 for approval of a compromise, settlement, or disposition of judgment proceeds—should use form DE-350/GC-100. NOTE: A person may not act as a guardian ad litem unless the person is represented by an attorney, is an attorney, or, in an action under the Uniform Parentage Act (Family Code, §§ 7600–7730), is an adult relative of a minor party.</i> | | |

1. I (applicant's name): **Ella Jones**
 am (check all that apply):
 - 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. I am asking the court to appoint the following person as guardian ad litem (name, address, phone number, and email address):
Ella Jones
456 Bird Lane
Los Angeles, CA 90012
PH: (213) 978-4444
3. The guardian ad litem will represent the interest of (name, address, and, if applicable, phone number and email address):
Mark Jones
456 Bird Lane
Los Angeles, CA 90022
PH: (213) 979-3456
4. The person named in item 3 is a party and is (check all that apply):
 - a. a minor (date of birth): **11/08/2014**
 - b. a person who lacks legal capacity to make decisions (explain the basis for claiming lack of capacity):

Continued on Attachment 4b.

 - c. a person for whom a conservator has been appointed (provide the details of the appointment):

Continued on Attachment 4c.

| | |
|--|---|
| PLAINTIFF/PETITIONER: Mark Jones, by and through his guardian ad litem Ella Jones DEFENDANT/RESPONDENT: John Doe OTHER PARENT/PARTY: | CASE NUMBER: Fill in your Case Number |
|--|---|

5. The person named in item 3 is a minor and is (*check one*):
- a. a plaintiff or petitioner in this action and the summons has not been issued.
 - b. a defendant or respondent in this action. More than 10 days have passed since service of the summons, and no one has applied for the appointment of a guardian ad litem.
6. I am asking the court to appoint a guardian ad litem because the person named in item 3 (*check all that apply*):
- a. is a minor who is a party to an action under the Uniform Parentage Act (Family Code, §§ 7600–7730).
 - b. is a minor who is requesting or opposing a request for an injunction or restraining order described in Code of Civil Procedure sections 372(b)(1) and 374(a). (*If the minor is 12 years of age or older, check one of the following*):
 The minor does does not object to the appointment of the person named in item 2.
 I don't know whether the minor objects to the appointment of the person named in item 2.
 - c. has no guardian or conservator of the estate.
 - d. has a guardian or conservator of the estate, but the guardian or conservator is inadequate to represent the person's interest in this action or proceeding because (*explain*):

Continued on Attachment 6d.
 The guardian or conservator of the estate is (*name, address, telephone number, and email address*):

(*After filing this application, you must give notice and a copy of the application to the guardian or conservator above.*)

7. The proposed guardian ad litem is fully competent and qualified to understand and protect the rights of the person named in item 3.

 (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: **06/19/2024**

Ella Jones ▶ *Ella Jones*

(TYPE OR PRINT NAME) (SIGNATURE OF APPLICANT)

DISCLOSURES AND CONSENT TO ACT AS GUARDIAN AD LITEM

8. I have the following relationship with the person named in item 3 (*check one*):
- a. No relationship
 - b. A familial relationship (*specify*): **Mother**
 - c. An affiliate (nonfamilial) relationship (*specify*):
9. I am (*check one*):
- a. not aware of any actual or potential conflicts of interest that would or might arise from the appointment.
 - b. aware of the following actual or potential conflicts that would or might arise from the appointment (*describe the actual or potential conflicts of interest and explain why the proposed guardian should still be appointed*):

Continued on Attachment 9b.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. I consent to act as guardian ad litem in this action or proceeding. If I become aware that a potential conflict of interest has become an actual conflict, or that a new potential or actual conflict exists, I will promptly disclose the conflict of interest to the court.

Date: **06/19/2024**

Ella Jones ▶ *Ella Jones*

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

**APPLICATION FOR APPOINTMENT OF
 GUARDIAN AD LITEM—CIVIL AND FAMILY LAW**

For your protection and privacy, please press the Clear This Form button after you have printed the form.

Print this form
Save this form
Clear this form

| | | |
|---|--|---|
| ATTORNEY OR PARTY WITHOUT ATTORNEY NAME: FIRM NAME: Mark Jones STREET ADDRESS: 456 Bird Lane CITY: Los Angeles TELEPHONE NO.: (213) 978-4444 EMAIL ADDRESS: ATTORNEY FOR (name): | STATE BAR NUMBER: STATE: CA ZIP CODE: 90012 FAX NO.: | FOR COURT USE ONLY -File with SC-100 Plaintiff's Claim and ORDER to Go to Small Claims Court or SC-120 Defendant's Claim and ORDER to go to Small Claims Court -Do not serve copy to other parties |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 N Hill St MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, 90012 BRANCH NAME: Stanley Mosk Courthouse | | |
| PLAINTIFF/PETITIONER: Mark Jones, by and through his guardian ad litem Mia Jones DEFENDANT/RESPONDENT: John Doe OTHER PARENT/PARTY: | | |
| APPLICATION FOR APPOINTMENT OF GUARDIAN AD LITEM—CIVIL AND FAMILY LAW <input type="checkbox"/> EX PARTE | | CASE NUMBER: Fill in your Case Number |
| <p><i>This form is for use in a civil or family law proceeding in which a party is a minor, a person who lacks legal capacity to make decisions, or a person for whom a conservator has been appointed. A person who seeks the appointment of a guardian ad litem in a proceeding under the Probate Code—other than a proceeding under Probate Code sections 3500–3613 for approval of a compromise, settlement, or disposition of judgment proceeds—should use form DE-350/GC-100. NOTE: A person may not act as a guardian ad litem unless the person is represented by an attorney, is an attorney, or, in an action under the Uniform Parentage Act (Family Code, §§ 7600–7730), is an adult relative of a minor party.</i></p> | | |

1. I (applicant's name): **Mark Jones**
 am (check all that apply):
 - 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. I am asking the court to appoint the following person as guardian ad litem (name, address, phone number, and email address):
Mia Jones
456 Bird Lane
Los Angeles, CA 90012
PH: (213) 978-4444

3. The guardian ad litem will represent the interest of (name, address, and, if applicable, phone number and email address):
Mark Jones
456 Bird Lane
Los Angeles, CA 90012
PH: (213) 979-3456

4. The person named in item 3 is a party and is (check all that apply):
 - a. a minor (date of birth): **11/08/2014**
 - b. a person who lacks legal capacity to make decisions (explain the basis for claiming lack of capacity):

- Continued on Attachment 4b.
- c. a person for whom a conservator has been appointed (provide the details of the appointment):

*A minor of 14 years old and older must petition the court on their own behalf, the minor is the applicant

Continued on Attachment 4c.

| | |
|---|---|
| PLAINTIFF/PETITIONER: Mark Jones, by and through his guardian ad litem Mia Jones DEFENDANT/RESPONDENT: John Doe OTHER PARENT/PARTY: | CASE NUMBER: Fill in your Case Number |
|---|---|

5. The person named in item 3 is a minor and is (*check one*):
- a. a plaintiff or petitioner in this action and the summons has not been issued.
 - b. a defendant or respondent in this action. More than 10 days have passed since service of the summons, and no one has applied for the appointment of a guardian ad litem.
6. I am asking the court to appoint a guardian ad litem because the person named in item 3 (*check all that apply*):
- a. is a minor who is a party to an action under the Uniform Parentage Act (Family Code, §§ 7600–7730).
 - b. is a minor who is requesting or opposing a request for an injunction or restraining order described in Code of Civil Procedure sections 372(b)(1) and 374(a). (*If the minor is 12 years of age or older, check one of the following*):
 The minor does does not object to the appointment of the person named in item 2.
 I don't know whether the minor objects to the appointment of the person named in item 2.
 - c. has no guardian or conservator of the estate.
 - d. has a guardian or conservator of the estate, but the guardian or conservator is inadequate to represent the person's interest in this action or proceeding because (*explain*):

Continued on Attachment 6d.

The guardian or conservator of the estate is (*name, address, telephone number, and email address*):

(*After filing this application, you must give notice and a copy of the application to the guardian or conservator above.*)

7. The proposed guardian ad litem is fully competent and qualified to understand and protect the rights of the person named in item 3.

| | | |
|----------------------|---|-------------------------|
| (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: **06/19/2024**

| | | |
|----------------------|---|--------------------------|
| Mark Jones | ▶ | <i>Mark Jones</i> |
| (TYPE OR PRINT NAME) | | (SIGNATURE OF APPLICANT) |

DISCLOSURES AND CONSENT TO ACT AS GUARDIAN AD LITEM

8. I have the following relationship with the person named in item 3 (*check one*):
- a. No relationship
 - b. A familial relationship (*specify*): **Mother** *If the guardian is not a parent, submit a declaration to explain why a parent is not the guardian
 - c. An affiliate (nonfamilial) relationship (*specify*):
9. I am (*check one*):
- a. not aware of any actual or potential conflicts of interest that would or might arise from the appointment.
 - b. aware of the following actual or potential conflicts that would or might arise from the appointment (*describe the actual or potential conflicts of interest and explain why the proposed guardian should still be appointed*):

Continued on Attachment 9b.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. I consent to act as guardian ad litem in this action or proceeding. If I become aware that a potential conflict of interest has become an actual conflict, or that a new potential or actual conflict exists, I will promptly disclose the conflict of interest to the court.

Date: **06/19/2024**

| | | |
|----------------------|---|---|
| Mia Jones | ▶ | <i>Mia Jones</i> |
| (TYPE OR PRINT NAME) | | (SIGNATURE OF PROPOSED GUARDIAN AD LITEM) |

**APPLICATION FOR APPOINTMENT OF
GUARDIAN AD LITEM—CIVIL AND FAMILY LAW**

For your protection and privacy, please press the Clear This Form button after you have printed the form.

Print this form

Save this form

Clear this form

| | | |
|---|--|---|
| ATTORNEY OR PARTY WITHOUT ATTORNEY NAME: FIRM NAME: Mary Jones STREET ADDRESS: 456 Bird Lane CITY: Los Angeles TELEPHONE NO.: (213) 978-4444 EMAIL ADDRESS: ATTORNEY FOR (name): | STATE BAR NUMBER: STATE: CA ZIP CODE: 90012 FAX NO.: | FOR COURT USE ONLY -File with SC-100 Plaintiff's Claim and ORDER to Go to Small Claims Court or SC-120 Defendant's Claim and ORDER to go to Small Claims Court -Do not serve copy to other parties |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 N Hill St MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, 90012 BRANCH NAME: Stanley Mosk Courthouse | | |
| PLAINTIFF/PETITIONER: Susan Smith, by and through her guardian ad litem Mary Jones DEFENDANT/RESPONDENT: John Doe OTHER PARENT/PARTY: | | |
| APPLICATION FOR APPOINTMENT OF GUARDIAN AD LITEM—CIVIL AND FAMILY LAW <input type="checkbox"/> EX PARTE | | CASE NUMBER: Fill in your Case Number |
| <p><i>This form is for use in a civil or family law proceeding in which a party is a minor, a person who lacks legal capacity to make decisions, or a person for whom a conservator has been appointed. A person who seeks the appointment of a guardian ad litem in a proceeding under the Probate Code—other than a proceeding under Probate Code sections 3500–3613 for approval of a compromise, settlement, or disposition of judgment proceeds—should use form DE-350/GC-100. NOTE: A person may not act as a guardian ad litem unless the person is represented by an attorney, is an attorney, or, in an action under the Uniform Parentage Act (Family Code, §§ 7600–7730), is an adult relative of a minor party.</i></p> | | |

1. I (applicant's name): **Mary Jones**
 am (check all that apply):
 - 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. I am asking the court to appoint the following person as guardian ad litem (name, address, phone number, and email address):
Mary Jones
456 Bird Lane
Los Angeles, CA 90012
PH: (213) 978-4444
3. The guardian ad litem will represent the interest of (name, address, and, if applicable, phone number and email address):
Susan Smith
288 Forbes Ave
Los Angeles, CA 90008
PH: (213) 979-3456
4. The person named in item 3 is a party and is (check all that apply):
 - a. a minor (date of birth):
 - b. a person who lacks legal capacity to make decisions (explain the basis for claiming lack of capacity):

***has a impairment preventing them from making legal decisions**
 - Continued on Attachment 4b.
 - c. a person for whom a conservator has been appointed (provide the details of the appointment):

Continued on Attachment 4c.

| | |
|---|--|
| PLAINTIFF/PETITIONER: Susan Smith, by and through her guardian ad litem Mary Jones DEFENDANT/RESPONDENT: John Doe OTHER PARENT/PARTY: | CASE NUMBER: Fill in your Case Number |
|---|--|

5. The person named in item 3 is a minor and is (*check one*):
- a. a plaintiff or petitioner in this action and the summons has not been issued.
 - b. a defendant or respondent in this action. More than 10 days have passed since service of the summons, and no one has applied for the appointment of a guardian ad litem.
6. I am asking the court to appoint a guardian ad litem because the person named in item 3 (*check all that apply*):
- a. is a minor who is a party to an action under the Uniform Parentage Act (Family Code, §§ 7600–7730).
 - b. is a minor who is requesting or opposing a request for an injunction or restraining order described in Code of Civil Procedure sections 372(b)(1) and 374(a). (*If the minor is 12 years of age or older, check one of the following*):
 The minor does does not object to the appointment of the person named in item 2.
 I don't know whether the minor objects to the appointment of the person named in item 2.
 - c. has no guardian or conservator of the estate.
 - d. has a guardian or conservator of the estate, but the guardian or conservator is inadequate to represent the person's interest in this action or proceeding because (*explain*):

Continued on Attachment 6d.
 The guardian or conservator of the estate is (*name, address, telephone number, and email address*):

(After filing this application, you must give notice and a copy of the application to the guardian or conservator above.)

7. The proposed guardian ad litem is fully competent and qualified to understand and protect the rights of the person named in item 3.

| | | |
|----------------------|---|-------------------------|
| (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: 06/19/2024

| | | |
|----------------------|---|--------------------------|
| Mary Jones | ▶ | Mary Jones |
| (TYPE OR PRINT NAME) | | (SIGNATURE OF APPLICANT) |

DISCLOSURES AND CONSENT TO ACT AS GUARDIAN AD LITEM

8. I have the following relationship with the person named in item 3 (*check one*):
- a. No relationship
 - b. A familial relationship (*specify*): Daughter
 - c. An affiliate (nonfamilial) relationship (*specify*):
9. I am (*check one*):
- a. not aware of any actual or potential conflicts of interest that would or might arise from the appointment.
 - b. aware of the following actual or potential conflicts that would or might arise from the appointment (*describe the actual or potential conflicts of interest and explain why the proposed guardian should still be appointed*):

Continued on Attachment 9b.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. I consent to act as guardian ad litem in this action or proceeding. If I become aware that a potential conflict of interest has become an actual conflict, or that a new potential or actual conflict exists, I will promptly disclose the conflict of interest to the court.

Date: 06/19/2024

| | | |
|----------------------|---|---|
| Mary Jones | ▶ | Mary Jones |
| (TYPE OR PRINT NAME) | | (SIGNATURE OF PROPOSED GUARDIAN AD LITEM) |

**APPLICATION FOR APPOINTMENT OF
 GUARDIAN AD LITEM—CIVIL AND FAMILY LAW**

For your protection and privacy, please press the Clear This Form button after you have printed the form.

Print this form

Save this form

Clear this form

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.

- Submit request at least 5 days before hearing

or

- Contact the court's ADA coordinator

Court Name and Address:

Fill in Court Name and Address

Example:

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

Case Number (if you know it):

Fill in Case Number

Case Name/Type (if you know it):

Fill in your Case Name

1 Your information

Name: Jessica Garcia

Address: 123 Main Street

Los Angeles, CA 90012

Phone: (213) 555-5555

Email: j.garcia@email.com

2 How are you involved in the case?

Juror Party Witness Lawyer

Other (explain):

3 When and where do you need the accommodation? [date(s), time(s), and court location]

12/01/2023, 10:30AM, Stanley Mosk Courthouse, 111 N Hill St, 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: 10/01/2023

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 -Attach copy of Civil Complaint |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES | |
| COURTHOUSE ADDRESS: 111 N Hill St Los Angeles, CA 90012 | |
| PLAINTIFF: Patty Pali DEFENDANT: David Davis | |
| APPLICATION AND ORDER FOR TRANSFER (SMALL CLAIMS) | CASE NUMBER: Fill in your Case Number |

TO THE CLERK OF THE ABOVE-NAMED COURT:

| | | | |
|--|---------------------|--|---|
| The small claims case is currently set as follows: | | | |
| Date: 03/14/2023 | Time: 8:30AM | <input checked="" type="checkbox"/> a.m. <input type="checkbox"/> p.m. | Department: D90 Room: 420 |

- Defendant(s): **David Davis** 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: **Fill in your Civil Case Number (not Small Claims)**
Date of Filing: **02/04/2023**
- 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.

02/04/2023 **David Davis** *David 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

Clerk stamps date here when form is filed.

-Form must be completed by server

-Must be filed at least 5 days before the hearing

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

Fill in court name and street address:

Superior Court of California, County of

Fill in Court Name and Address:

Example:

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:

Fill in your Case Number

Case Name:

Fill in your Case Name

Hearing Date: Fill in your Court Date

Time: Fill in Time and

Dept.: Dept Room

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): *Notice of Online Dispute Resolution (ODR) Program - Small Claim;*
Notice of Remote Appearances and Exchange and Submission of Evidence Protocol

Case name: Fill in your Case Name

Case Number:
Fill in your 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): 02/20/2024 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 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: 02/23/2024

Jack Shelton
Type or print server's name

Jack Shelton
Server signs here after serving

Clerk stamps date here when form is filed.

-Form must be completed by server**-Must be filed at least 5 days before the hearing****-Must be Substituted Service
*25 days (in county)
*30 days (out of county)**

Fill in court name and street address:

Superior Court of California, County of

Fill in Court Name and Address:

Example:

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:

Fill in your Case Number

Case Name:

Fill in your Case Name

Hearing Date: Fill in your Court Date**Time:** Fill in Time and**Dept.:** Dept Room

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, A 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*): **Notice of Online Dispute Resolution (ODR) Program; Notice of Remote Appearance**

Case name: Fill in your Case Name

Case Number:
Fill in your 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): 02/20/2024 At (time): 10:00 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, Agent for Service of Process

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): 02/20/2024 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 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: 02/23/2024

Jack Shelton
Type or print server's name

Jack Shelton
Server signs here after serving

Clerk stamps date here when form is filed.

-Form must be completed by server

-Must be filed at least 5 days before the hearing

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

Fill in court name and street address:

Superior Court of California, County of

Fill in Court Name and Address:

Example:

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:

Fill in your Case Number

Case Name:

Fill in your Case Name

Hearing Date: Fill in your Court Date

Time: Fill in Time and

Dept.: Dept Room

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*): **Notice of Online Dispute Resolution (ODR) Program - Small Claim;**
Notice of Remote Appearances and Exchange and Submission of Evidence Protocol

Case name: Fill in your Case Name

Case Number:
Fill in your 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): 02/20/2024 At (time): 10:00 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): 02/20/2024 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 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: 02/23/2024

Jack Shelton
Type or print server's name

Jack Shelton
Server signs here after serving

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 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 |
|----------------------|---|
| <u>David Jones</u> | <u>456 Bird Avenue, Los Angeles, CA 90012</u> |
| | |
| | |
| | |
| | |

c. On (date of mailing): 11/20/2023, 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: 11/21/2023

Lily Bailey
Type or print server's name


Server signs here

| | | |
|---|--|---|
| ATTORNEY OR PARTY WITHOUT ATTORNEY NAME: Noel Jones FIRM NAME: STREET ADDRESS: 456 Goodland Avenue 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 -File prior to hearing -Can only be filed by party initiating the claim |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 N Hill St MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, 90012 BRANCH NAME: Stanley Mosk Courthouse | | |
| PLAINTIFF/PETITIONER: Noel Jones DEFENDANT/RESPONDENT: Sarah Smith | | |
| REQUEST FOR DISMISSAL | | CASE NUMBER: Fill in your Case Number |
| 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):* **Plaintiff is dismissing the Small Claims Plaintiff's claim**

#6Tip - If Defendant is requesting dismissal replace Plaintiff's with Defendant's

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: 04/20/2024

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

Noel Jones
 (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

- 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: Fill in your Case Number |
|---|---|

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): **Noel Jones**
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: 04/20/2024
Noel Jones

(TYPE OR PRINT NAME OF ATTORNEY PARTY MAKING DECLARATION)



(SIGNATURE)

SC-150

Request to Postpone Trial

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
Fill in Court Name and Address
Example:
Superior Court of California,
County of Los Angeles
Stanley Mosk Courthouse
111 N Hill St
Los Angeles, CA 90012

Fill in your case number and case name:
Case Number:
Fill in your Case Number
Case Name:
Fill in your Case Name

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): 01/15/2023

③ I ask the court to postpone my trial until (approximate date):
02/14/2023

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 date

c. No. The parties listed below have not been served (list names):

(1) John Jamon (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: 06/06/2024

Pat Waters

Type or print your name

Pat Waters

Sign here

SC-150

Request to Postpone Trial

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

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 [X] defendant in this case.

2 My trial is now scheduled for (date): 01/15/2023

3 I ask the court to postpone my trial until (approximate date): 02/14/2023

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

Fill in the court name and street address:

Superior Court of California, County of
Fill in Court Name and Address
Example:
Superior Court of California,
County of Los Angeles
Stanley Mosk Courthouse
111 N Hill St
Los Angeles, CA 90012

Fill in your case number and case name:

Case Number:
Fill in your Case Number
Case Name:
Fill in your Case Name

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. [X] No. I am a defendant and have not filed a claim in this case.
b. [] Yes. The parties listed below have been served:
(1) name, who lives in: county, was served on: date
(2) name, who lives in: county, was served on: date
c. [] 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: 06/06/2024

Pat Waters

Type or print your name

Pat Waters

Sign here

| | |
|---|---|
| <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 Los Angeles</p> <p>STREET ADDRESS:</p> <p>MAILING ADDRESS: 111 N Hill St</p> <p>CITY AND ZIP CODE: Los Angeles, CA 90012</p> <p>BRANCH NAME: Stanley Mosk Courthouse</p> | |
| <p>PLAINTIFF/PETITIONER: Peter Pique</p> <p>DEFENDANT/RESPONDENT: Dina Donna</p> | |
| <p style="text-align: center;">DECLARATION</p> | <p>CASE NUMBER: Fill in your Case Number</p> |

Melissa Messi writes her witness statement in this area

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

Date: 01/21/2023

Melissa Messi
(TYPE OR PRINT NAME)

Melissa Messi
(SIGNATURE OF DECLARANT)

- Attorney for
- Plaintiff
- Petitioner
- Defendant
- Respondent
- Other (Specify): **Witness**

| | |
|--|--|
| <p>ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):</p> <p>Susan Jones 456 Bird Lane Los Angeles, CA 90004</p> <p>TELEPHONE NO.: (213) 555-4444 FAX NO. (Optional):</p> <p>E-MAIL ADDRESS (Optional):</p> <p>ATTORNEY FOR (Name):</p> | <p style="text-align: center;">FOR COURT USE ONLY</p> <p>- Cannot be filed on behalf of other party</p> <p>- A copy must first be served onto the other parties, by someone, who also fill outs page 2</p> <p>-Then file with the court</p> |
| <p>SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles</p> <p>STREET ADDRESS:</p> <p>MAILING ADDRESS: 111 N Hill St</p> <p>CITY AND ZIP CODE: Los Angeles, CA 90012</p> <p>BRANCH NAME: Stanley Mosk Courthouse</p> | |
| <p>PLAINTIFF/PETITIONER: Susan Jones</p> <p>DEFENDANT/RESPONDENT: John Doe</p> | <p>CASE NUMBER: Fill in your Case Number</p> <p>JUDICIAL OFFICER:</p> |
| <p style="text-align: center;">NOTICE OF CHANGE OF ADDRESS OR OTHER CONTACT INFORMATION</p> | <p>DEPT.:</p> |

1. Please take notice that, as of (date): **03/01/2024**

- 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: **04/04/2024**

Susan Jones
 (TYPE OR PRINT NAME)



Susan Jones
 (SIGNATURE OF PARTY OR ATTORNEY)

| | |
|---|---|
| PLAINTIFF/PETITIONER: Susan Jones DEFENDANT/RESPONDENT: John Doe | CASE NUMBER: Fill in your Case Number |
|---|---|

**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 Ave
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*): **04/03/2024**
 - 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: Studio City 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: **04/03/2024**

Gail Strauss

(TYPE OR PRINT NAME OF DECLARANT)

Gail 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 |
| ATTORNEY FOR (Name): SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES | | - File if litigant believes the judge was biased against them |
| 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: Fill in your Case Number |

| | |
|--|----------------------------|
| 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: 09/03/2023

Sarah Patts
Signature of Declarant

Sarah Patts
Printed Name

Date

Rank and Full Name
Street Address
City, State and Zip Code

Honorable Judge's Name
Street Address
City, State and Zip Code

RE: Request for Stay of Proceedings
Docket/Case No.: XXXXXXXXXXXX

Dear Honorable Judge's Name:

Pursuant to the Servicemembers' civil Relief ("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

| | |
|--|--|
| ATTORNEY OR PARTY WITHOUT ATTORNEY NAME: Joey Jones FIRM NAME: STREET ADDRESS: 112 Kingsley Drive CITY: Los Angeles TELEPHONE NO.: E-MAIL ADDRESS: ATTORNEY FOR (name): | STATE BAR NUMBER: FOR COURT USE ONLY - Include VL-115 CASE NUMBER: Fill in your Case Number |
| <input type="checkbox"/> COURT OF APPEAL, APPELLATE DISTRICT, DIVISION <input checked="" type="checkbox"/> 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 Courthouse | |
| PLAINTIFF/PETITIONER: Joey Jones DEFENDANT/RESPONDENT: John Smith, Trustee, of the John Smith Trust OTHER: | |
| REQUEST TO FILE NEW LITIGATION BY VEXATIOUS LITIGANT | |
| Type of case: <input type="checkbox"/> Limited Civil <input type="checkbox"/> Unlimited Civil <input checked="" type="checkbox"/> Small Claims <input type="checkbox"/> Family Law <input type="checkbox"/> Probate <input type="checkbox"/> Other | |

- 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.
- 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 Small Claims Court

- 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 until the time I vacated the property. I believe my landlord is keeping my deposit in bad faith.

- 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: **01/24/2024**

Joey Jones

(TYPE OR PRINT NAME)

Joey Jones

(SIGNATURE)

Clerk stamps date here when form is filed.
Must be filed within 30 days of Notice of Entry of Judgment being mailed

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.

Fill in court name and street address:

Superior Court of California, County of
Fill in Court Name and Address
Example:
Superior Court of California,
County of Los Angeles
Stanley Mosk Courthouse
111 N Hill St
Los Angeles, CA 90012

Fill in your case number and case name below:

Case Number:
Fill in your Case Number
Case Name:
Fill in your Case Name

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
 A plaintiff in this case

② Notice to:

(List names and addresses of all other defendants and plaintiffs in your case.)

| Name | Address |
|-----------------------|--|
| a. <u>Bryan Smith</u> | <u>878 Vanowen Street, Studio City, CA 91604</u> |
| b. <u>Susan Jones</u> | <u>123 Bird Lane, Los Angeles, CA 90018</u> |
| c. _____ | _____ |
| d. _____ | _____ |

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: 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: 04/16/2024

Mary Hopkins
Type or print your name


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
Fill in your Court name and address
Example:
Superior Court of California,
County of Los Angeles
Stanley Mosk Courthouse
111 N Hill St
Los Angeles, CA 90012

6 The person filing this answer is:

Name: Bryan Smith

Address: 878 Vanowen Steet, 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.

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):

Case Number:
Fill in your Case Number
Case Name:
Fill in your Case Name

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): 04/22/2023

9 I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 04/22/2023

Bryan Smith

Type or print your name

Bryan Smith

Sign your name

The clerk fills out below.

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

— 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

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.

Clerk stamps date here when form is filed.
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 Court Name and Address
Example:
Superior Court of California,
County of Los Angeles
Stanley Mosk Courthouse
111 N Hill St
Los Angeles, CA 90012

Fill in your case number and case name below:

Case Number:
Fill in your Case Number
Case Name:
Fill in your Case Name

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.)

| Name | Address |
|------------------------|--|
| a. <u>Harry Waters</u> | <u>123 Bird Lane, Studio City, CA 91604</u> |
| b. <u>Sarah Watts</u> | <u>678 Java Drive, Los Angeles, CA 90017</u> |
| c. _____ | _____ |
| d. _____ | _____ |

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. 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 \$1,500 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 \$2,000 plus damages of \$1,500. Total judgment \$3,500.

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: 04/16/2023

Jones Bradley
Type or print your name

Jones Bradley
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
Fill in your Court name and address
Example:
Superior Court of California,
County of Los Angeles
Stanley Mosk Courthouse
111 N Hill St
Los Angeles, CA 90012

Fill in your case number and case name below.

Case Number:
Fill in your Case Number
Case Name:
Fill in your Case Name

6 The person filing this answer is:

Name: Bryan Smith

Address: 878 Vanowen Steet, 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): 04/22/2023

9 I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 04/22/2023

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

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

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 Shmoe

Address: 123 Bird Lane, Los Angeles, CA 90000

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.)

| Name | Address |
|--------------------|--|
| a. <u>Jane Doe</u> | <u>234 Any St. Los Angeles, CA 90000</u> |
| 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 evidenc. 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 Departmen, 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: 01/01/2023

Joe Shmoe

 Type or print your name

Joe Shmoe

 Sign your name

- 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.

Fill in court name and street address:

Superior Court of California, County of
Fill in Court Name and Address
 Example:
 Superior Court of California,
 County of Los Angeles
 Stanley Mosk Courthouse
 111 N Hill St
 Los Angeles, CA 90012

Fill in your case number and case name below.

Case Number:
 Fill in your Case Number

Case Name:
 Fill in your Case Name

⑦ The person filing this answer is:

Name: Jane Doe

Address: 234 Any St. Los Angeles, CA 90000

Check one: 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. 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): 01/25/2023

⑩ I declare under penalty of perjury under California state law that the information above and on all attachments is true and correct.

Date: 01/26/2023

Jane Doe
Type or print your name

Jane Doe
Sign your name

If the request on page 1 was made after the hearing, the clerk fills out below.

— Clerk's Certificate of Mailing —

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

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

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

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

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 Shmoe
Address: 123 Bird Lane, Los Angeles, CA 90000

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.)

Table with 2 columns: Name, Address. Row 1: Jane Doe, 234 Any St. Los Angeles, CA 90000

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: 01/01/2023
Joe Shmoe

Joe Shmoe
Sign your name

Type or print 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

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 Shmoe

Address: 123 Bird Lane, Los Angeles, CA 90000

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.)

| Name | Address |
|--------------------|--|
| a. <u>Jane Doe</u> | <u>234 Any St. Los Angeles, CA 90000</u> |
| 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: 01/01/2023

Joe Shmoe

 Type or print your name

Joe Shmoe

 Sign your name

Clerk stamps date here when form is filed. - No fee, can be filed at any time... - While case is pending litigant must send copy to other party

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. 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.

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):

2 Notice to: (List names and addresses of all other defendants and plaintiffs in your case.)

Table with 2 columns: Name, Address. Row 1: Susan Burke, 987 Woodman Street, Los Angeles, CA 90011

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: 01/01/2023

Paul Jones Type or print your name

Paul Jones Sign your name

Clerk stamps date here when form is filed. - No fee, can be filed at any time... - While case is pending litigant must send copy to other party

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. 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.

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.)

Table with 2 columns: Name, Address. Row 1: Top Construction, 4753 W Avenue K 8., Lancaster, CA 93536

[] 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: 01/01/2023 Paul Jones

Paul Jones Sign your name

Type or print 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

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 A plaintiff in this case
 Other (explain): _____

② Notice to: (List names and addresses of all other defendants and plaintiffs in your case.)

Name

Address

a. Tim Allen DBA Tim's Furniture 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 owed 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: 01/01/2023

Paul Jones

Type or print your name


 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

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: Mary Jones
Address: 789 Walnut St., Downey, CA 90242
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 Court Name and Address Example: Superior Court of California, County of Los Angeles Stanley Mosk Courthouse 111 N Hill St Los Angeles, CA 90012

Fill in your case number and case name below: Case Number: Fill in your Case Number Case Name: Fill in your Case Name

2 Notice to: (List names and addresses of all other defendants and plaintiffs in your case.)

Table with 2 columns: Name, Address. Row 1: Brian Parker, 456 Valley St., Los Angeles, CA 90048

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., Los Angeles, CA 90012 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: 01/01/2023
Mary Jones

Mary Jones
Sign your name

Type or print 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

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: Park Chiropractic DBA Yun Chiropractic

Address: 200 Wilshire Blvd #20., Los Angeles, CA 90010

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.)

| Name | Address |
|--------------------|---|
| a. <u>Anna Kim</u> | <u>49 Oaktree Lane, Rolling Hills, CA 90274</u> |
| 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, this request is necessary in order to collect 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: 01/01/2023

Yun Park

 Type or print your name



 Sign your name

Clerk stamps date here when form is filed. - No fee, can be filed at any time... - While case is pending litigant must send copy to other party

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. 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.

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: 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.)

Table with 2 columns: Name, Address. Row 1: Jane Doe, 5432 Second Street, Los Angeles, CA 90003

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 judgment 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 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: 01/01/2024

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
If before or after trial, court will notify other party

- While case is pending litigant must send copy to other party

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 A plaintiff in this case
 Other (explain): _____

② Notice to: (List names and addresses of all other defendants and plaintiffs in your case.)

| Name | Address |
|--|--|
| a. <u>Sam Smith</u> | <u>3354 South St., Los Angeles, CA 90000</u> |
| b. <u>Mary Smith</u> | <u>3354 South St., Los Angeles, CA 90000</u> |
| c. <u>A spouse must be noticed even if they are not a party in this case, in order to garnish their wages.</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):

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: 01/01/2024

John Doe
Type or print your name

John Doe
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 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.)

| Name | Address |
|-----------------------|---|
| a. <u>Corporation</u> | <u>000 Wilshire Blvd Suite 100, Los Angeles, CA 90001</u> |
| b. <u>LLC</u> | <u>000 Wilshire Blvd Suite 100, Los Angeles, CA 90001</u> |
| c. <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 the 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: 01/20/2024

John Smith

John Smith

Type or print your name

Sign your name

Fill in court name and street address:

Superior Court of California, County of
Fill in your Court name and address,
Example:
Superior Court of California,
County of Los Angeles
Stanley Mosk Courthouse
111 N Hill St
Los Angeles, CA 90012

Fill in your case number and case name below:

Case Number:
Fill in your Case Number

Case Name:
Fill in your Case 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

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.

Fill in court name and street address:

Superior Court of California, County of
 Fill in Court Name and Address
 Example:
 Superior Court of California,
 County of Los Angeles
 Stanley Mosk Courthouse
 111 N Hill St
 Los Angeles, CA 90012

Fill in your case number and case name below:

Case Number:
 Fill in your Case Number

Case Name:
 Fill in your Case Name

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.)

| Name | Address |
|-------------------------|--|
| a. <u>William Jones</u> | <u>654 Victory Avenue, Los Angeles, CA 90017</u> |
| 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: 01/20/2024

Jane Smith

 Type or print your name

Jane Smith

 Sign your name

- Must be filed within 30 days after judgment

- \$75 filing fee

Name and Address of Court:

Fill in Court Name and Address

Example: Superior Court of California, County of Los Angeles

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

SMALL CLAIMS CASE NO.: Fill in your Case Number

PLAINTIFF/DEMANDANTE (Name, address, and telephone number of each):

DEFENDANT/DEMANDADO (Name, address, and telephone number of each):

Gabriela Syed
123 South Main St
Los Angeles, CA 90012

Jackson Pena
456 West Plaza St
Los Angeles, CA 90012

Telephone No.:

Telephone No.:

Telephone No.:

Telephone No.:

See attached sheet for additional plaintiffs and defendants.

NOTICE OF FILING NOTICE OF APPEAL

TO: [X] 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.
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.

Date: Clerk, by _____, Deputy

NOTICE OF APPEAL

I appeal to the superior court, as provided by law, from

[X] 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

- 1. I am not a party to this action.
2. 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.
3. The mailing and this certification occurred

at (place): _____, California,
on (date): _____ Clerk, by _____, Deputy

- Can be filed by either Plaintiff or Defendant within 30 days of judgment
- Defendant can file within 180 days of discovery (on defective service)
- \$20 filing fee

Name and Address of Court:

Fill in Court Name and Address

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

SMALL CLAIMS CASE NO.: Fill in your Case Number

| | |
|--|--|
| PLAINTIFF/DEMANDANTE (Name, street address, and telephone number of each): Peter Smith 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.: |
| Paul Jenkins 111 Main St Anytown, CA 90011 Telephone No.: (213) 111-1234 | 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)

| | |
|--|---|
| <p>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.</p> | <p><i>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.</i></p> |
|--|---|

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

| HEARING DATE FECHA DEL JUICIO | | DATE | DAY | TIME | PLACE | COURT USE |
|----------------------------------|---|------|-----|------|-------|-----------|
| 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): 01/01/2024
4. I first learned of the entry of judgment against me on (date): 05/10/2024
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): I was never served or made aware of the lawsuit
 - 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: 05/31/2024

David Dean

(TYPE OR PRINT NAME)



David Dean

(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 –

For your protection and privacy, please press the Clear This Form button after you have printed the form.

| | | |
|------------------------|-----------------------|------------------------|
| Print this form | Save this form | Clear this form |
|------------------------|-----------------------|------------------------|

| | |
|---|---|
| ATTORNEY OR PARTY WITHOUT ATTORNEY: 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.: EMAIL ADDRESS: ATTORNEY FOR (name): | FOR COURT USE ONLY -Must wait 30 days from the date final judgment was mailed to file -Personal service by Sheriff or Process Server -Filing fee \$60 -Must served at least 30 days before court hearing -Alternative form SC-134 |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 N Hill St MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, 90012 BRANCH NAME: Stanley Mosk Courthouse | |
| PLAINTIFF/PETITIONER: Jane Doe DEFENDANT/RESPONDENT: 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 or <input type="checkbox"/> Third Person | CASE NUMBER: Fill in your Case Number |

ORDER TO APPEAR FOR EXAMINATION

1. TO (name): **Mike Jones**
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 30 days before the date set for the examination.
IMPORTANT NOTICES ON PAGES 2 AND 3

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: **04/20/2024**

Jane Doe

 (TYPE OR PRINT NAME)

Jane Doe

 (SIGNATURE OF DECLARANT)

(Continued on pages 2 and 3)

| | | |
|---|---|---|
| ATTORNEY OR PARTY WITHOUT ATTORNEY: NAME: Jane Doe FIRM NAME: STREET ADDRESS: 123 Main St CITY: Los Angeles TELEPHONE NO.: EMAIL 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 the judgment was awarded |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 N Hill St MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, 90012 BRANCH NAME: Stanley Mosk Courthouse | | - Personal Service by Sheriff or Process Server - Filing Fee \$60 |
| PLAINTIFF/PETITIONER: Jane Doe DEFENDANT/RESPONDENT: Mike Jones | | - Include LASC LACIV 057 |
| 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 or <input checked="" type="checkbox"/> Third Person | | CASE NUMBER: Fill in your Case Number |

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 30 days before the date set for the examination.
IMPORTANT NOTICES ON PAGES 2 AND 3

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): **Andrew Lee** 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: **04/20/2024**

Jane Doe

 (TYPE OR PRINT NAME)

Jane Doe

 (SIGNATURE OF DECLARANT)

(Continued on pages 2 and 3)

| | | |
|---|------------------|---|
| NAME, ADDRESS, AND TELEPHONE NUMBER OF ATTORNEY OR PARTY WITHOUT ATTORNEY: Ani Chong 123 Main Street Van Nuys, CA 91401 | STATE BAR NUMBER | <i>Reserved for Clerk's File Stamp</i> Attach form with EJ-125 Application and Order for Appearance and Examination |
| ATTORNEY FOR (Name): SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES | | |
| COURTHOUSE ADDRESS: 111 N Hill St., Los Angeles CA, 90012 | | |
| PLAINTIFF: Ani Chong | | |
| DEFENDANT: Mike Jones | | |
| AFFIDAVIT FOR ORDER FOR APPEARANCE AND EXAMINATION OF A THIRD PERSON | | CASE NUMBER: Fill in your Case Number |

I, Ani Chong the undersigned, am the judgment creditor in the above entitled action and declare that judgment was entered on 05/03/2023 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:

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 08/22/2023 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: 08/22/2023

Ani Chong
Signature of Affiant

Fill in your Court Name and Address Example:
Superior Court of California, County of Los Angeles
Stanley Mosk Courthouse 111 N Hill St., Los Angeles, CA 90012

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 \$60
- Must be served at least 30 days before hearing date

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...
b. to
(1) personally appear in this court...
(2) bring with you a completed Judgment Debtor's Statement of Assets...
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...

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...
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: 07/08/2024
Jane Doe
(TYPE OR PRINT NAME)

Jane Doe
(DECLARANT)

- The county provides small claims advisor services free of charge -

NAME AND ADDRESS OF COURT:

Fill in your Court Name and Address Example:
Superior Court of California, County of Los Angeles
Stanley Mosk Courthouse 111 N Hill St., Los Angeles, CA 90012

SMALL CLAIMS CASE NO.: Fill in your Case Number

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
- Personal Service by a Sheriff or Process Server

- Must wait 30 days from the date the judgment was mailed

- Filing Fee \$60

- Must be served at least 30 days before hearing date

ORDER TO PRODUCE STATEMENT OF ASSETS AND TO APPEAR FOR EXAMINATION

- 1. TO JUDGMENT DEBTOR (name): John Smith, President, Places to Go, Inc.
 - 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): Places to Go, Inc. 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: 07/08/2024
Jane Doe
(TYPE OR PRINT NAME)


(DECLARANT)

- The county provides small claims advisor services free of charge -

NAME AND ADDRESS OF COURT:

Fill in your Court Name and Address
Example: Superior Court of California, County of Los Angeles
Stanley Mosk Courthouse 111 N Hill St., Los Angeles, CA 90012

SMALL CLAIMS CASE NO.: Fill in your Case Number

PLAINTIFF/DEMANDANTE (Name, address, and telephone number of each):

DEFENDANT/DEMANDADO (Name, address, and telephone number of each):

Paul Jones
456 Goodland Avenue
Los Angeles, CA 90012

Susan Burke
987 Woodman Street
Los Angeles, CA 90044

Telephone No.: (213) 876-5555

Telephone No.: (213) 767-9999

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):

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.

Form box containing: a. Date: 05/20/2023 Time: 1:30 PM Dept.: Div.: Room: b. Address: 111 N Hill St, 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)

| | |
|---|---|
| Plaintiff/Petitioner: Paul Jones Defendant/Respondent: Susan Burke | CASE NUMBER: Fill in your Case Number |
|---|---|

**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):

 - b. 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: **05/05/2023**

Paul Jones
 (TYPE OR PRINT NAME)



Paul Jones
 (SIGNATURE OF PARTY)

(See proof of service on page three)

| | |
|---|---|
| Plaintiff/Petitioner: Paul Jones Defendant/Respondent: Susan Burke | CASE NUMBER: Fill in your Case Number |
|---|---|

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: **05/07/2023**
- d. Time of delivery: **11:00 AM**
- 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.

Date: **05/07/2023**

(For California sheriff, marshal, or constable use only)
I certify that the foregoing is true and correct.

Date:



 (SIGNATURE)



 (SIGNATURE)

For your protection and privacy, please press the Clear This Form button after you have printed the form.

Print this form

Save this form

Clear this form

NAME AND ADDRESS OF COURT:

Fill in your Court Name and Address
Example: Superior Court of California, County of Los Angeles
Stanley Mosk Courthouse 111 N Hill St., Los Angeles, CA 90012

SMALL CLAIMS CASE NO.: Fill in your Case Number

PLAINTIFF/DEMANDANTE (Name, address, and telephone number of each):

DEFENDANT/DEMANDADO (Name, address, and telephone number of each):

Paul Jones
456 Goodland Avenue
Los Angeles, CA 90012

Joseph Smith Individually and DBA Joe's Auto Repair
987 Woodman Street
Los Angeles, CA 90044

Telephone No.: (213) 876-5555

Telephone No.: (213) 767-9999

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.

Form box containing: a. Date: 05/20/2023 Time: 1:30 PM Dept.: Div.: Room: b. Address: 111 N Hill St, 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)

| | |
|---|---|
| Plaintiff/Petitioner: Paul Jones Defendant/Respondent: Joseph Smith Individually and DBA Joe's Auto Repair | CASE NUMBER: Fill in your Case Number |
|---|---|

**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 things to be produced by the witness):
Records for complaint number SE2010987456. Date closed 04/02/2023.**

- 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: **04/27/2023**

Paul Jones
(TYPE OR PRINT NAME)



Paul Jones
(SIGNATURE OF PARTY)

(See proof of service on page three)

| | |
|---|---|
| Plaintiff/Petitioner: Paul Jones Defendant/Respondent: Joseph Smith Individually and DBA Joe's Auto Repair | CASE NUMBER: Fill in your Case Number |
|---|---|

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: **04/28/2023**
 - d. Time of delivery: **11:00 AM**
 - e. Witness fees (*check one*):
 - (1) were offered or demanded and paid. Amount: \$ **None**
 - (2) were not demanded or paid.
 - f. Fee for service: \$ **15**
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.

Date: **05/29/2023**

(For California sheriff, marshal, or constable use only)
I certify that the foregoing is true and correct.

Date:



 (SIGNATURE)



 (SIGNATURE)

For your protection and privacy, please press the Clear This Form button after you have printed the form.

Print this form

Save this form

Clear this form

| | |
|---|---------------------------------|
| PLAINTIFF/ PETITIONER: John Smith | CASE NUMBER: |
| DEFENDANT/ RESPONDENT: Mae Johnson | Fill in your Case Number |

PROOF OF SERVICE OF NOTICE TO CONSUMER OR EMPLOYEE AND OBJECTION
(Code Civ. Proc., §§ 1985.3, 1985.6)

Personal Service Mail

- At the time of service I was at least 18 years of age and **not a party to this legal action.**
- I served a copy of the *Notice to Consumer or Employee and Objection* as follows (check either a or b):
 - Personal service.** I personally delivered the *Notice to Consumer or Employee and Objection* as follows:
 - Name of person served:
 - Address where served:
 - Date served:
 - Time served:
 - 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:
 - Name of person served: **Mae Johnson**
 - Address: **505 Sierra St., Maywood, CA 90064**
 - Date of mailing: **06/24/2023**
 - 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.
 - My residence or business address is (specify): **105 Stonewall Ave., Los Angeles, CA 90756**
 - 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: **06/24/2023**

Mary Jo

(TYPE OR PRINT NAME OF PERSON WHO SERVED)



Mary Jo

(SIGNATURE OF PERSON WHO SERVED)

PROOF OF SERVICE OF OBJECTION TO PRODUCTION OF RECORDS
(Code Civ. Proc., §§ 1985.3, 1985.6)

Personal Service Mail

- At the time of service I was at least 18 years of age and **not a party to this legal action.**
- I served a copy of the *Objection to Production of Records* as follows (complete either a or b):
 - ON THE REQUESTING PARTY
 - Personal service.** I personally delivered the *Objection to Production of Records* as follows:
 - Name of person served:
 - Address where served:
 - Date served:
 - Time served:
 - 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:
 - Name of person served: **John Smith**
 - Address: **425 Stonehenge Ave., Soda Springs, CA 90756**
 - Date of mailing: **06/24/2023**
 - 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.
 - ON THE WITNESS
 - Personal service.** I personally delivered the *Objection to Production of Records* as follows:
 - Name of person served:
 - Address where served:
 - Date served:
 - Time served:
 - 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:
 - Name of person served:
 - Address:
 - Date of mailing:
 - 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.
- My residence or business address is (specify):
- 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: **06/24/2023**

Sam Johnson

(TYPE OR PRINT NAME OF PERSON WHO SERVED)



Sam Johnson

(SIGNATURE OF PERSON WHO SERVED)

| | |
|---|---------------------------------|
| PLAINTIFF/ PETITIONER: John Smith | CASE NUMBER: |
| DEFENDANT/ RESPONDENT: Mae Johnson | Fill in your Case Number |

PROOF OF SERVICE OF NOTICE TO CONSUMER OR EMPLOYEE AND OBJECTION
(Code Civ. Proc., §§ 1985.3, 1985.6)

Personal Service Mail

- At the time of service I was at least 18 years of age and **not a party to this legal action.**
- I served a copy of the *Notice to Consumer or Employee and Objection* as follows (check either a or b):
 - 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: |
 - 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: 06/24/2024 |
| (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.
 - My residence or business address is (specify): **105 Stonewall Ave., Los Angeles, CA 90756**
 - 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: **06/24/2024**

Mary Jo

(TYPE OR PRINT NAME OF PERSON WHO SERVED)



Mary Jo

(SIGNATURE OF PERSON WHO SERVED)

PROOF OF SERVICE OF OBJECTION TO PRODUCTION OF RECORDS
(Code Civ. Proc., §§ 1985.3, 1985.6)

Personal Service Mail

- At the time of service I was at least 18 years of age and **not a party to this legal action.**
- I served a copy of the *Objection to Production of Records* as follows (complete either a or b):
 - ON THE REQUESTING PARTY
 - 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: |
 - 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: 06/24/2024 |
| (ii) Address: 425 Stonehenge Ave., Soda Springs, CA 90756 | (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.
 - ON THE WITNESS
 - 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: |
 - 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: 06/24/2024 |
| (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.
- My residence or business address is (specify):
- 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: **06/24/2024**

Sam Johnson

(TYPE OR PRINT NAME OF PERSON WHO SERVED)



Sam Johnson

(SIGNATURE OF PERSON WHO SERVED)

| | | |
|---|----------------|---|
| ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name and Address</i>): Gail Green 450 Goodland Ave Encino, CA 91316 | TELEPHONE NO.: | FOR COURT USE ONLY - Gail Green has pending cases/won a judgment against Cosgrove (i.e. civil case/small claims) - Cosgrove won or has a pending case against "Bob the Builder, Inc." (SCC or Civil) - Gail found out and wants to collect from Cosgrove's SC or Civil case - This form is to place a lien on a pending case or judgment - Include Abstract of Judgment or Certified copy of the judgment |
| ATTORNEY FOR LIEN CLAIMANT: | | |
| NAME OF COURT: Los Angeles Superior Court STREET ADDRESS: 111 N Hill St MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Stanley Mosk | | |
| PLAINTIFF: Dana Cosgrove DEFENDANT: Bob the Builder, Inc. | | |
| NOTICE OF LIEN (Attachment—Enforcement of Judgment) | | CASE NUMBER: Fill in you SC/Civil Case Number |

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*): **09/20/2024**
 - 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: **11/14/2024**

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
- Calculations of the payoff amount is listed on the back

SC-145

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

SMALL CLAIMS CASE NO.: Fill in your Case Number

| | |
|---|--|
| 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*): **03/01/2024**
- 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: **03/09/2024**

Mike Jones

 (TYPE OR PRINT NAME)

 **Mike Jones**

 (SIGNATURE OF JUDGMENT DEBTOR)

Judgment creditor: See important notice on reverse.

| | |
|---|--|
| <p 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 align="center">SATISFACTION OF JUDGMENT (for court use only)</p> <p>(1) <input type="checkbox"/> Full satisfaction of judgment entered as to judgment debtor (<i>name</i>): _____ on (<i>date</i>): _____</p> <p>(2) <input type="checkbox"/> Full satisfaction of judgment NOT entered as requested (<i>state reason</i>): _____</p> <p align="right">Clerk, by _____, Deputy</p> |
|---|--|

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

Read page 2 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: Email (optional):

2 On (date): 06/17/2024, the court made the decision (judgment) that:

Fill in the court name and street address:

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

Superior Court of California, County of

Fill in Court Name and Address

Example:

Superior Court of California,

County of Los Angeles

Stanley Mosk Courthouse

111 N Hill St

Los Angeles, CA 90012

Phone: Email (optional):

Fill in your case number and case name:

3 I am asking for permission to make payments, instead of paying the full amount all at once, because (explain):

Case Number:

Fill in your Case Number

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.

Case Name:

Fill in your Case Name

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): 08/01/24, until (date of final payment): 11/01/26; 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: 06/29/2024

Michael Green

Type or print your name



Michael Green

Sign here

| | | |
|-------------------------------------|--------------------------|---|
| SHORT TITLE: Doe vs Jones | LEVYING OFFICER FILE NO. | COURT CASE NO. Fill in your Case Number |
|-------------------------------------|--------------------------|---|

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 | 20 | Spouse | \$0.00 |
| b. | Mike Jones, Jr. | 10 | Son | \$0.00 |
| c. | Jaime Jones | 15 | Daughter | \$0.00 |
| 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. | \$ | <u>215.00</u> |
| (2) <u>Medicare</u> | \$ | <u>21.23</u> |
| (3) <u>Life Insurance</u> | \$ | <u>50.21</u> |
| (4) <u>Retirement</u> | \$ | <u>159.34</u> |

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. \$ 0.00

b. Checking, savings, and credit union accounts (list banks):

| | | |
|---------------------------------------|----|---------------|
| (1) <u>LA Financial Savings</u> | \$ | <u>150.00</u> |
| (2) <u>Wells Fargo Checking</u> | \$ | <u>750.00</u> |
| (3) _____ | \$ | _____ |

b. \$ _____

c. Cars, other vehicles, and boat equity (list make, year of each):

| | | |
|-----------------------------------|----|-----------------|
| (1) <u>'90 Honda Civic</u> | \$ | <u>1,500.00</u> |
| (2) <u>'99 Toyota Camry</u> | \$ | <u>5,000.00</u> |
| (3) _____ | \$ | _____ |

c. \$ 6,500.00

d. Real estate equity d. \$ 0.00

e. Other personal property (jewelry, furniture, furs, stocks, bonds, etc.) (list separately):
..... e. \$ 0.00

| | | |
|-------------------------------------|--------------------------|---|
| SHORT TITLE: Doe vs Jones | LEVYING OFFICER FILE NO. | COURT CASE NO. Fill in your Case Number |
|-------------------------------------|--------------------------|---|

4. The monthly expenses for me, my spouse, and my other dependents

| | | |
|---|---------|-----------------|
| a. Rent or house payment and maintenance | 4 a. \$ | 1,000.00 |
| b. Food and household supplies | b. \$ | 300.00 |
| c. Utilities and telephone | c. \$ | 100.00 |
| d. Clothing | d. \$ | 20.00 |
| e. Medical and dental payments | e. \$ | 0.00 |
| f. Insurance (life, health, accident, etc.) | f. \$ | 0.00 |
| g. School, child care | g. \$ | 0.00 |
| h. Child, spousal support (prior marriage) | h. \$ | 0.00 |
| i. Transportation & auto expenses (insurance, gas, repair) <i>(list car payments in item 5)</i> | i. \$ | 200.00 |
| j. Installment payments <i>(insert total and itemize below in item 5)</i> | j. \$ | 250.00 |
| k. Laundry and cleaning | k. \$ | 30.00 |
| l. Entertainment | l. \$ | 100.00 |
| m. Other <i>(specify)</i> : | | |
| | m. \$ | 0.00 |

| | | |
|---|-------|-----------------|
| n. TOTAL MONTHLY EXPENSES <i>(add a through m)</i> : | n. \$ | 1,900.00 |
|---|-------|-----------------|

5. I, my spouse, and my other dependents owe the following debts:

| CREDITOR'S NAME | FOR | MO. PAYMENTS | BALANCE OWED | OWED BY <i>(State person's name)</i> |
|-----------------|--------|--------------|--------------|---|
| 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: **06/29/2024**

Mike Jones

(TYPE OR PRINT NAME)

Jenny Jones

(TYPE OR PRINT NAME OF SPOUSE)

Mike Jones

(SIGNATURE)

Jenny Jones

(SIGNATURE OF SPOUSE)

Clerk stamps here when form is filed.

-Respond within 10 days

-File with the 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 CA, 90022

Phone:

2 The judgment debtor who asked to make payments in this case is:

(Name): Michael Green

3 I agree to accept the payment plan in the Request.

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): 08/01/2024, until (date of final payment): 10/01/2025;

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: 07/05/2024

Elle Smith

Type or print your name

Elle Smith

Sign here

Declaration of Default in Payment of Judgment

Clerk stamps here when form is filed.

-File with the court once payment plan has been broken

Important: Read page 2 if this form was mailed to you or before you fill out this form. If you are the judgment debtor named in (2) and you disagree with this Declaration of Default in Payment of Judgment, you may file form SC-224, Response to Declaration of Default in Payment of Judgment, 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: Email (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: Email (optional):

(3) On (date): 05/12/2023 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): 06/20/2023 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): 07/01/2023, 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 07/01/2023 \$100.00, 09/01/2023 \$100.00, 08/01/2023 \$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 (05/12/2023 - 06/20/2023) = \$43.68 plus Interest after default on installment payments (10/02/2023 - 01/04/2024) = \$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: 01/04/2024

Paul Johnson Type or print your name

Paul Johnson Sign here

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 *Response to Declaration of Default in Payment of Judgment* (form SC-224) within 10 days after form SC-223 was mailed to you. Read page 2 before you fill out this form.

1 I am responding to *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: _____ Email (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: _____ Email (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 |
|------------|----------|------------|----------|------------|----------|------------|----------|
| 10/01/2023 | \$100.00 | 11/01/2023 | \$100.00 | 12/01/2023 | \$100.00 | 01/01/2024 | \$100.00 |
| 02/02/2024 | \$100.00 | 03/01/2024 | \$100.00 | 04/01/2024 | \$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 (the amount listed in item 7 of the *Declaration of Default*) may be added to the balance of the judgment.

I do not agree with the interest amount listed in item 7 of the *Declaration of Default*. I believe the correct amount of interest is \$ _____, which I 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 2024, February 2024, March 2024, and April 2024 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: 04/22/2024

Joseph Jones

Type or print your name



Joseph Jones

Sign here



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 Los Angeles
STREET ADDRESS: 111 N Hill St
MAILING ADDRESS:
CITY AND ZIP CODE: Los Angeles, CA 90012
BRANCH NAME: Stanley Mosk Courthouse

- File with the court
- \$40 filing fee (covered by Fee Waiver)
- Get a court stamped copy and take it to the County Recorder where the Judgment Debtor's property is located
- Separate County Recorder fee approximately \$110
**NOTE: Recording Fee is not covered by Court Fee Waiver

FOR RECORDER'S USE ONLY

PLAINTIFF: Jane Doe
DEFENDANT: Mike Jones

CASE NUMBER:
Fill in your Case Number

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.

4. Information on additional judgment creditors is shown on page 2.

3. Judgment creditor (name and address):
Jane Doe
123 Main Street
Los Angeles, CA 90012

5. Original abstract recorded in this county:

Date: 01/23/2024

Jane Doe

(TYPE OR PRINT NAME)

- a. Date:
- b. Instrument No.:

Jane Doe

(SIGNATURE OF APPLICANT OR ATTORNEY)

6. Total amount of judgment as entered or last renewed:
\$ 2759.62

10. An execution lien attachment lien is endorsed on the judgment as follows:

7. All judgment creditors and debtors are listed on this abstract.

a. Amount: \$

8. a. Judgment entered on (date): 11/05/2024
b. Renewal entered on (date):

b. In favor of (name and address):

9. This judgment is an installment judgment.

11. A stay of enforcement has
a. not been ordered by the court.

b. been ordered by the court effective until (date):

[SEAL]

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.

This abstract issued on (date):

Clerk, by _____, Deputy

| | |
|---|---|
| ATTORNEY OR PARTY WITHOUT ATTORNEY: 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 instruction sheet |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 N Hill St MAILING ADDRESS: Los Angeles, CA 90012 CITY AND ZIP CODE: Stanley Mosk Courthouse BRANCH NAME: | CASE NUMBER: Fill in your Case Number |
| PLAINTIFF/PETITIONER: Paul Jones DEFENDANT/RESPONDENT: Susan Smith | <input checked="" type="checkbox"/> EXECUTION (Money Judgment) WRIT OF <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) | \$ 64.00 |
| 15. Principal remaining due (subtract 14 from 13) | \$ 4,410.00 |
| 16. Accrued interest remaining due per CCP 685.050(b) (not on GC 6103.5 fees) | \$ 0.00 |
| 17. Fee for issuance of writ (per GC 70626(a)(I)) | \$ 40.00 |
| 18. Total amount due (add 15, 16, and 17) | \$ 4,450.00 |

5. Judgment entered on (date): **02/18/2024**
(See type of judgment in item 22.)

6. Judgment renewed on (dates):

7. Notice of sale under this writ:

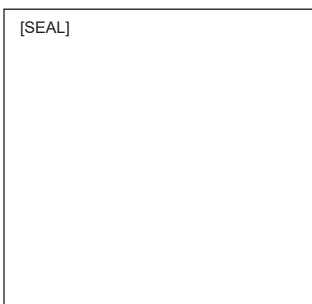
- a. has not been requested.
- b. has been requested (see next page).

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) \$ **1.21**
- 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.

| | |
|--|---|
| ATTORNEY OR PARTY WITHOUT ATTORNEY: NAME: Paris Parker FIRM NAME: _____ STREET ADDRESS: 123 Market St 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 -Used when there are 2 more defendants owing different amounts on the judgment |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 N Hill St MAILING ADDRESS: Los Angeles, CA 90012 CITY AND ZIP CODE: _____ BRANCH NAME: Stanley Mosk Courthouse | CASE NUMBER: Fill in your Case Number |
| PLAINTIFF/PETITIONER: Paris Parker DEFENDANT/RESPONDENT: Dale Dallas, et al | <input checked="" type="checkbox"/> EXECUTION (Money Judgment) WRIT OF <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 |
|--|

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) | \$ | Tip: Answer Questions #11 - 18 on Attachment 20 |
| 12. Costs after judgment (CCP 685.090) | \$ | |
| 13. Subtotal (add 11 and 12) | \$ | |
| 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 (per GC 70626(a)(I)) | \$ | |
| 18. Total amount due (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(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.

5. Judgment entered on (date): **03/04/2023**
(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.

[SEAL]

Date: _____ Clerk, by _____, Deputy

NOTICE TO PERSON SERVED: SEE PAGE 3 FOR IMPORTANT INFORMATION.

| | |
|--|---|
| Plaintiff/Petitioner: Paris Parker Defendant/Respondent: Dale Dallas, et al | CASE NUMBER: Fill in your Case Number |
|--|---|

21. Additional judgment debtor(s) (name, type of legal entity if not a natural person, and last known address):

| | | | | |
|---|--|--|--|--|
| Danka Divs 456 Hope St Los Angeles, CA 90012 | | | | |
| | | | | |

22. The judgment is for (check one):

- a. wages owed.
- b. child support or spousal support.
- c. other. **Small Claims**

23. Notice of sale has been requested by (name and address):

| | | | | |
|--|--|--|--|--|
| | | | | |
| | | | | |

24. Joint debtor was declared bound by the judgment (CCP 989-994)

- | | |
|--|--|
| a. <i>on (date):</i> b. name, type of legal entity if not a natural person, and last known address of joint debtor: | a. <i>on (date):</i> 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 24c.

25. (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 25a(3)), or if the *Prejudgment Claim of Right to Possession* was not served in compliance with CCP 415.46 (item 25a(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):

Item 25 continued on next page

| | | | | |
|--|--|------------------|--|--|
| NAME, ADDRESS, AND TELEPHONE NUMBER OF ATTORNEY OR PARTY WITHOUT ATTORNEY: | | STATE BAR NUMBER | <i>Reserved for Clerk's File Stamp</i> | |
| Paris Parker 123 Market St Los Angeles, CA 90012 | | | -Attach to EJ-130 Writ of Execution | |
| ATTORNEY FOR (Name): | | | | |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES | | | | |
| COURTHOUSE ADDRESS: 111 N Hill St., Los Angeles, CA 90012 | | | | |
| PLAINTIFF: Paris Parker | | | | |
| DEFENDANT: Dale Dallas, et al | | | CASE NUMBER: Fill in your Case Number | |
| WRIT OF EXECUTION – ATTACHMENT 20 | | | | |
| 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 | \$ 0.00 | |
| 13. Subtotal (add 11 and 12) | | \$ 5,095.00 | \$ 2,000.00 | |
| 14. Credits | | \$ 0.00 | \$ 0.00 | |
| 15. Subtotal (subtract 14 from 13) | | \$ 5,095.00 | \$ 2,000.00 | |
| 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) | | \$ 1.37 | \$ 0.57 | |
| (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)) | | \$ 0.00 | \$ 0.00 | |

Writ issued on: _____
Dated

DAVID W. SLAYTON, Executive Officer/Clerk of Court

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 the 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: Fill in your Case Number |

APPLICATION AND DECLARATION

- I, the judgment creditor judgment creditor's attorney, apply for an order for issuance of a new writ.
- On (date) 12/16/2023, 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 01/20/2024 | 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

| | | | |
|--|--|------------------|--|
| 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 the 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: Fill in your Case Number |

APPLICATION AND DECLARATION

- I, the judgment creditor judgment creditor's attorney, apply for an order for issuance of a new writ.
- On (date) 12/16/2023, 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 01/20/2024 | 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.: EMAIL 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) -Statue Authorizing Cost: Service by a Process Server CCP 1033.5 -For additional costs refer to CCP 685.010 through 685.110 -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 Los Angeles STREET ADDRESS: 111 N Hill Street MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Stanley Mosk | | CASE NUMBER: <div style="text-align: center; color: red; font-weight: bold;">Fill in your Case Number</div> |
| PLAINTIFF: Paul Jones DEFENDANT: Susan Smith | | |
| MEMORANDUM OF COSTS AFTER JUDGMENT, ACKNOWLEDGMENT OF CREDIT, AND DECLARATION OF ACCRUED INTEREST | | |

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 | 02/07/2024 | \$ 40.00 |
| (2) Recording and indexing abstract of judgment | 02/08/2024 | \$ 104.00 (Verify fee) |
| (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 | 01/22/2024 | \$ 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. | 01/23/2024 | \$ 100.00 |
| (7) Attorney fees, if allowed by Code Civ. Proc., § 685.040 | | \$ |
| (8) Other: <u>Bench Warrant</u> (Statute authorizing cost): <u>CCP 685.080 03/05/2024</u> | | \$ 120.00 |
| (9) Total of claimed costs for current memorandum of costs (add (1)-(8)) | | \$ 424.00 |
| b. All previously allowed postjudgment costs | | \$ 0.00 |
| c. Total of all postjudgment costs (add a and b) | | \$ 424.00 |

2. **Credits to interest and principal**

a. I acknowledge total payments to date in the amount of: \$ _____ (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: \$ _____; credit to judgment principal \$ _____.

b. **Principal remaining due.** The amount of judgment principal remaining due is \$ _____. (See Code Civ. Proc., § 680.300)

3. **Accrued interest remaining due.** I declare interest accruing at the legal rate of **10%** % on the unpaid principal amount of \$ **12,500** and **N/A or 0** % on the unpaid principal amount of \$ **N/A or 0** (see Information Sheet for Calculating Interest and Amount Owed on a Judgment (form MC-013-INFO)) 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 \$ **234.12**.

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: 04/18/2024

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 vs. Smith

CASE NUMBER:

Fill in your Case Number

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: **123 Main St.
Los Angeles, CA 90022**
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: **123 Main St., Los Angeles, CA 90012**
 - (c) Date of mailing: **04/25/2024**
 - (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: 05/03/2024**Diana Jones**

(TYPE OR PRINT NAME)

Diana Jones

(SIGNATURE OF DECLARANT)

**INFORMATION SHEET FOR CALCULATING INTEREST
AND AMOUNT OWED ON A JUDGMENT**

What can the judgment creditor recover?

Under California law, the amount recoverable by a judgment creditor (the party to whom money is owed) includes:

- 1 The total amount of the judgment entered by the court (principal), plus costs;
- 1 Costs after judgment under Code of Civil Procedure section 685.070; and
- 1 Accrued interest on the total amount.

Costs After Judgment

A judgment creditor is entitled to reimbursement for the “reasonable and necessary” costs of enforcing a judgment. These costs must be reported to the court within two years of the date incurred. The judgment amount includes costs ordered by the court after the judgment. (For information on recovering costs and a detailed list of costs that can be recovered, see Code of Civil Procedure sections 685.040, 685.050 et seq., 685.070(b), and 685.090; see also “Requesting Costs and Interest” below).

Accrued Interest (See Code Civ. Proc., §§ 685.010, 685.020(a), and Cal. Const., art. XV, § 1.)

Interest accrues on the unpaid principal of a judgment at the following legal rates:

- 1 The rate of interest is 10% per year unless one of the following lower interest rates applies.
- 1 The rate of interest is 7% per year if the judgment debtor (the party who owes the money) is a state or local government entity.
- 1 The rate of interest is 5% per year if the judgment debtor is a natural person and the judgment meets all of the following requirements:
 - o The judgment was entered or renewed after January 1, 2023.
 - o The judgment is on a claim related to either personal debt (and the unpaid principal amount is under \$50,000) or medical expenses (and the unpaid principal amount is under \$200,000).
 - o The judgment is not based on tortious or fraudulent conduct or for unpaid wages, damages, or penalties owed to an employee.

For judgments renewed after January 1, 2023, the 5% interest rate applies only to unpaid principal remaining after renewal. Note, for judgments that otherwise meet the above requirements and are renewed after January 1, 2023, the interest rate will change from 10% to 5% for any remaining unpaid principal if the unpaid principal has fallen below the above amounts.

Interest generally accrues from the date the judgment is entered. Interest begins to accrue on the amount of costs added to a judgment from the date ordered by the court or from the date costs are allowed following expiration of the time to object. If the judgment is payable in installments, interest accrues from the date each installment is due. On renewal of a judgment, unpaid interest that has accrued is added to the principal of the judgment and interest begins to accrue on the total renewed amount on the day the renewed judgment is entered.

Requesting Costs and Interest

To have costs and interest added to the enforceable amount owed, the judgment creditor must file and serve *Memorandum of Costs After Judgment* (form MC-012). On that form, the judgment creditor must include the exact amount of all costs and accrued interest. This means the judgment creditor is responsible for calculating the amount of interest that accrues on the judgment. It is useful to update this calculation after receiving payments.

Crediting Payments Received

Any payments received by the judgment creditor must be “credited” in a specific order. (Code Civ. Proc., § 695.220.) After specific costs go directly to the levying officer and to the court for fees, the judgment creditor is required to credit payments received first toward *accrued interest* and then toward the *judgment principal* (including costs approved by the court after entry of the judgment).

Calculation of Interest on Judgment and Amount Due

The following are various formulas and examples to assist with the calculation of interest on a judgment using both a 5% and a 10% interest rate.

Calculating the Total Amount Due, Including Interest, on the date of payment, if there have been no prior payments or credits

Step 1: Calculate the daily interest on a judgment. This is the amount of interest earned per day on a judgment. To calculate the daily interest, use the following formula:

Formula: (Total amount of judgment owed) \times (applicable interest rate) = interest earned per year. That number divided by 365 = amount of daily interest.

Example: Judgment debtor owes the judgment creditor \$5,000 (the “judgment principal”).

| 5% Interest Rate | 10% Interest Rate |
|--|--|
| $\$5,000 \times 0.05 = \250 $\$250/365 = \0.69 daily interest | $\$5,000 \times 0.10 = \500 $\$500/365 = \1.37 daily interest |
| The amount of interest earned will be \$0.69 per day as long as the unpaid amount remains \$5,000. | The amount of interest earned will be \$1.37 per day as long as the unpaid amount remains \$5,000. |

Step 2: Count the total number of days that have passed since the court entered the final judgment up to the day of payment. Then calculate the amount of interest owed on the date of payment using the following formula.

Formula: (Total number of days since judgment was entered) \times (amount of interest per day, calculated in Step 1) = amount of interest owed on the date of payment.

Example: A \$5,000 judgment was entered on June 1 and the judgment debtor paid the judgment on September 8; 100 days from the entry of the judgment have passed.

| 5% Interest Rate | 10% Interest Rate |
|---|---|
| The daily interest is \$0.69 (see above). $\$0.69$ per day \times 100 days = \$69 interest owed on the date of payment | The daily interest is \$1.37 (see above). $\$1.37$ per day \times 100 days = \$137 interest owed on the date of payment. |
| The judgment debtor owes \$69 in interest on the principal of \$5,000 on the date of payment. | The judgment debtor owes \$137 in interest on the principal of \$5,000 on the date of payment. |

Step 3: Add the amount of interest that has accrued to the amount of the judgment.

| 5% Interest Rate | 10% Interest Rate |
|--|--|
| $\$5,000$ judgment + \$69 interest = \$5,069 | $\$5,000$ judgment amount + \$137 interest = \$5,137 |
| The judgment debtor owes a total of \$5,069 on the 100th day after the court entered judgment. | The judgment debtor owes a total of \$5,137 on the 100th day after the court entered judgment. |

Crediting partial payments and recalculating the amount due

If the judgment debtor does not pay all that is owed at one time, the partial payments the debtor makes are credited to the interest *first* and then to the judgment amount (the principal) owed.

Example: The judgment principal is \$5,000. After 200 days, the judgment debtor pays \$1,000.

Step 1: Calculate the amount of interest owed on the date of payment

| 5% Interest Rate | 10% Interest Rate |
|--|---|
| The daily interest is \$0.69 (see above). \$0.69 per day \times 200 days = \$138 interest owed on the date of payment | The daily interest is \$1.37 (see above). \$1.37 per day \times 200 days = \$274 interest owed on the date of payment. |

Step 2: Apply payment to interest

| 5% Interest Rate | 10% Interest Rate |
|--|--|
| The judgment debtor paid \$1,000, which first must be used to credit the \$138 of accrued interest. That leaves a balance of \$862 (\$1,000 - \$138 = \$862) to be credited toward the \$5,000 principal. | The judgment debtor paid \$1,000, which first must be used to credit the \$274 of accrued interest. That leaves a balance of \$726 (\$1,000 - \$274 = \$726) to be credited toward the \$5,000 principal. |

Step 3: Apply remainder to principal

| 5% Interest Rate | 10% Interest Rate |
|---|---|
| The remaining credit of \$862 is applied to the judgment principal. The judgment debtor now owes \$4,138 on the judgment principal (\$5,000 - \$862 = \$4,138). | The remaining credit of \$726 is applied to the judgment principal. The judgment debtor now owes \$4,274 on the judgment principal (\$5,000 - \$726 = \$4,274). |

Step 4: Calculate the new daily interest rate

| 5% Interest Rate | 10% Interest Rate |
|--|---|
| \$4,138 (new principal) \times 5% = \$206.90 interest per year \$206.90/365 days = \$0.57 interest earned per day | \$4,274 (new principal) \times 10% = \$427.40 interest per year \$427.40/365 days = \$1.17 interest earned per day |

Example: After 100 days, the judgment debtor makes a second payment of \$500. (Recalculate using steps 1-4.)

| 5% Interest Rate | 10% Interest Rate |
|---|--|
| Amount of accrued interest over 100 days: 100 days \times \$0.57 daily interest = \$57 total interest | Amount of accrued interest over 100 days: 100 days \times \$1.17 daily interest = \$117 total interest |
| \$500 payment credited to interest first: \$500 payment - \$57 interest = \$443 remaining | \$500 payment credited to interest first: \$500 payment - \$117 interest = \$383 remaining |
| Remainder credited to principal: \$4,138 principal - \$443 remaining = \$3,695 new principal | Remainder credited to principal: \$4,274 principal - \$383 remaining = \$3,891 new principal |
| Calculate new daily interest: \$3,695 \times 5% = \$184.75/365 = \$0.51 interest per day | Calculate new daily interest: \$3,891 \times 10% = \$389.10/365 = \$1.07 interest per day |

| | |
|--|---|
| ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Penny Anderson 456 Park Street., Los Angeles, CA 90002 TELEPHONE NO.: _____ FAX NO.: _____ E-MAIL ADDRESS: _____ ATTORNEY FOR (Name): _____ | LEVYING OFFICER (Name and Address): -Form is available at the Sheriff's Office -Don't need form SER-001/A |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 N Hill St MAILING ADDRESS: _____ CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Stanley Mosk Courthouse | |
| PLAINTIFF/PETITIONER: Penny Anderson DEFENDANT/RESPONDENT: Michael Bray | COURT CASE NUMBER: Fill in your Case Number |
| 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
 a. The attorney (or party without an attorney) named at the top of this page. Social Security no. on form WG-035 unknown
 b. Other (name, address, and telephone): _____

3. a. Judgment was entered on (date): **06/28/2020**
 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: **10/17/2024**

Penny Anderson

(TYPE OR PRINT NAME)

Penny Anderson

(SIGNATURE OF DECLARANT)

| | |
|---|--|
| ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Steven Jones 654 Central Ave 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. |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 N. Hill St. MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Stanley Mosk Courthouse | LEVYING OFFICER FILE NUMBER: |
| PLAINTIFF/PETITIONER: Jane Wright DEFENDANT/RESPONDENT: Steven Jones | FOR COURT USE ONLY CASE NUMBER: 19STSC12345 |
| <p align="center">CLAIM OF EXEMPTION (Enforcement of Judgment)</p> <p>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.</p> <p>1. My name is: Steven Jones</p> <p>2. Papers should be sent to: <input checked="" type="checkbox"/> me. <input type="checkbox"/> 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 <input type="checkbox"/> shown above <input type="checkbox"/> following (specify):</p> <p>3. <input type="checkbox"/> I am not the judgment debtor named in the notice of levy. The name and last known address of the judgment debtor is (specify):</p> <p>4. The property I claim to be exempt is (describe): Bank Account</p> <p>5. The property is claimed to be exempt under the following code and section (specify): CCP 704.080</p> <p>6. The facts which support this claim are (describe): These are public benefits money I receive.</p> <p>7. <input type="checkbox"/> 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.</p> <p>8. <input type="checkbox"/> The property claimed to be exempt is a. <input type="checkbox"/> 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. <input type="checkbox"/> 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):</p> <p>9. <input type="checkbox"/> 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):</p> | |

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

 **Steven Jones**

(TYPE OR PRINT NAME)

(SIGNATURE OF DECLARANT)

| | |
|--|---|
| ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Michael Bray 456 Central Ave 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 - Original EJ-165 plus 1 copy |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 N. Hill St. MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Stanley Mosk Courthouse | LEVYING OFFICER FILE NUMBER: |
| PLAINTIFF/PETITIONER: Penny Smith DEFENDANT/RESPONDENT: Michael Bray | FOR COURT USE ONLY |
| <p style="text-align: center;">CLAIM OF EXEMPTION (Wage Garnishment)</p> | |

**READ EMPLOYEE INSTRUCTIONS (FORM WG-003)
BEFORE COMPLETING THIS FORM**

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. DO NOT FILE WITH THE COURT.

- My name is: **Michael Bray**
- I need the following earnings to support myself or my family (check a or b):
 - All earnings.
 - \$ _____ each pay period.
- Please send all papers to
 - me
 - my attorney
 at the address shown above following (specify):

CASE NUMBER:
19STSC12345

- 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):
 - None
 - Withhold \$ _____ each pay period.
- 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: **07/14/2019**

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 with the *Notice of Levy* packet.

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 (<i>cont.</i>) | |
| Accounts (<i>See Deposit Accounts</i>) | | Relocation Benefits | CCP § 704.180 |
| Appliances | CCP § 704.020 | Retirement Benefits | |
| Art and Heirlooms | CCP § 704.040 | and Contributions: | |
| Automobiles | CCP § 704.010 | Private | CCP § 704.115 |
| BART District Benefits | CCP § 704.110 | Public | 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 | Strike Benefits | CCP § 704.120 |
| | Pub Util C § 28896 | Supplemental Security Income | 42 USC § 1383 |
| Charity | CCP § 704.170 | | 42 USC § 407(d) |
| Civil Service Retirement | | Transit District Retirement | |
| Benefits (Federal) | 5 USC § 8346 | Benefits (Alameda and | |
| County Employees | | Contra Costa Counties) | CCP § 704.110 |
| Retirement Benefits | CCP § 704.110 | | Pub Util C § 25337 |
| | Govt C § 31452 | Unemployment Benefits | |
| Disability Insurance Benefits | CCP § 704.130 | and Contributions | CCP § 704.120 |
| Fire Service Retirement | | Veterans Benefits | 38 USC § 5301 |
| Benefits | CCP § 704.110 | Veterans Medal of Honor | |
| | Govt C § 32210 | Benefits | 38 USC § 1562 |
| Fraternal Organization | | Welfare Payments | CCP § 704.170 |
| Funds Benefits | CCP § 704.130 | | Welf & I C § 17409 |
| | CCP § 704.170 | Workers Compensation | CCP § 704.160 |
| Health Insurance Benefits | CCP § 704.130 | Boats | CCP § 704.060 |
| Irrigation System | | | CCP § 704.710 |
| Retirement Benefits | CCP § 704.110 | Books | CCP § 704.060 |
| Judges Survivors Benefits | | Building Materials (Residential) | CCP § 704.030 |
| (Federal) | 28 USC § 376(n) | Business: | |
| Legislators Retirement | | Licenses | CCP § 695.060 |
| Benefits | CCP § 704.110 | | CCP § 699.720(a)(1) |
| | Govt C § 9359.3 | Tools of Trade | CCP § 704.060 |
| Life Insurance Benefits: | | Cars and Trucks (including | |
| Group | CCP § 704. 100 | proceeds) | CCP § 704.010 |
| Individual | CCP § 704. 100 | Cash | CCP § 704.070 |
| Lighthouse Keepers | | Cemeteries: | |
| Surviving Spouses Benefits | 33 USC § 775 | Land Proceeds | Health & SC § 7925 |
| Longshore & Harbor Workers | | Plots | CCP § 704.200 |
| Compensation or Benefits | 33 USC § 916 | Charity | CCP § 704.170 |
| Military Benefits: | | Claims, Actions and Awards: | |
| Retirement | 10 USC § 1440 | Personal Injury | CCP § 704.140 |
| Survivors | 10 USC § 1450 | Worker's Compensation | CCP § 704.160 |
| Municipal Utility District | | Wrongful Death | CCP § 704.150 |
| Retirement Benefits | CCP § 704.110 | Clothing | CCP § 704.020 |
| | Pub Util C § 12337 | Condemnation Proceeds | CCP § 704.720(b) |
| Peace Officers Retirement | | County Employees Retirement | |
| Benefits | CCP § 704.110 | Benefits | CCP § 704.110 |
| Pension Plans | | | Govt C § 31452 |
| (and Death Benefits): | | Damages (<i>See Personal Injury</i> | |
| Private | CCP § 704.115 | and <i>Wrongful Death</i>) | |
| Public | CCP § 704.110 | Deposit Accounts: | |
| Public Assistance | CCP § 704.170 | Deposit Accounts (generally) | CCP § 704.220 |
| | Welf & I C § 17409 | Deposit Accounts (hardship) | CCP § 704.225 |

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> |
|---|--|--|---|
| Deposit Accounts (<i>cont.</i>) | | Motor Vehicle (Including Proceeds) | CCP § 704.010 CCP § 704.060 |
| Escrow or Trust Funds | Fin C § 17410 | Municipal Utility District Retirement Benefits | CCP § 704.110 |
| Social Security Direct Deposits | CCP § 704.080 | Peace Officers Retirement Benefits | Pub Util C § 12337 CCP § 704.110 |
| Direct Deposit Account: | | Pension Plans: | Govt C § 31913 |
| Social Security | CCP § 704.080 | Private | CCP § 704.115 |
| Supplemental Security Income | CCP § 704.080 | Public | CCP § 704.110 |
| Public Benefits | CCP § 704.080 | Personal Effects | CCP § 704.020 |
| Disability Insurance Benefits | CCP § 704.130 | Personal Injury Actions or Damages | CCP § 704.140 |
| Dwelling House | CCP § 704.740 | Prisoner's Funds | CCP § 704.090 |
| Earnings | CCP § 704.070 CCP § 706.050 15 USC § 1673(a) | Property Not Subject to Enforcement of Money Judgments | CCP § 704.210 |
| Educational Grant | Ed C § 21116 | Prosthetic and Orthopedic Devices | CCP § 704.050 |
| Employment Bonds | Lab C § 404 | Provisions (for Residence) | CCP § 704.020 |
| Federal Emergency Management Agency (FEMA) funds | CCP § 704.230 | Public Assistance | CCP § 704.170 Welf & I C § 17409 |
| Financial Assistance: | | Public Employees: | |
| Charity | CCP § 704.170 | Death Benefits | CCP § 704.110 |
| Public Assistance | CCP § 704.170 Welf & I C § 17409 | Pension | CCP § 704.110 |
| Student Aid | CCP § 704.190 | Retirement Benefits | CCP § 704.110 |
| Welfare (<i>See Public Assistance</i>) | | Vacation Credits | CCP § 704.113 |
| Fire Service Retirement | CCP § 704.110 Govt C § 32210 | Railroad Retirement Benefits | 45 USC § 231m |
| Fraternal Organizations | | Railroad Unemployment Insurance | 45 USC § 352(e) |
| Funds and Benefits | CCP § 704.130 CCP § 704.170 | Relocation Benefits | CCP § 704.180 |
| Fuel for Residence | CCP § 704.020 | Retirement Benefits and Contributions: | |
| Furniture | CCP § 704.020 | Private | CCP § 704.115 |
| General Assignment for Benefit of Creditors | CCP § 1801 | Public | CCP § 704.110 Ins C § 10498.5 |
| Health Aids | CCP § 704.050 | Scholarshare (Higher Education Savings) | CCP § 704.105 |
| Health Insurance Benefits | CCP § 704.130 | Segregated Benefit Funds | Ins C § 10498.6 |
| Home: | | Servicemembers Property | 50 USC § 523(b) |
| Building Materials | CCP § 704.030 | Social Security | 42 USC § 407 |
| Dwelling House | CCP § 704.740 | Social Security Direct Deposit | CCP § 704.080 |
| Homestead | CCP § 704.720 CCP § 704.730 | Strike Benefits | CCP § 704.120 |
| House trailer | CCP § 704.710 | Supplemental Security Income | 42 USC § 1383(d) 42 USC § 407 |
| Mobilehome | CCP § 704.710 | Student Aid | CCP § 704.190 |
| Homestead | CCP § 704.720 CCP § 704.730 | Tools of Trade | CCP § 704.060 |
| Household Furnishings | CCP § 704.020 | Transit District Retirement Benefits (Alameda and Contra Costa Counties) | CCP § 704.110 Pub Util C § 25337 |
| Insurance: | | Travelers Check Sales Proceeds | Fin C § 1875 |
| Disability Insurance | CCP § 704.130 | Unemployment Benefits and Contributions | CCP § 704.120 |
| Fraternal Benefit Society | CCP § 704.110 | Uniforms | CCP § 704.060 |
| Group Life | CCP § 704.100 | Vacation Credits (Public Employees) | CCP § 704.113 |
| Health Insurance Benefits | CCP § 704.130 | Veterans Benefits | 38 USC § 5301 |
| Individual | CCP § 704.100 | Veterans Medal of Honor Benefits | 38 USC § 1562 |
| Insurance Proceeds— | | Wages | CCP § 704.070 CCP § 706.050 CCP § 706.051 |
| Motor Vehicle | CCP § 704.010 | Welfare Payments | CCP § 704.170 Welf & I C § 17409 |
| Irrigation System | | Workers Compensation Claims or Awards | CCP § 704.160 |
| Retirement Benefits | CCP § 704.110 | Wrongful Death Actions or Damages | CCP § 704.150 |
| Jewelry | CCP § 704.040 | | |
| Judges Survivors Benefits (Federal) | 28 USC § 376(n) | | |
| Legislators Retirement Benefits | CCP § 704.110 Govt C § 9359.3 | | |
| Licenses | CCP § 695.060 CCP § 720(a)(1) | | |
| Lighthouse Keepers Surviving Spouses Benefit | 33 USC § 775 | | |
| Longshore and Harbor Workers Compensation or Benefits | 33 USC § 916 | | |
| Military Benefits: | | | |
| Retirement | 10 USC § 1440 | | |
| Survivors | 10 USC § 1450 | | |
| Military Personnel—Property | 50 USC § 3934 | | |

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, 2022. 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(e).)

| <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 | \$ 31,950 |
| (2) | The debtor's interest in one or more motor vehicles | \$ 6,375 |
| (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) | \$ 800 |
| (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 | \$ 1,900 |
| (5) | The debtor's aggregate interest, plus any unused amount of the exemption provided under paragraph (1), in any property | \$ 1,700 |
| (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 | \$ 9,525 |
| (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 | \$ 17,075 |
| (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 | \$ 31,950 |

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, 2023, and unless otherwise provided by statute after that date, will be adjusted annually, effective July 1, by the Department of Social Services under Welfare and Institutions Code section 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, 2022. 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(e).)

| <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) | \$ 3,625 |
| 704.030 | Material to be applied to repair or maintenance of residence | \$ 3,825 |
| 704.040 | Jewelry, heirlooms, art | \$ 9,525 |
| 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) | \$ 9,525 |
| 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) | \$ 19,050 |
| 704.220 | Deposit account, generally (exemption without claim; amount per judgment debtor, section 704.220(a),(e)) ¹ | \$ 2,080* |
| 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 | \$ 1,900 |
| | • Social security benefits, one depositor is designated payee | \$ 3,825 |
| | • Public benefits, two or more depositors are designated payees ³ | \$ 2,825 |
| | • Social security benefits, two or more depositors are designated payees ³ | \$ 5,725 |
| 704.090 | Inmate trust account | \$ 1,900 |
| | Inmate trust account (restitution fine or order) | \$ 325 ⁴ |
| 704.100 | Aggregate loan value of unmaturred life insurance policies | \$ 15,250 |

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 (<i>Name and Address</i>): 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 (<i>Name</i>): NAME OF COURT: STREET ADDRESS: 111 N. Hill St. MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Stanley Mosk Courthouse | | |
| 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*)

[Empty box for claimant name and address]

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: **01/02/2019**
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 TELEPHONE NO.: 213-444-5555 FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (Name): | LEVYING OFFICER (Name and Address): See procedure manual for instructions |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 N. Hill St MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Stanley Mosk Courthouse | COURT CASE NUMBER: 19STSC12345 |
| PLAINTIFF/PETITIONER: Jane Doe DEFENDANT/RESPONDENT: Michael Jones | LEVYING OFFICER FILE NUMBER.: |
| NOTICE OF OPPOSITION TO CLAIM OF EXEMPTION (Wage Garnishment) | |

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 employee

Michael Jones
456 Central Ave
Los Angeles, CA 90001

Social Security No. on form WG-035 unknown
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 by tenants.**
 - \$800 clothing expense excessive.**
 - \$250 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** 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

 **Jane Doe**

(TYPE OR PRINT NAME)

(SIGNATURE OF DECLARANT)

| | | | |
|--|---------------------------------------|--|--|
| ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Jane Doe 123 Main St Los Angeles, CA 90001 | TELEPHONE NO.: 213-444-5555 | FOR COURT USE ONLY - Filing Fee: \$60.00 - See procedure manual for instructions. | |
| ATTORNEY FOR (Name): | | NAME OF COURT, JUDICIAL DISTRICT OR BRANCH COURT, IF ANY Stanley Mosk Courthouse, Central District | |
| PLAINTIFF: Jane Doe DEFENDANT: Michael Jones | | LEVYING OFFICER FILE NO.: COURT CASE NO.: 19STSC12345 | |
| NOTICE OF HEARING ON CLAIM OF EXEMPTION (Wage Garnishment—Enforcement of Judgment) | | | |

1. TO:

| | |
|---|---|
| Name and address of levying officer <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> Los Angeles County Sheriff's Department 111 N. Hill Street, Room 525 Los Angeles, CA 90012 </div> <input type="checkbox"/> Claimant, if other than judgment debtor (name and address): | Name and address of judgment debtor <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> Michael Jones 456 Bird Ln Los Angeles, CA 90001 </div> <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.: 92 | <input type="checkbox"/> div.: | <input type="checkbox"/> rm.: |
|----------------------------|----------------------|--|--------------------------------|-------------------------------|

b. address of court:
111 N. Hill St
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 vs. 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 Ave
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 Ave
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 | | |
|------|-------------|-------|----------|
| | Date: | Time: | Address: |

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 St
Los Angeles, CA 90007

TEL NO.: 213-444-5555 FAX NO. (optional):

E-MAIL ADDRESS:

ATTORNEY FOR JUDGMENT CREDITOR ASSIGNEE OF RECORD

SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles

STREET ADDRESS: 111 N Hill St

MAILING ADDRESS:

CITY AND ZIP CODE: Los Angeles, CA 90012

BRANCH NAME: Stanley Mosk Courthouse

- Filing Fee: \$45.00
- File along with EJ-195
- File with court and serve to other party, see procedure manual

FOR RECORDER'S USE ONLY

PLAINTIFF: Susan Edwards
DEFENDANT: Nancy Garcia

CASE NUMBER:
2015STSC12345

APPLICATION FOR AND RENEWAL OF JUDGMENT

FOR COURT USE ONLY

Judgment creditor

Assignee of record

applies for renewal of the judgment as follows:

1. Applicant (name and address):

Susan Edwards
222 Chestnut St
Los Angeles, CA 90007

2. Judgment debtor (name and last known address):

Nancy Garcia
789 Fremont Ave
Los Angeles, CA 90003

3. Original judgment

a. Case number (specify): 2015STSC12345

b. Entered on (date): 06/25/2015

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 | \$ | 0.00 |
| c. Subtotal (add a and b) | \$ | 1,500.00 |
| d. Credits after judgment | \$ | 0.00 |
| 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:

2015STSC12345

5. j. The money judgment (*check all that apply*)

- (1) has a principal amount remaining unsatisfied of under \$50,000 and is for a claim related to personal debt.
- (2) has a principal amount remaining unsatisfied of under \$200,000 and is for a claim related to medical expenses.
- (3) relates to any other claims, including claims for personal debt or medical expenses that do not otherwise fit within items (1) or (2).

Note: From the point when the unsatisfied principal amount is below \$50,000 for personal debt claims or \$200,000 for medical expense claims, a judgment against a natural person may only be renewed once, for five years from the date an application is filed. (Code Civ. Proc., §§ 683.110–683.120.)

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:

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)

| | | |
|---|--|---|
| ATTORNEY OR PARTY WITHOUT ATTORNEY NAME: Susan Edwards FIRM NAME: STREET ADDRESS: 222 Chestnut St CITY: Los Angeles TELEPHONE NO.: EMAIL ADDRESS: ATTORNEY FOR (name): | STATE BAR NUMBER: STATE: CA ZIP CODE: 90007 FAX NO.: | FOR COURT USE ONLY -File with court and serve to other party, see procedure manual -File along with EJ-190 Application for Renewal of Judgment |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 N Hill St MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, 90012 BRANCH NAME: Stanley Mosk Courthouse | | |
| PLAINTIFF/PETITIONER: Susan Edwards DEFENDANT/RESPONDENT: Nancy Garcia | | |
| NOTICE OF RENEWAL OF JUDGMENT | | CASE NUMBER: Fill in your Case Number |

TO JUDGMENT DEBTOR (name): **Nancy Garcia**

1. **This renewal extends** the period of enforceability of the judgment until

- a. 10 years from the date the application for renewal was filed.
 b. 5 years from the date the application for renewal was filed.

(The judgment creditor should check 1b if the judgment is a money judgment; is not based on tortious or fraudulent conduct or for unpaid wages, damages, or penalties owed to an employee; and, as of the date of the application of renewal, the judgment:

- ┆ has an unsatisfied principal amount under \$50,000 and relates to a claim for personal debt; or
- ┆ has an unsatisfied principal amount under \$200,000 and relates to a claim for medical expenses.)

(Code Civ. Proc., §§ 683.110–683.120.)

2. **If you object** to this renewal, you may make a motion to vacate or modify the renewal with the court.

3. You must make this motion within **60 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: **04/20/2024**

Nancy Garcia

(TYPE OR PRINT NAME)

Nancy Garcia

(SIGNATURE OF JUDGMENT CREDITOR OR ATTORNEY)

See Code of Civil Procedure section 683.160 for information on method of service

NOTICE OF RENEWAL OF JUDGMENT

For your protection and privacy, please press the Clear This Form button after you have printed the form.

Print this form

Save this form

Clear this form

- Used when Abstract of Judgment is recorded.
- Fill out 2 copies, DO NOT sign, go to Notary to sign both forms.
- File one with the Court.
- Mail the other to the Judgment Debtor.
- May also be used for partial satisfactions.

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.: 323-474-5588 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 St**

MAILING ADDRESS:

CITY AND ZIP CODE: **Los Angeles, CA 90012**
Stanley Mosk Courthouse

BRANCH NAME:

FOR RECORDER'S OR SECRETARY OF STATE'S USE ONLY

| | |
|--|------------------------------------|
| PLAINTIFF: Joseph Durant DEFENDANT: Michael Weber | CASE NUMBER: 17STSC12345 |
|--|------------------------------------|

| | |
|---|---------------------------|
| ACKNOWLEDGMENT OF SATISFACTION OF JUDGMENT <input checked="" type="checkbox"/> FULL <input type="checkbox"/> PARTIAL <input type="checkbox"/> MATURED INSTALLMENT | <i>FOR COURT USE ONLY</i> |
|---|---------------------------|

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 St, 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 Los Angeles | DATE OF RECORDING 12/20/2018 | INSTRUMENT NUMBER 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**  **Joseph Durant**
(SIGNATURE OF JUDGMENT CREDITOR OR ASSIGNEE OF CREDITOR OR ATTORNEY)**

*The names of the judgment creditor and judgment debtor must be stated as shown in any Abstract of Judgment which was recorded and is being released by this satisfaction. ** A separate notary acknowledgment must be attached for each signature.

For your protection and privacy, please press the Clear This Form button after you have printed the form.

| | | |
|---------------------------------|--------------------------------|---------------------------------|
| Print this form | Save this form | Clear this form |
|---------------------------------|--------------------------------|---------------------------------|

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 Ave, Encino, CA 91316
Phone: 442-123-4441

2 I am the (check one):
a. [X] Judgment creditor.
b. [] Assignee of record.

3 I acknowledge that the judgment owed to (name): Roger Dixon
was paid or otherwise satisfied on (date): 02/18/2024
as follows (check and complete one):

- a. [X] 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 vs. 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: 02/26/2024

Roger Dixon
Type or print your name

[Signature] Roger Dixon
Judgment creditor or assignee signs here

| | |
|--|---|
| NAME, ADDRESS, AND TELEPHONE NUMBER OF PARTY: Michael Jones 456 Page Rd Los Angeles, CA 90003 | Reserved for Clerk's File Stamp - Filed by Judgment Debtor with Court. - May also be filed with LACIV 040 if Abstract of Judgment was recorded. |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES SMALL CLAIMS | |
| COURTHOUSE ADDRESS: 111 N Hill St, Los Angeles, CA 90012 | |
| PLAINTIFF: Susan Smith | |
| DEFENDANT: Michael Jones | |
| DECLARATION OF JUDGMENT DEBTOR REGARDING SATISFACTION OF JUDGMENT | CASE NUMBER: 18STSC12345 |

- I am the judgment debtor in this case.
- Judgment was entered against me on 08/12/2018.
- 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.
- 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.
- 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>I declare under penalty of perjury, under the laws of the State of California, that the foregoing is true and correct.</i> | | |
| DATE 05/12/2019 | TYPE OR PRINT JUDGMENT DEBTOR'S NAME Michael Jones | SIGNATURE OF JUDGMENT DEBTOR Michael Jones |

**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 of Court

Date: _____ By: _____, Deputy

ATTORNEY OR PARTY WITHOUT ATTORNEY (name, state bar number, and address):

After recording return to:

Michael Jones
456 Page Rd
Los Angeles, CA 90012

TELEPHONE NO: 213-123-4567

FAX NO:E-MAIL ADDRESS

ATTORNEY FOR

SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES

STREET ADDRESS: 111 N Hill St

MAILING ADDRESS:

CITY AND ZIP CODE: Los Angeles, CA 90012
BRANCH NAME: Stanley Mosk Courthouse

NOTE: This form is filed by the Debtor when an Abstract of Judgment is recorded on a property but the Credit has failed to file a Satisfaction of Judgment.

Judgment Debtor must file along with SCLA 003 first.

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 |



DAVID W. SLAYTON, Executive Officer/Clerk of Court

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 | 20181234567 |
| Orange | 11/01/2018 | 20187654321 |

05/12/2019

Date

Michael Jones

Signature of Judgment Debtor



DMV requires at least three forms of Identification to suspend the license:

1) Name 2) Address 3) Driver License Number or Date of Birth

Certificate of Facts RE Unsatisfied Judgment

(SEE INSTRUCTIONS ON NEXT PAGE)

Court Fee: \$52.00 30

DMV Fee: \$20.00

(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 Courthouse

(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. : Fill in your Small Claims Case Number

Date Filed : 01/05/2024

The undersigned Clerk/Judge of the Court hereby certifies as follows:

- The above judgment was based on a tort claim as a result of a motor vehicle accident.
- The judgment was entered on 04/05/2024, and became final 05/05/2024, and remained unsatisfied for 30 days thereafter.
- Judgment was entered against Robert Smith

a. Bodily injury _____

d. Costs \$145.00

b. Damage to property \$5,600.00

e. Loss of use _____

c. Wrongful death _____

f. Any other ground _____

TOTAL \$5,745.00

- 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):

- The date of the accident was 10/10/2023

MONTH DAY YEAR

FOR DMV USE ONLY:
Answer all questions from #5 through #14. If the answer is unknown please indicate "Unknown" or "N/A"

- Did accident occur in California? Yes No

- Was the judgment awarded in a California court? Yes No

- The vehicle involved in the accident was owned by Robert Smith

- The vehicle involved in the accident was operated by Robert Smith

- The ownership of the vehicle resulted in a judgment against Robert Smith

- The operation of the vehicle resulted in a judgment against Robert Smith

- Debtor's vehicle information (vehicle involved in the accident) 3LNV123 2010 Honda

LICENSE PLATE NUMBER

YEAR

MAKE

- 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 Unknown F Unknown

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.

- Name, address and telephone number of judgment creditor or attorney: Sarah Lee/John Lee
123 Main St
Los Angeles, CA 90012 (213) 323-1234

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 06/19/2024

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 judgment has not been stayed or satisfied within the amounts specified in this chapter as shown by the records of the court.



DMV requires at least three forms of Identification to suspend the license:

1) Name 2) Address 3) Driver License Number or Date of Birth

Certificate of Facts RE Unsatisfied Judgment

(SEE INSTRUCTIONS ON NEXT PAGE)

Court Fee: \$52.00 30

DMV Fee: \$20.00

(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 Courthouse
(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. Mary Smith

Case No. : Fill in your Small Claims Case Number Date Filed : 01/05/2024

The undersigned Clerk/Judge of the Court hereby certifies as follows:

- The above judgment was based on a tort claim as a result of a motor vehicle accident.
- The judgment was entered on 04/05/2024, and became final 05/05/2024, and remained unsatisfied for 30 days thereafter.
MONTH DAY YEAR MONTH DAY YEAR
- Judgment was entered against Robert Smith, Mary Smith

- | | |
|---|---------------------------|
| a. Bodily injury _____ | d. Costs <u>\$145.00</u> |
| b. Damage to property <u>\$5,600.00</u> | e. Loss of use _____ |
| c. Wrongful death _____ | f. Any other ground _____ |
| | TOTAL <u>\$5,745.00</u> |

- 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):

- The date of the accident was 10/10/2023
MONTH DAY YEAR
- Did accident occur in California? Yes No
- Was the judgment awarded in a California court? Yes No
- The vehicle involved in the accident was owned by Robert Smith
- The vehicle involved in the accident was operated by Mary Smith
- The ownership of the vehicle resulted in a judgment against Robert Smith
- The operation of the vehicle resulted in a judgment against Mary Smith
- Debtor's vehicle information (vehicle involved in the accident) 3LNV123 2010 Honda
LICENSE PLATE NUMBER YEAR MAKE
- 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 _____ F Unknown
BIRTHDATE (Month, Day, Year) DEBTOR FORMER NAME(S) OR AKA ANY ADDITIONAL ADDRESS

****NOTE: FOR DMV USE ONLY:**
To suspend a DL for the second debtor, attach a sheet of paper with their identifying information

Include any additional judgment debtor(s) information on a separate sheet of paper.

- Name, address and telephone number of judgment creditor or attorney: Sarah Lee/John Lee
123 Main St
Los Angeles, CA 90012 (213) 323-1234

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 06/19/2024

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 judgment has not been stayed or satisfied within the amounts specified in this chapter as shown by the records of the court.



NOTICE OF UNSATISFIED JUDGMENT OF \$1,000 OR LESS

(\$750 or Less for Accidents Prior to January 1, 2017)

Court Fee \$37.50

(READ INSTRUCTIONS ON BACK BEFORE COMPLETING)

DMV Fee: \$20.00

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 Courthouse
(Include county, judicial district or division)

Court Code 19462
(Available from Court Clerk)

STATE OF CALIFORNIA

Plaintiff : Jane Doe Defendant : Lola Williams
vs. Donald Williams

Case No. : Fill in your Small Claims Case Number Date Filed : 01/04/2024

The above judgment was based on a tort claim as a result of a motor vehicle accident.

1. The judgment was entered on 03/14/2024, and became final 04/14/2024, 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) \$1,000.00

4. Was the judgment for damages resulting from an accident involving a motor vehicle driven by the judgment debtor? _____

5. Did the accident occur in California Yes

6. Date of accident 10/10/2023

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 09/23/2024 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 St

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: 04/14/2024

FOR DMV USE ONLY:

GOVERNMENT CLAIM-JUDICIAL BRANCH

(Government Code section 910.4)

Postmark date if received by mail: _____

CLAIMANT

| Name of Claimant | Home Telephone | Work Telephone |
|------------------|----------------|----------------|
| John Woods | 213-323-8577 | |

| Mailing Address | City | State | Zip Code |
|-----------------|-------------|-------|----------|
| 745 Sally Dr | Los Angeles | CA | 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) | Time of Incident |
|-----------------------------------|------------------|
| 04/22/2019 | 3:00 PM |

Location of Incident

Stanley Mosk Courthouse, 111 N Hill St, 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 04/22/2019 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 Commission. 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 Rd, Encino, 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).

John Woods

05/15/2019

Signature of Claimant or Authorized Representative (*check one*)

Date

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 the commission's website at <https://cjp.ca.gov>.

*** Indicates a required field**

Today's date: 09/08/2019

Your name:* Mary Jones

Your pronouns (e.g., he/him, she/her, they/them):

Your email:* mary.jones@gmail.com

Your telephone number:* 213-945-8518

Your address:* 588 Bird Ln, Los Angeles, CA 90008

Your attorney's name (if any):

Your attorney's email:

Your attorney's telephone number:

Name of judge:*

OR Name of court commissioner or referee:*

(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 Level:* Superior Court

County/Appellate District:* Los Angeles County

Court case type (e.g., none, criminal, family law, small claims):* Small Claims

Case name and number: Mary Jones vs. Macy's Inc. 19STSC54921

Your relationship to the case (e.g., litigant/family/friend, judge/court staff):* Plaintiff

Date or dates conduct occurred:* 08/05/2019

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 08:30 AM, 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 a 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."

Return to: Commission on Judicial Performance
455 Golden Gate Avenue, Suite 14400
San Francisco, California 94102

Telephone: (415) 557-1200

Fax: (415) 557-1266

**INSTRUCTIONS TO THE SHERIFF OF LOS ANGELES COUNTY
COURT SERVICES DIVISION - CIVIL MANAGEMENT BUREAU**

The Sheriff must have original signed instructions by the attorney or party without attorney pursuant to [CCP 262](#)
Service Fee \$40 pursuant to [GC 26721](#). The Sheriff is entitled to a \$35 fee for any "Not Found" service attempt pursuant to [GC 26738](#)
Cancel Service Fee is \$40 pursuant to [GC 26736](#)



| | | | |
|---|-----|----------------------|--------------------|
| ATTORNEY OR PARTY WITHOUT ATTORNEY | | Office Use Only | |
| NAME | | LAW FIRM | |
| <u>Jane Waters</u> | | | |
| STREET ADDRESS | | SUITE / APT | |
| <u>554 Goody Ave</u> | | | |
| CITY | | STATE | ZIP |
| <u>Los Angeles</u> | | <u>CA</u> | <u>90012</u> |
| TELEPHONE NO. | FAX | EMAIL | |
| <u>213-555-8486</u> | | | |
| PLAINTIFF | | DEFENDANT | CASE NO. |
| <u>Jane Waters</u> | | <u>Roberts Patts</u> | <u>18STSC19735</u> |
| SHERIFF'S OFFICE | | | |
| NAME | | TELEPHONE NO. | |
| <u>Los Angeles</u> | | <u>213-116-5755</u> | |
| ADDRESS | | | |
| <u>111 N Hill St, Los Angeles, CA 90012</u> | | | |

To the Los Angeles County Sheriff, you are instructed to:

Serve the Plaintiff's Claim and Order to Defendant as specified below. The small claims court hearing is scheduled to be heard in a court inside outside Los Angeles County on 07/30/2019 (date).

Defendant / Debtor / Person to be Served:

| | | | |
|--------------------------|---|-----------|--------------|
| NAME (natural person) | NAME OF BUSINESS (if any, include type of legal entity) | | |
| <u>Robert Patts</u> | | | |
| STREET ADDRESS | CITY | STATE | ZIP |
| <u>772 White Oak Ave</u> | <u>Los Angeles</u> | <u>CA</u> | <u>90018</u> |

Additional Information (defendant's description, work hours, etc.)

Robert Patts is usually home from 1:00 PM onwards.

Make all payments, refunds or notices to the following (if different from the party at the top of this form):

| | |
|-------------------|--|
| NAME | ADDRESS |
| <u>Jane Water</u> | <u>554 Goody Ae, Los Angeles, CA 90012</u> |

All instructions must be submitted by the above attorney or party (if no attorney.) All correspondence will be sent to said party.

| | |
|-------------------|--------------------|
| DATE | BY |
| <u>05/20/2019</u> | <u>Jane Waters</u> |

(SIGNATURE OF ABOVE ATTORNEY OR PARTY WITHOUT ATTORNEY)

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

Sheriff's File # (if re-levy) _____

John Smith
PLAINTIFF'S NAME

Vs. Mega Store Inc.
DEFENDANT'S NAME

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

Address: _____

City & Zip: Sacramento, CA 95833

City & Zip: _____

Phone: _____

Phone: _____

Employer's Name: _____

Employer's Name: _____

Address: _____

Address: _____

City & Zip: _____

City & Zip: _____

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 **DATE:** 04/08/2019
(Required) Party (In Pro Per) or Party's Attorney requesting service

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: (____) _____ **MOBILE PHONE:** (213) 123-4567

*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

OFFICE USE ONLY

PLAINTIFF'S CLAIM

- Pltf's Claim & Order to go to Small Claim's Court
- Small Claims Mediation Page **AND** Your Small Claims Case
- Attachments
- Exhibits
- Other Plaintiff's and Defendant's

SCUD

- Summons AND Complaint
- Civil Case Cover Sheet
- Attachment (S)
- Exhibits (S)
- Pre Judgment Claim of Right

SUMMONS AND PETITION

- Summons (__Amended)
- Standard Restraining Order (SRO)
- Petition (__Amended)
 - i. Dissolution of Marriage
 - ii. To Establish Parental Relationships
 - iii. For Custody and Support of Minor Children
- Addt'l Provisions-Physical Cust Attach (__BLNK__COMP)
- Attached Declaration (__BLNK__COMP)
- Attachments
- Blank Response
- Child Cust & Visit (Parent Time) Order Attach (__BLNK__COMP)
- Children's Holiday Sched Attach (__BLNK__COMP)
- DUUCCJEA (__BLNK__COMP)
- Attachment to DUUCCJEA
- Exhibits
- Family Centered Case Resolution Notice
- Income & Expense (__BLNK__COMP)
- Joint Legal Custody Attachment (__BLNK__COMP)
- Notice of Rights and Responsibilities
- POS by Mail
- Schedule of Assets and Debts (__BLNK__COMP)
- _____
- _____
- _____
- _____

SUMMONS AND COMPLAINT

- Summons (__Amended)
- Complaint (__Amended)
- Attachments
- Cause of Action-_____
- Cause of Action-_____
- Cause of Action-_____
- Civil Case Cover Sheet
- Exhibits
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

REQUEST FOR ORDER

- Request for Order (RFO)
- Family Law Case Demographic Sheet
- Attached Declaration (__BLANK__COMPLETE)
- Notice of Rights and Responsibilities
- POS by Mail
- _____
- _____
- _____
- _____

OTHER

- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

| | | |
|---|----------------|--|
| ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name and Address</i>): Mary Brooks 1293 Boardwalk Blvd Bronx, NY 10372 | TELEPHONE NO.: | FOR COURT USE ONLY -File with Civil Clerk -See Procedure Manual -Incoming State or County |
| ATTORNEY FOR (<i>Name</i>): NAME OF COURT: STREET ADDRESS: 111 N Hill St MAILING ADDRESS: Los Angeles 90012 CITY AND ZIP CODE: BRANCH NAME: Stanley Mosk Courthouse | | |
| 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: 20STSC0123X |

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 Pratts**
 - b. An individual (*last known residence address*):
 - 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: \$ **5,700.00**
 b. Amount of filing fee for the application: \$ **435.00**
 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:

Brooks vs. Patts

CASE NUMBER:

20STSC0123X

- 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:

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: 06/03/2024

Mary Brooks

(TYPE OR PRINT NAME)

Mary Brooks

(SIGNATURE OF JUDGMENT CREDITOR OR ATTORNEY)

| | | |
|--|----------------|---|
| ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name and Address</i>): Mary Brooks 1293 Boardwalk Blvd Bronx, NY 10372 | TELEPHONE NO.: | FOR COURT USE ONLY - File with Civil Court - See Procedural Manual |
| ATTORNEY FOR (<i>Name</i>): NAME OF COURT: STREET ADDRESS: 111 N Hill St MAILING ADDRESS: Los Angeles, 90012 CITY AND ZIP CODE: Stanley Mosk Courthouse BRANCH NAME: | | |
| PLAINTIFF: Mary Brooks DEFENDANT: David Patts | | |
| NOTICE OF ENTRY OF JUDGMENT ON SISTER-STATE JUDGMENT | | CASE NUMBER: 20STSC0123X |

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*): **11/01/2019**

(4) Title of case and case number (*specify*): **Patts vs. Brooks, 08NY4512785**

****NOTE: This is the case name and number issued by the NY court.**

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)

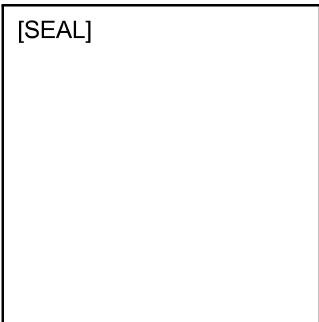
other:

CCP 416.60 (minor)

CCP 416.70 (conservatee)

CCP 416.90 (individual)

(Proof of service on reverse)



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: **David Patts**
- a. on judgment debtor (*name*):
- b. by serving judgment debtor other (*name and title or relationship to person served*):
- c. by delivery at home at business
(1) date: **12/1/2019**
(2) time: **10:00 AM**
(3) address: **8754 Main St, Los Angeles, CA 90012**
- 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. **Mail 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 416.60 (minor) other:
 CCP 416.20 (defunct corporation) CCP 416.70 (conservatee)
 CCP 416.40 (association or partnership) CCP 416.90 (individual)
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: \$
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.

Date: **12/05/2024**

▶ *Marty Right*

(SIGNATURE)

[EJ-110]

(For California sheriff, marshal, or constable use only)
I certify that the foregoing is true and correct.

Date:

▶ _____

(SIGNATURE)

| | |
|---|--|
| ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>name and address</i>): After recording, return to: Paul Jones 456 Goodland Ave Los Angeles, CA 90024 TEL NO.: _____ FAX NO. (<i>optional</i>): _____ EMAIL ADDRESS (<i>optional</i>): _____ <input type="checkbox"/> ATTORNEY FOR <input checked="" type="checkbox"/> ORIGINAL JUDGMENT CREDITOR <input type="checkbox"/> ASSIGNEE OF RECORD | |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 N Hill St MAILING ADDRESS: _____ CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Stanley Mosk Courthouse | FOR RECORDER'S USE ONLY |
| PLAINTIFF/PETITIONER: Paul Jones DEFENDANT/RESPONDENT: Susan Smith | LEVYING OFFICER (<i>name and address</i>): _____ |
| NOTICE OF LEVY under Writ of <input checked="" type="checkbox"/> Execution (Money Judgment) <input type="checkbox"/> Sale | LEVYING OFFICER FILE NO.: _____ COURT CASE NO.: 21STSC12345 |

TO THE PERSON NOTIFIED (*name*): **Wells Fargo Bank**

1. The judgment creditor seeks to levy upon property in which the judgment debtor has an interest and apply it to the satisfaction of a judgment as follows:

a. Judgment debtor (*name*): **Susan Smith**

b. The property to be levied upon is described:

in the accompanying writ of possession or writ of sale.

as follows:

Levy on any and all deposit accounts, certificates of deposit, trust accounts, IRA's or other instruments standing in the lane of the judgment debtor, Susan Smith.

2. The judgment is for (*check one*):

wages owed.

child/spousal support.

other.

3. The amount necessary to satisfy the judgment creditor's judgment writ is

| | |
|---|--------------------|
| a. Total amount due (less partial satisfactions) from line 18 of writ (form EJ-130) | \$ 4,449.42 |
| b. Levy fee | \$ 40.00 |
| c. Sheriff's disbursement fee | \$ 12.00 |
| d. Recoverable costs | \$ 0.00 |
| e. Total (<i>a through d</i>) | \$ 4,501.42 |
| f. Daily interest from line 19a of writ (form EJ-130) | \$ 1.20 |

4. You are notified as:

a. a judgment debtor.

b. a person other than the judgment debtor (*state capacity in which person is notified*):

A financial institution in possession of funds.

(Read Information for Judgment Debtor or Information for Person Other Than Judgment Debtor on page two.)

Notice of Levy was

mailed on (*date*):

delivered on (*date*):

posted on (*date*):

filed on (*date*):

recorded on (*date*):

Date:

(TYPE OR PRINT NAME)



(SIGNATURE)

Levying officer

Registered process server

SER-001

Request for Sheriff to Serve Court Papers

Instructions: Each county in California has a sheriff (and sometimes a marshal's office) that can serve different types of court papers, including restraining orders. Note that the sheriff cannot guarantee that they will be successful in finding the person you need served, but they will try to serve based on the information you put on this form.

- Complete this form for each set of papers you need served. You must complete a separate form for each person you need served.
- Find out where the person you need served is located. Give your papers to the sheriff or marshal's office in that county.
- You may have to pay for service of some court papers. For more information, see page 5 of this form, or go to <https://selfhelp.courts.ca.gov/sheriff-serves>.
- Do not use this form if you are asking the sheriff to enforce a wage garnishment order on an employer. Instead, use forms WG-001, *Application for Earnings Withholding Order*, and WG-035, *Confidential Statement of Judgment Debtor's Social Security Number*.
- If you want the sheriff to enforce a writ or levy, complete this form and form SER-001A, *Special Instructions for Writs and Levies—Attachment*.

CONFIDENTIAL

To Court Clerk: Do not file this form.

Sheriff File Number (for sheriff to complete, if needed):

Fill in case number:

Court Case Number:

Fill in your Case Number

***Serving an Individual**

All information is required unless it is listed as optional or does not apply to your case.

① To the Sheriff or Marshal of (name of county): Los Angeles (Must be the County of where the service will be completed)

② Your Information

a. Your name (party requesting service): Susan Jones

b. Your lawyer's information (if you have one)

Name: _____

Firm name: _____

c. Court case name: Jones v. Smith
(example: Garcia v. Smith)

d. Contact information for the sheriff or marshal to reach you

(Give an address where you can receive mail regularly, like a post office box, a Safe at Home address, or another safe address. If you have a lawyer, give the lawyer's information.)

Address to receive mail: 1234 Goodland Ave

City: North Hollywood State: CA Zip: 91605

Telephone number (optional): _____ Email address (optional): _____

CONFIDENTIAL

This is not a court form. Do not file with the court.

3 Information About Person or Entity You Want Served

(Check a or b)

a. I ask the sheriff to serve a person (complete section below)

(1) Name of person: John Smith
Nicknames or aliases (optional): _____

(2) Telephone number (optional): (818) 555-XXXX

(3) Can you describe the person?

No, I do not have any information about the person's description.

Yes (complete the section below with any information you have):

Gender: Male Female Nonbinary

Height: 6FT Weight: 200LBS Hair color: BR Eye color: BR

Date of birth or age (give estimate, if unknown): 50 Years

Race/Ethnicity: White

Special marks or features (tattoos, scars, etc.): Unknown

Vehicle (type, model, year, color, plate number): Unknown

Check here if you are including a picture of the person.

(4) Do you know of any safety or accessibility issues?

No

Yes (complete the section below with any information you have):

The person (check all that apply):

Has a gun or other weapon.

Is on probation or parole.

Has a history of violence or abuse.

Has an aggressive animal.

Has special training (examples: military, first responder).

Has mental health issues.

Is deaf or hard of hearing.

Does not speak English (list language): _____

Add any other information about safety or accessibility that you know about:

b. I ask the sheriff to serve an entity (examples: business or government agency)

(1) Name and type of entity: _____
Telephone number (optional): _____

(2) If there is a specific person who should be served, give name: _____

(3) If there is an agent for service of process, give name: _____

(4) List any safety or accessibility issues (examples: weapons, aggressive animals, language barrier):

CONFIDENTIAL

This is not a court form. Do not file with the court.



4 Address Where Person or Entity Should Be Served

(The sheriff typically serves during normal business hours. Check with the sheriff's office for the exact times.)

Address: 987 White Oak [X] Home [] Business

City: Encino State: CA Zip: 91310

Gate code or special instructions:

Best time to serve at this address (example: 8 a.m.–noon): 6AM-7AM early morning before work

[] Check here if the person is in jail or prison (give name of facility):

Alternate address (optional)

(If the person cannot be found at the address listed above, some sheriffs may try a second address if it's in the same county. If you have a second address for the person you want served, complete the section below.)

Address: [] Home [] Business

City: State: Zip:

Gate code or special instructions:

Best time to serve at this address (example: 8 a.m.–noon):

5 Information About Your Request

a. What type of court papers are you giving the sheriff to serve (examples: summons, restraining order, eviction, small claims, bank levy, or writ of attachment)?

Small Claims

b. List all forms or court papers you want served on the person in (3) a. (optional).

(Note: You can list each form by its form number (example: FL-100, SC-100). If there is no form number, give the title of the document. The court may have ordered you to serve certain papers. Look at the court's order and list all forms required. If you do not know which papers you need to serve, ask a lawyer, or contact your local self-help center for free information.)

SC-100 Plaintiff's Claim

c. Is there a court hearing (court date)?

[] I don't know

[] No

[X] Yes (if yes, give date of hearing): 02/16/2024

CONFIDENTIAL

This is not a court form. Do not file with the court.



5

d. Is there a deadline for service?

I don't know

No

Yes (if yes, give deadline): 02/01/2024

e. Has the court allowed you to serve your court papers in another way besides personal service (example: substituted service)?

I don't know

No

Yes (if yes, include a copy of the order allowing another type of service)

f. Is there any other information you want or need to give to the sheriff to serve your court papers?

No

Yes (if yes, give information below):

Serve court papers by personal service. But if John Smith is unavailable then serve through substituted service.

6

Enforcement of Writ or Levy

If you want the sheriff to enforce a writ or levy, you must complete form SER-001A, *Special Instructions for Writs and Levies—Attachment*, and turn it in with this form.

(Only complete this section if you want the sheriff to enforce a writ or levy.)

Do you want the sheriff to both serve your court papers and act as levying officer?

Yes

No. I only want the sheriff to act as levying officer. A registered process server has or will serve my papers.

Your Signature (party asking for service, or their lawyer)

Date: 01/12/2024

Susan Jones

Type or print your name



Susan Jones

Sign your name (may be electronic)

CONFIDENTIAL

This is not a court form. Do not file with the court.



SER-001

Request for Sheriff to Serve Court Papers

Instructions: Each county in California has a sheriff (and sometimes a marshal's office) that can serve different types of court papers, including restraining orders. Note that the sheriff cannot guarantee that they will be successful in finding the person you need served, but they will try to serve based on the information you put on this form.

- Complete this form for each set of papers you need served. You must complete a separate form for each person you need served.
- Find out where the person you need served is located. Give your papers to the sheriff or marshal's office in that county.
- You may have to pay for service of some court papers. For more information, see page 5 of this form, or go to <https://selfhelp.courts.ca.gov/sheriff-serves>.
- Do not use this form if you are asking the sheriff to enforce a wage garnishment order on an employer. Instead, use forms WG-001, *Application for Earnings Withholding Order*, and WG-035, *Confidential Statement of Judgment Debtor's Social Security Number*.
- If you want the sheriff to enforce a writ or levy, complete this form and form SER-001A, *Special Instructions for Writs and Levies—Attachment*.

CONFIDENTIAL

To Court Clerk: Do not file this form.

Sheriff File Number (for sheriff to complete, if needed):

Fill in case number:

Court Case Number:

Fill in your Case Number

***Serving a Corporation**

All information is required unless it is listed as optional or does not apply to your case.

1 To the Sheriff or Marshal of (name of county): Los Angeles (Must be the County of where the service will be completed)

2 Your Information

a. Your name (party requesting service): Susan Jones

b. Your lawyer's information (if you have one)

Name: _____

Firm name: _____

c. Court case name: Jones v. Good Times Properties, A Corporation

(example: Garcia v. Smith)

d. Contact information for the sheriff or marshal to reach you

(Give an address where you can receive mail regularly, like a post office box, a Safe at Home address, or another safe address. If you have a lawyer, give the lawyer's information.)

Address to receive mail: 1234 Goodland Ave

City: North Hollywood State: CA Zip: 91605

Telephone number (optional): _____ Email address (optional): _____

CONFIDENTIAL

This is not a court form. Do not file with the court.

3 Information About Person or Entity You Want Served

(Check a or b)

a. I ask the sheriff to serve a person (complete section below)

(1) Name of person: _____
Nicknames or aliases (optional): _____

(2) Telephone number (optional): _____

(3) Can you describe the person?

No, I do not have any information about the person's description.

Yes (complete the section below with any information you have):

Gender: Male Female Nonbinary

Height: _____ Weight: _____ Hair color: _____ Eye color: _____

Date of birth or age (give estimate, if unknown): _____

Race/Ethnicity: _____

Special marks or features (tattoos, scars, etc.): _____

Vehicle (type, model, year, color, plate number): _____

Check here if you are including a picture of the person.

(4) Do you know of any safety or accessibility issues?

No

Yes (complete the section below with any information you have):

The person (check all that apply):

Has a gun or other weapon.

Is on probation or parole.

Has a history of violence or abuse.

Has an aggressive animal.

Has special training (examples: military, first responder).

Has mental health issues.

Is deaf or hard of hearing.

Does not speak English (list language): _____

Add any other information about safety or accessibility that you know about:

b. I ask the sheriff to serve an entity (examples: business or government agency)

(1) Name and type of entity: **Good Times Properties, A Corporation**
Telephone number (optional): _____

(2) If there is a specific person who should be served, give name: _____

(3) If there is an agent for service of process, give name: **David Green**

(4) List any safety or accessibility issues (examples: weapons, aggressive animals, language barrier):

CONFIDENTIAL

This is not a court form. Do not file with the court.



4 Address Where Person or Entity Should Be Served

(The sheriff typically serves during normal business hours. Check with the sheriff's office for the exact times.)

Address: 1234 Ventura Blvd Home Business

City: Encino State: CA Zip: 91436

Gate code or special instructions: _____

Best time to serve at this address (example: 8 a.m.–noon): 9:00AM - 5:00PM

Check here if the person is in jail or prison (give name of facility): _____

Alternate address (optional)

(If the person cannot be found at the address listed above, some sheriffs may try a second address if it's in the same county. If you have a second address for the person you want served, complete the section below.)

Address: _____ Home Business

City: _____ State: _____ Zip: _____

Gate code or special instructions: _____

Best time to serve at this address (example: 8 a.m.–noon): _____

5 Information About Your Request

a. What type of court papers are you giving the sheriff to serve (examples: summons, restraining order, eviction, small claims, bank levy, or writ of attachment)?

Small Claims

b. List all forms or court papers you want served on the person in (3) a. (optional).

(Note: You can list each form by its form number (example: FL-100, SC-100). If there is no form number, give the title of the document. The court may have ordered you to serve certain papers. Look at the court's order and list all forms required. If you do not know which papers you need to serve, ask a lawyer, or contact your local self-help center for free information.)

SC-100 Plaintiff's Claim and ORDER to Go to Small Claims Court

c. Is there a court hearing (court date)?

I don't know

No

Yes (if yes, give date of hearing): 02/16/2024

CONFIDENTIAL

This is not a court form. Do not file with the court.



5

d. Is there a deadline for service?

I don't know

No

Yes (if yes, give deadline): 01/22/2024

e. Has the court allowed you to serve your court papers in another way besides personal service (example: substituted service)?

I don't know

No

Yes (if yes, include a copy of the order allowing another type of service)

f. Is there any other information you want or need to give to the sheriff to serve your court papers?

No

Yes (if yes, give information below):

Serve by Substituted Service by serving David Green who is the Agent for Service of Process for Good Times Properties, A Corporation

6

Enforcement of Writ or Levy

If you want the sheriff to enforce a writ or levy, you must complete form SER-001A, *Special Instructions for Writs and Levies—Attachment*, and turn it in with this form.

(Only complete this section if you want the sheriff to enforce a writ or levy.)

Do you want the sheriff to both serve your court papers and act as levying officer?

Yes

No. I only want the sheriff to act as levying officer. A registered process server has or will serve my papers.

Your Signature (party asking for service, or their lawyer)

Date: 01/12/2024

Susan Jones

Type or print your name



Susan Jones

Sign your name (may be electronic)

CONFIDENTIAL

This is not a court form. Do not file with the court.



SER-001

Request for Sheriff to Serve Court Papers

CONFIDENTIAL

To Court Clerk: Do not file this form.

Sheriff File Number (for sheriff to complete, if needed):

Fill in case number:

Court Case Number:

Fill in your Case Number

***Bank Levy
Bank of America**

Instructions: Each county in California has a sheriff (and sometimes a marshal’s office) that can serve different types of court papers, including restraining orders. Note that the sheriff cannot guarantee that they will be successful in finding the person you need served, but they will try to serve based on the information you put on this form.

- Complete this form for each set of papers you need served. You must complete a separate form for each person you need served.
- Find out where the person you need served is located. Give your papers to the sheriff or marshal’s office in that county.
- You may have to pay for service of some court papers. For more information, see page 5 of this form, or go to <https://selfhelp.courts.ca.gov/sheriff-serves>.
- Do not use this form if you are asking the sheriff to enforce a wage garnishment order on an employer. Instead, use forms WG-001, *Application for Earnings Withholding Order*, and WG-035, *Confidential Statement of Judgment Debtor’s Social Security Number*.
- If you want the sheriff to enforce a writ or levy, complete this form and form SER-001A, *Special Instructions for Writs and Levies—Attachment*.

All information is required unless it is listed as optional or does not apply to your case.

1 **To the Sheriff or Marshal of (name of county):** Los Angeles (Must be the County of where the service will be completed)

2 **Your Information**

a. Your name (party requesting service): Susan Jones

b. Your lawyer’s information (if you have one)

Name: _____

Firm name: _____

c. Court case name: Jones v. Smith

(example: Garcia v. Smith)

d. Contact information for the sheriff or marshal to reach you

(Give an address where you can receive mail regularly, like a post office box, a Safe at Home address, or another safe address. If you have a lawyer, give the lawyer’s information.)

Address to receive mail: 1234 Goodland Ave

City: North Hollywood State: CA Zip: 91605

Telephone number (optional): _____ Email address (optional): _____

CONFIDENTIAL

This is not a court form. Do not file with the court.

3 Information About Person or Entity You Want Served

(Check a or b)

a. I ask the sheriff to serve a person (complete section below)

(1) Name of person: _____
Nicknames or aliases (optional): _____

(2) Telephone number (optional): _____

(3) Can you describe the person?

No, I do not have any information about the person's description.

Yes (complete the section below with any information you have):

Gender: Male Female Nonbinary

Height: _____ Weight: _____ Hair color: _____ Eye color: _____

Date of birth or age (give estimate, if unknown): _____

Race/Ethnicity: _____

Special marks or features (tattoos, scars, etc.): _____

Vehicle (type, model, year, color, plate number): _____

Check here if you are including a picture of the person.

(4) Do you know of any safety or accessibility issues?

No

Yes (complete the section below with any information you have):

The person (check all that apply):

Has a gun or other weapon.

Is on probation or parole.

Has a history of violence or abuse.

Has an aggressive animal.

Has special training (examples: military, first responder).

Has mental health issues.

Is deaf or hard of hearing.

Does not speak English (list language): _____

Add any other information about safety or accessibility that you know about:

b. I ask the sheriff to serve an entity (examples: business or government agency)

(1) Name and type of entity: **Bank of America, N.A.**

Telephone number (optional): _____

(2) If there is a specific person who should be served, give name: _____

(3) If there is an agent for service of process, give name: **CT Corporation System**

(4) List any safety or accessibility issues (examples: weapons, aggressive animals, language barrier):

CONFIDENTIAL

This is not a court form. Do not file with the court.



4 Address Where Person or Entity Should Be Served

(The sheriff typically serves during normal business hours. Check with the sheriff's office for the exact times.)

Address: 330 North Brand Blvd Suite 700 Home Business

City: Glendale State: CA Zip: 91203

Gate code or special instructions: _____

Best time to serve at this address (example: 8 a.m.–noon): 9:00AM - 2:00PM

Check here if the person is in jail or prison (give name of facility): _____

Alternate address (optional)

(If the person cannot be found at the address listed above, some sheriffs may try a second address if it's in the same county. If you have a second address for the person you want served, complete the section below.)

Address: _____ Home Business

City: _____ State: _____ Zip: _____

Gate code or special instructions: _____

Best time to serve at this address (example: 8 a.m.–noon): _____

5 Information About Your Request

a. What type of court papers are you giving the sheriff to serve (examples: summons, restraining order, eviction, small claims, bank levy, or writ of attachment)?

Bank Levy

b. List all forms or court papers you want served on the person in (3) a. (optional).

(Note: You can list each form by its form number (example: FL-100, SC-100). If there is no form number, give the title of the document. The court may have ordered you to serve certain papers. Look at the court's order and list all forms required. If you do not know which papers you need to serve, ask a lawyer, or contact your local self-help center for free information.)

EJ-130 Writ of Execution

c. Is there a court hearing (court date)?

I don't know

No

Yes (if yes, give date of hearing): _____

CONFIDENTIAL

This is not a court form. Do not file with the court.



- 5 d. Is there a deadline for service?
 I don't know
 No
 Yes (if yes, give deadline): Before the Expiration of the EJ-130 Writ of Execution
- e. Has the court allowed you to serve your court papers in another way besides personal service (example: substituted service)?
 I don't know
 No
 Yes (if yes, include a copy of the order allowing another type of service)
- f. Is there any other information you want or need to give to the sheriff to serve your court papers?
 No
 Yes (if yes, give information below):

6 Enforcement of Writ or Levy

If you want the sheriff to enforce a writ or levy, you must complete form SER-001A, Special Instructions for Writs and Levies—Attachment, and turn it in with this form.

(Only complete this section if you want the sheriff to enforce a writ or levy.)

- Do you want the sheriff to both serve your court papers and act as levying officer?
 Yes
 No. I only want the sheriff to act as levying officer. A registered process server has or will serve my papers.

Your Signature (party asking for service, or their lawyer)

Date: 02/14/2024

Susan Jones
Type or print your name

▶ _____
Susan Jones
Sign your name (may be electronic)

CONFIDENTIAL

This is not a court form. Do not file with the court.



SER-001

Request for Sheriff to Serve Court Papers

CONFIDENTIAL

To Court Clerk: Do not file this form.

Sheriff File Number (for sheriff to complete, if needed):

Fill in case number:

Court Case Number:
Fill in your Case Number

***Bank Levy
Wells Fargo Bank**

Instructions: Each county in California has a sheriff (and sometimes a marshal’s office) that can serve different types of court papers, including restraining orders. Note that the sheriff cannot guarantee that they will be successful in finding the person you need served, but they will try to serve based on the information you put on this form.

- Complete this form for each set of papers you need served. You must complete a separate form for each person you need served.
- Find out where the person you need served is located. Give your papers to the sheriff or marshal’s office in that county.
- You may have to pay for service of some court papers. For more information, see page 5 of this form, or go to <https://selfhelp.courts.ca.gov/sheriff-serves>.
- Do not use this form if you are asking the sheriff to enforce a wage garnishment order on an employer. Instead, use forms WG-001, *Application for Earnings Withholding Order*, and WG-035, *Confidential Statement of Judgment Debtor’s Social Security Number*.
- If you want the sheriff to enforce a writ or levy, complete this form and form SER-001A, *Special Instructions for Writs and Levies—Attachment*.

All information is required unless it is listed as optional or does not apply to your case.

1 **To the Sheriff or Marshal of (name of county):** Los Angeles (Must be the County of where the service will be completed)

2 **Your Information**

a. Your name (party requesting service): Susan Jones

b. Your lawyer’s information (if you have one)

Name: _____

Firm name: _____

c. Court case name: Jones v. Smith

(example: Garcia v. Smith)

d. Contact information for the sheriff or marshal to reach you

(Give an address where you can receive mail regularly, like a post office box, a Safe at Home address, or another safe address. If you have a lawyer, give the lawyer’s information.)

Address to receive mail: 1234 Goodland Ave

City: North Hollywood State: CA Zip: 91605

Telephone number (optional): _____ Email address (optional): _____

CONFIDENTIAL

This is not a court form. Do not file with the court.

3 Information About Person or Entity You Want Served

(Check a or b)

a. I ask the sheriff to serve a person (complete section below)

(1) Name of person: _____
Nicknames or aliases (optional): _____

(2) Telephone number (optional): _____

(3) Can you describe the person?

No, I do not have any information about the person's description.

Yes (complete the section below with any information you have):

Gender: Male Female Nonbinary

Height: _____ Weight: _____ Hair color: _____ Eye color: _____

Date of birth or age (give estimate, if unknown): _____

Race/Ethnicity: _____

Special marks or features (tattoos, scars, etc.): _____

Vehicle (type, model, year, color, plate number): _____

Check here if you are including a picture of the person.

(4) Do you know of any safety or accessibility issues?

No

Yes (complete the section below with any information you have):

The person (check all that apply):

Has a gun or other weapon.

Is on probation or parole.

Has a history of violence or abuse.

Has an aggressive animal.

Has special training (examples: military, first responder).

Has mental health issues.

Is deaf or hard of hearing.

Does not speak English (list language): _____

Add any other information about safety or accessibility that you know about:

b. I ask the sheriff to serve an entity (examples: business or government agency)

(1) Name and type of entity: **Wells Fargo Bank**

Telephone number (optional): **(818) 380-2580**

(2) If there is a specific person who should be served, give name: **Authorized Agent**

(3) If there is an agent for service of process, give name: _____

(4) List any safety or accessibility issues (examples: weapons, aggressive animals, language barrier):

CONFIDENTIAL

This is not a court form. Do not file with the court.



4 Address Where Person or Entity Should Be Served

(The sheriff typically serves during normal business hours. Check with the sheriff's office for the exact times.)

Address: 17232 Ventura Blvd Home Business

City: Encino State: CA Zip: 91316

Gate code or special instructions: _____

Best time to serve at this address (example: 8 a.m.–noon): 9:00AM - 5:00 PM

Check here if the person is in jail or prison (give name of facility): _____

Alternate address (optional)

(If the person cannot be found at the address listed above, some sheriffs may try a second address if it's in the same county. If you have a second address for the person you want served, complete the section below.)

Address: _____ Home Business

City: _____ State: _____ Zip: _____

Gate code or special instructions: _____

Best time to serve at this address (example: 8 a.m.–noon): _____

5 Information About Your Request

a. What type of court papers are you giving the sheriff to serve (examples: summons, restraining order, eviction, small claims, bank levy, or writ of attachment)?

Bank Levy

b. List all forms or court papers you want served on the person in (3) a. (optional).

(Note: You can list each form by its form number (example: FL-100, SC-100). If there is no form number, give the title of the document. The court may have ordered you to serve certain papers. Look at the court's order and list all forms required. If you do not know which papers you need to serve, ask a lawyer, or contact your local self-help center for free information.)

EJ-130 Writ of Execution

c. Is there a court hearing (court date)?

I don't know

No

Yes (if yes, give date of hearing): _____

CONFIDENTIAL

This is not a court form. Do not file with the court.



5

d. Is there a deadline for service?

I don't know

No

Yes (if yes, give deadline): Before the expiration of the EJ-130 Writ of Execution

e. Has the court allowed you to serve your court papers in another way besides personal service (example: substituted service)?

I don't know

No

Yes (if yes, include a copy of the order allowing another type of service)

f. Is there any other information you want or need to give to the sheriff to serve your court papers?

No

Yes (if yes, give information below):

6

Enforcement of Writ or Levy

If you want the sheriff to enforce a writ or levy, you must complete form SER-001A, *Special Instructions for Writs and Levies—Attachment*, and turn it in with this form.

(Only complete this section if you want the sheriff to enforce a writ or levy.)

Do you want the sheriff to both serve your court papers and act as levying officer?

Yes

No. I only want the sheriff to act as levying officer. A registered process server has or will serve my papers.

Your Signature (party asking for service, or their lawyer)

Date: 02/14/2024

Susan Jones
Type or print your name



Susan Jones
Sign your name (may be electronic)

CONFIDENTIAL

This is not a court form. Do not file with the court.



SER-001A

Special Instructions for Writs and Levies—Attachment

CONFIDENTIAL

Sheriff File Number (for sheriff to complete, if needed):

Fill in case number:

Court Case Number:
Fill in your Case Number

***Bank Levy
Bank of America**

Instructions

Generally, you **will not** need to complete this form if you are asking the sheriff to serve a complaint (unless with a writ of attachment) or a restraining order.

- Complete this form if you want the sheriff or marshal to enforce a writ. You must complete this form and form SER-001, *Request for Sheriff to Serve Court Paper*, and turn both forms in to the sheriff or marshal.
- You must include any writ and related order you want the sheriff to enforce.

This form is attached to form SER-001, *Request for Sheriff to Serve Court Papers*.

All information is required unless it is listed as optional or does not apply to your case.

For more information about what may be required in your case, go to <https://selfhelp.courts.ca.gov/sheriff-serves>.

1 Additional Information About You (Person Requesting Service)

Are you a judgment creditor (person awarded money or property by the court)?

Yes

No (complete the section below):

(a) What is your role in the case?: _____

(b) Is there a judgment creditor in your case?

No

Yes (list the names of all judgment creditors):

2 Additional Information About Person or Entity You Want Served

The person or entity you want served (listed in item 3 of form SER-001):
(check one)

Owes you money in this case (judgment debtor).

Is not a party in this case but has the property.

Is a person who lives on the property.

Other (explain):

CONFIDENTIAL

This is not a court form. Do not file with the court.

3 Information About the Writ and Judgment

a. Date writ was issued: 01/18/2024

- b. The writ included with this request is (check one):
 - An original writ.
 - A copy of the original writ issued by the court as an electronic record and has not already been given to the levying officer (sheriff or marshal).
 - A copy of the original writ that has already been given to the levying officer (sheriff or marshal).

- c. Has a judgment been issued by the court?
 - No
 - Yes (complete section below):
 - (1) Date judgment was issued: 11/22/2023
 - (2) If it is a money judgment, give amount: \$10,115.00
 - (3) List all judgment debtors (people who owe money) if there are any in this case:
If the judgment debtor is not a person, also include the type of organization (example: corporation).
John Smith

4 Information About the Property to Levy

- a. Describe the property in as much detail as possible. For example:
 - For bank accounts, give account number (if known).
 - For personal property, describe property and give the address where property is located.
 - For vehicles, give license plate number and address where vehicle is located.
 - For evictions, give address, and any information needed to access the property.
 - For real property (other than evictions), give legal description, address, and assessor’s parcel number.
 - If requester is not the person receiving the property, give clear instructions on who will receive the property and how.

Bank of America, N.A. Bank Account

Check here if you are including a map or other document to describe property.

CONFIDENTIAL

This is not a court form. Do not file with the court.



4 b. Is the property in the judgment debtor’s name?

Yes

No (list the names of owners and explain their interest in the property, including any leasehold interest):

(Note: You may also need to have the people listed above served with your court papers. Check the Code of Civil Procedure for service requirements or talk with a lawyer. Your local court self-help center provides help for free and may be able to help you. To find your local self-help center, go to www.selfhelp.courts.ca.gov/find.)

c. Are you asking the sheriff to levy on property that is a dwelling (a place someone can live in)?

No

Yes (complete the section below):

The dwelling is (check one):

Real property (examples: house, condo, other building attached to land)

Personal property (examples: house boat, RV)

5 Special Instructions for Sheriff

In some situations, you will have to give detailed instructions on how you want the sheriff to enforce the order. Use the space below to list any instructions. Some examples of when instructions may be needed include:

- Instructions to serve the summons and complaint with a writ of attachment, if not previously served (see Code of Civil Procedure section 488.020(c)).
- Instructions that the levying officer must place a keeper in charge of the property (see Code of Civil Procedure sections 700.070 and 700.080).
- Instructions to seize personal property from a private place (see Code of Civil Procedure section 699.030).

Check here if you need more space to list instructions. Use a separate piece of paper and write “SER-001A, Special Instructions for Sheriff” at the top. Turn it in with this form.

CONFIDENTIAL

This is not a court form. Do not file with the court.

SER-001A

Special Instructions for Writs and Levies—Attachment

CONFIDENTIAL

Sheriff File Number (for sheriff to complete, if needed):

Fill in case number:
Court Case Number:
Fill in your Case Number

Instructions

Generally, you **will not** need to complete this form if you are asking the sheriff to serve a complaint (unless with a writ of attachment) or a restraining order.

- Complete this form if you want the sheriff or marshal to enforce a writ. You must complete this form and form SER-001, *Request for Sheriff to Serve Court Paper*, and turn both forms in to the sheriff or marshal.
- You must include any writ and related order you want the sheriff to enforce.

***Bank Levy
Wells Fargo Bank**

This form is attached to form SER-001, *Request for Sheriff to Serve Court Papers*.

All information is required unless it is listed as optional or does not apply to your case.

For more information about what may be required in your case, go to <https://selfhelp.courts.ca.gov/sheriff-serves>.

1 Additional Information About You (Person Requesting Service)

Are you a judgment creditor (person awarded money or property by the court)?

Yes

No (complete the section below):

(a) What is your role in the case?: _____

(b) Is there a judgment creditor in your case?

No

Yes (list the names of all judgment creditors):

2 Additional Information About Person or Entity You Want Served

The person or entity you want served (listed in item 3 of form SER-001):
(check one)

Owes you money in this case (judgment debtor).

Is not a party in this case but has the property.

Is a person who lives on the property.

Other (explain):

CONFIDENTIAL

This is not a court form. Do not file with the court.

3 Information About the Writ and Judgment

a. Date writ was issued: 01/18/2024

- b. The writ included with this request is (check one):
 - An original writ.
 - A copy of the original writ issued by the court as an electronic record and has not already been given to the levying officer (sheriff or marshal).
 - A copy of the original writ that has already been given to the levying officer (sheriff or marshal).

- c. Has a judgment been issued by the court?
 - No
 - Yes (complete section below):
 - (1) Date judgment was issued: 11/22/2023
 - (2) If it is a money judgment, give amount: \$10,115.00
 - (3) List all judgment debtors (people who owe money) if there are any in this case:
If the judgment debtor is not a person, also include the type of organization (example: corporation).
John Smith

4 Information About the Property to Levy

- a. Describe the property in as much detail as possible. For example:
 - For bank accounts, give account number (if known).
 - For personal property, describe property and give the address where property is located.
 - For vehicles, give license plate number and address where vehicle is located.
 - For evictions, give address, and any information needed to access the property.
 - For real property (other than evictions), give legal description, address, and assessor’s parcel number.
 - If requester is not the person receiving the property, give clear instructions on who will receive the property and how.

Wells Fargo Bank, Bank Account

Check here if you are including a map or other document to describe property.

CONFIDENTIAL

This is not a court form. Do not file with the court.



- 4 b. Is the property in the judgment debtor’s name?
 Yes
 No (*list the names of owners and explain their interest in the property, including any leasehold interest*):

(Note: You may also need to have the people listed above served with your court papers. Check the Code of Civil Procedure for service requirements or talk with a lawyer. Your local court self-help center provides help for free and may be able to help you. To find your local self-help center, go to www.selfhelp.courts.ca.gov/find.)

- c. Are you asking the sheriff to levy on property that is a dwelling (*a place someone can live in*)?
 No
 Yes (*complete the section below*):
The dwelling is (*check one*):
 Real property (*examples: house, condo, other building attached to land*)
 Personal property (*examples: house boat, RV*)

5 **Special Instructions for Sheriff**

In some situations, you will have to give detailed instructions on how you want the sheriff to enforce the order. Use the space below to list any instructions. Some examples of when instructions may be needed include:

- Instructions to serve the summons and complaint with a writ of attachment, if not previously served (see Code of Civil Procedure section 488.020(c)).
- Instructions that the levying officer must place a keeper in charge of the property (see Code of Civil Procedure sections 700.070 and 700.080).
- Instructions to seize personal property from a private place (see Code of Civil Procedure section 699.030).

Check here if you need more space to list instructions. Use a separate piece of paper and write “SER-001A, Special Instructions for Sheriff” at the top. Turn it in with this form.

CONFIDENTIAL

This is not a court form. Do not file with the court.