ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY
	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO. (Optional):	
E-MAIL ADDRESS (Optional):	
ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
STREET ADDRESS:	
MAILING ADDRESS:	
CITY AND ZIP CODE:	
BRANCH NAME:	
PETITIONER:	
RESPONDENT:	
INCOMPLIAT.	
REQUEST TO ENTER DEFAULT	CASE NUMBER:
1. To the clerk: Please enter the default of the respondent who has failed to respond to t	he petition.
2. A completed <i>Income and Expense Declaration</i> (form FL-150) or <i>Financial Statement</i> (\$	
is attached is not attached.	Simplined) (IOIIIT L-133)
A completed <i>Property Declaration</i> (form FL-160) is attached is not attached	ched
because (check at least one of the following):	
(a) there have been no changes since the previous filing.	
(b) the issues subject to disposition by the court in this proceeding are the subject	ct of a written agreement.
(c) there are no issues of child, spousal, or partner support or attorney fees and	•
(d) the petition does not request money, property, costs, or attorney fees. (Fam.	Code, § 2330.5.)
(e) there are no issues of division of community property.	
(f) this is an action to establish parental relationship.	
Date:	
<b>L</b>	
<u> </u>	
(TYPE OR PRINT NAME)	(SIGNATURE OF [ATTORNEY FOR] PETITIONER)
3. Declaration	
(a) No mailing is required because service was by publication or posting and the	address of the respondent remains unknown.
(b) A copy of this Request to Enter Default, including any attachments and an en	velope with sufficient postage, was
provided to the court clerk, with the envelope addressed as follows (address of	
the respondent's last known address):	, , , , , , , , , , , , , , , , , , , ,
I declare under penalty of perjury under the laws of the State of California that the foregoin	g is true and correct.
Date:	
(TYPE OR PRINT NAME)	(SIGNATURE OF DECLARANT)
FOR COURT USE ONLY	
	44.4
Request to Enter Default mailed to the respondent or the respondent's attorney on	(date):
Default entered as requested on (date):	
Default <b>not</b> entered. Reason:	
	D
Clerk, by	, Deputy

CASE NAME (Last name, first name of each party):	CASE NUMBER:
4. Memorandum of costs	
a. Costs and disbursements are waived.	
b. Costs and disbursements are listed as follows:	
(1) Clerk's fees	\$
(2) Process server's fees	
(3) Other (specify):	\$
	\$
	\$
	\$
TOTAL	\$
cost are correct and have been necessarily incurred in this cause or proceeding.  I declare under penalty of perjury under the laws of the State of California that the foregoing  Date:  (TYPE OR PRINT NAME)	is true and correct.
(TIPE OR FRINTINAME)	(6.6.0)
5. <b>Declaration of nonmilitary status.</b> The respondent is not in the military service of the L seq. of the Servicemembers Civil Relief Act (50 U.S.C. Appen. § 501 et seq.), and is not I declare under penalty of perjury under the laws of the State of California that the foregoing	entitled to the benefits of such act.
Date:	
<b>•</b>	
(TYPE OR PRINT NAME)	(SIGNATURE OF DECLARANT)