

Instructions For Declaration of Disclosure

In a dissolution, legal separation or nullity action, your disclosure documents must be completed and served on the other party at the same time as your Petition or Response or within 60 days of filing of your Petition or Response.

DO NOT FILE DECLARATIONS OF DISCLOSURE OR FINANCIAL ATTACHMENTS WITH THE COURT

This packet includes a “**Declaration of Disclosure**” [form FL-140], a “**Schedule of Assets and Debts**” * [form FL-142] and an “**Income and Expense Declaration**” [form FL-150] along with instruction for completing these forms.

Once the forms have been completed they must be served on the other party. After service, you must file your “**Declaration of Service of Declaration of Disclosure**” [form FL-141] also included in this packet. Include all tax returns filed in the two years before the date you serve your disclosure documents.

*you may complete and serve a “Property Declaration” [form FL-160] in place of the “Schedule of Assets and Debts.” This form is not included in the packet.

SAMPLE FORMS

How to fill out

DECLARATION OF DISCLOSURE (FL-140)

DIRECTIONS

- Find the number on the sample form. Example: 1
- Go to the same number below to find out how to fill out the form.
- Type or print in blue or black ink.
- If you know the CASE NUMBER fill it in.

FL-140

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	
TELEPHONE NO. 1	FAX NO.
E-MAIL ADDRESS: ATTORNEY FOR (Name)	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
STREET ADDRESS 2	
MAILING ADDRESS	
CITY AND ZIP CODE	
BRANCH NAME	
PETITIONER: 3	
RESPONDENT:	
OTHER PARENT/PARTY:	
DECLARATION OF DISCLOSURE 4	
<input type="checkbox"/> Petitioner's	<input type="checkbox"/> Preliminary
<input type="checkbox"/> Respondent's	<input type="checkbox"/> Final
CASE NUMBER	

DO NOT FILE DECLARATIONS OF DISCLOSURE OR FINANCIAL ATTACHMENTS WITH THE COURT

In a dissolution, legal separation, or nullity action, both a preliminary and a final declaration of disclosure must be served on the other party with certain exceptions. Neither disclosure is filed with the court. Instead, a declaration stating that service of disclosure documents was completed or waived must be filed with the court (see form FL-141).

- In summary dissolution cases, each spouse or domestic partner must exchange preliminary disclosures as described in Summary Dissolution Information (form FL-810). Final disclosures are not required (see Family Code section 2109).
- In a default judgment case that is not a stipulated judgment or a judgment based on a marital settlement agreement, only the petitioner is required to complete and serve a preliminary declaration of disclosure. A final disclosure is not required of either party (see Family Code section 2110).
- Service of preliminary declarations of disclosure may not be waived by an agreement between the parties.
- Parties who agree to waive final declarations of disclosure must file their written agreement with the court (see form FL-144).

The petitioner must serve a preliminary declaration of disclosure at the same time as the Petition or within 60 days of filing the Petition. The respondent must serve a preliminary declaration of disclosure at the same time as the Response or within 60 days of filing the Response. The time periods may be extended by written agreement of the parties or by court order (see Family Code section 2104(f)).

Attached are the following:

- A completed Schedule of Assets and Debts (form FL-142) or A Property Declaration (form FL-160) for (specify):
 Community and Quasi-Community Property Separate Property.
- A completed Income and Expense Declaration (form FL-150).
- All tax returns filed by the party in the two years before the date that the party served the disclosure documents.
- A statement of all material facts and information regarding valuation of all assets that are community property or in which the community has an interest (not a form).
- A statement of all material facts and information regarding obligations for which the community is liable (not a form).
- An accurate and complete written disclosure of any investment opportunity, business opportunity, or other income-producing opportunity presented since the date of separation that results from any investment, significant business, or other income-producing opportunity from the date of marriage to the date of separation (not a form).

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

Date: _____ **11** _____

(TYPE OR PRINT NAME) SIGNATURE

Page 1 of 1
Form Adopted for Mandatory Use
Judicial Council of California
FL-140 (Rev. July 1, 2013)

**DECLARATION OF DISCLOSURE
(Family Law)**

Family Code, §§ 2102, 2104,
2105, 2108, 2112
www.courts.ca.gov

- 1 Write your name, address and phone number.
- 2 If not filled in for you, write "Fresno" after COUNTY OF. The address is: 1130 "O" Street, Fresno, CA 93724-2201. The Branch name is: B.F. Sisk Courthouse.
- 3 Write the name of the petitioner and respondent. The petitioner is the person who started the case.
- 4 Check the box that identifies you as the petitioner or respondent. Check "preliminary", "final" or both.
- 5 Read this section carefully.
- 6 Check box #1 and complete and attach the Schedule of Assets and Debts (form FL-142) [You may attach the Property Declaration instead. This form is not included in this packet]
- 7 Check box #2 and complete and attach the Income and Expense Declaration.
- 8 Check box #3 and attach your tax returns.
- 9 Check box #4 and #5 if there are community assets and/or debts and on a separate sheet of paper list the material facts.
- 10 Check box #6 and attach a declaration if any investment or other business opportunities have been presented to you since your separation.
- 11 Date, print and sign your name.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address):		TELEPHONE NO.:
1		
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA		COUNTY OF FRESNO
1100 Van Ness Avenue - Fresno		California 93724-0002
PETITIONER:		
RESPONDENT:		
<input type="checkbox"/> SCHEDULE OF ASSETS AND DEBTS <input type="checkbox"/> Petitioner's <input type="checkbox"/> Respondent's		CASE NUMBER
4		

— INSTRUCTIONS —

List all your known community and separate assets or debts. Include assets even if they are in the possession of another person, including your spouse. If you contend an asset or debt is separate, put P (for Petitioner) or R (for Respondent) in the first column (separate property) to indicate to whom you contend it belongs.

All values should be as of the date of signing the declaration unless you specify a different valuation date with the description. For additional space, use a continuation sheet numbered to show which item is being continued.

ITEM NO.	ASSETS DESCRIPTION	SEP. PROP.	DATE ACQUIRED	CURRENT GROSS FAIR MARKET VALUE	AMOUNT OF MONEY OWED OR ENCUMBRANCE
1.	REAL ESTATE (Give street addresses and attach copies of deeds with legal descriptions and latest lender's statement.)			\$	\$
6					
2.	HOUSEHOLD FURNITURE, FURNISHINGS, APPLIANCES (Identify.)				
7					
3.	JEWELRY, ANTIQUES, ART, COIN COLLECTIONS, etc. (Identify.)				
8					

How to fill out

SCHEDULE OF ASSETS AND DEBTS (FL-142)

DIRECTIONS

- ▶ Find the number on the sample form.
Example: 1
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in blue or black ink
- ▶ If you know the CASE NUMBER fill it in. If not known, leave it blank.

- 1** Write your name, address and phone number. You must completely answer each question on this form.
- 2** Write "Fresno" after Superior Court of California, County of.
- 3** Write the name of the Petitioner and Respondent. The Petitioner is the party that starts the case against another person, the Respondent.
- 4** Check the box that identifies you as the Petitioner or Respondent.
- 5** Read the instructions carefully. "Separate property" is assets (things of value) or debts (money owed) that belongs to the husband or wife, but not both. "Community" assets or debts belonging to the husband and wife together.
 - If separate property, you will put P or R in the "Sep Prop" column. Leave this column blank if community.
 - You will write the date the asset was acquired (purchased) in the next column
 - *Current gross fair market value*: gross means before taxes are taken out. Fair market value means how much the item is worth (fill in a dollar amount).
 - If money is still owed on this item, you will write this amount in the last column.

For each item listed on this form, if you need more space, attach another piece of paper (a continuation sheet) and number the page the same number as the item on the form. Example: #1 for Real Estate, #2 for Household Furniture, #3 for Jewelry, Antiques, Art, Coin Collections, etc. Do this as needed for all four pages of this form.

- 6** List all real estate (land, buildings) including addresses. Attach copies of deeds, etc. If no such items, write "none."
- 7** List all household furniture, furnishings, and appliances: Examples: sofas, lamps, televisions, computers, etc.
- 8** List all jewelry, antiques, art, coin collections. Note: these items should be appraised (given a dollar value by someone in that business).

SCHEDULE OF ASSETS AND DEBTS (FL-142)

- page two -

DIRECTIONS

- ▶ Find the number on the sample form.
Example: 12
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in black ink.
- ▶ If you know the CASE NUMBER fill it in. If not known, leave it blank.

ITEM NO.	ASSETS DESCRIPTION	SEP. PROP.	DATE ACQUIRED	CURRENT GROSS FAIR MARKET VALUE	AMOUNT OF MONEY OWED OR ENCUMBRANCE
	9			\$	\$
4.	VEHICLES, BOATS, TRAILERS (<i>Describe and attach copy of title document.</i>)				
	10				
5.	SAVINGS ACCOUNTS (<i>Account name, account number, bank, and branch. Attach copy of latest statement.</i>)				
	11				
6.	CHECKING ACCOUNTS (<i>Account name and number, bank, and branch. Attach copy of latest statement.</i>)				
	12				
7.	CREDIT UNION, OTHER DEPOSIT ACCOUNTS (<i>Account name and number, bank, and branch. Attach copy of latest statement.</i>)				
	13				
8.	CASH (<i>Give location.</i>)				
	14				
9.	TAX REFUND				
	15				
10.	LIFE INSURANCE WITH CASH SURRENDER OR LOAN VALUE (<i>Attach copy of declaration page for each policy.</i>)				

- 9 List all vehicles such as cars, motorcycles, boats, and trailers. Attach copies of documents that show they belong to you and/or your spouse. Example: DMV registration
- 10 For Savings Accounts, include account numbers, and the bank name and branch (Example: Bank of America, Fashion Fair). Include copies of latest statements for each account.
- 11 Provide the same information as above for Checking Accounts.
- 12 Provide the same information as above for Credit Union or similar accounts.
- 13 If you have stored cash somewhere, write the location in the space provided.
- 14 If you received a tax refund this year, provide that information. Otherwise leave blank.
- 15 Provide Life Insurance information with the amount it is worth if you turned it in, or the loan amount. Attach a copy of the policy's declaration page.

SCHEDULE OF ASSETS AND DEBTS (FL-142)

- page three -

DIRECTIONS

- ▶ Find the number on the sample form.
Example: 16
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in black ink.
- ▶ If you know the CASE NUMBER fill it in. If not known, leave it blank.

ITEM NO.	ASSETS DESCRIPTION	SEP. PROP.	DATE ACQUIRED	CURRENT GROSS FAIR MARKET VALUE	AMOUNT OF MONEY OWED OR ENCUMBRANCE
11	STOCKS, BONDS, SECURED NOTES, MUTUAL FUNDS <i>(Give certificate number and attach copy of the certificate or copy of latest statement.)</i>			\$	\$
16					
12	RETIREMENT AND PENSIONS <i>(Attach copy of latest summary plan documents and latest benefit statement.)</i>				
17					
13	PROFIT - SHARING, ANNUITIES, IRAS, DEFERRED COMPENSATION <i>(Attach copy of latest statement.)</i>				
18					
14	ACCOUNTS RECEIVABLE AND UNSECURED NOTES <i>(Attach copy of each.)</i>				
19					
15	PARTNERSHIPS AND OTHER BUSINESS INTERESTS <i>(Attach copy of most current K-1 form and Schedule C.)</i>				
20					
16	OTHER ASSETS				
21					
17	TOTAL ASSETS FROM CONTINUATION SHEET				
22					
18	TOTAL ASSETS			\$	\$
23					

FL-142 (Rev. January 1, 2009) Page 3 of 4
SCHEDULE OF ASSETS AND DEBTS
 (Family Law)

- 16 If you or your spouse has stocks, bonds, secured notes, and/or mutual funds, list them here. Write the certificate/account number for each. Use a extra (continuation) sheet if needed. Attach copies of certificates and/or most recent statements.
- 17 List retirement funds and pensions. Attach a copy of the most recent summary page or statement.
- 18 If you or your spouse participates in any of the following, list them here. Attach copies of statements.
 - Profit-sharing plans through workplace
 - Annuities – amounts payable on a yearly basis, or at other regular times
 - Individual retirement accounts (IRA)
 - Deferred compensation – wages that are not taken now, but is paid later
- 19 If you or your spouse is due to receive any money, list accounts receivable here. Also list any unsecured notes (not secured by real property) you may have. Attach copies.
- 20 If you or your spouse has a business partnership or other kind of business, list information here. Attach copies of the most recent *K-1 form* and *schedule C* (IRS forms).
- 21 List any other assets you or your spouse might have. Use extra sheets as necessary.
- 22 If you used extra continuation sheets, add up all amounts and list them here.
- 23 Add up your total assets from all pages of form FL-142, (1-17) and fill in the amount on line 18. Continue on the back side to list your debts.

SCHEDULE OF ASSETS AND DEBTS (FL-142)

- page four -

DIRECTIONS

- ▶ Find the number on the sample form.
Example: 25
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in black ink.
- ▶ If you know the CASE NUMBER fill it in. If not known, leave it blank.

ITEM NO.	DEBTS—SHOW TO WHOM OWED	SEP. PROP.	TOTAL OWING	DATE INCURRED
19.	STUDENT LOANS (Give details.) 24		\$	
20.	TAXES (Give details.) 25			
21.	SUPPORT ARREARAGES (Attach copies of orders and statements.) 26			
22.	LOANS—UNSECURED (Give bank name and loan number and attach copy of latest statement.) 27			
23.	CREDIT CARDS (Give creditor's name and address and the account number. Attach copy of latest statement.) 28			
24.	OTHER DEBTS (Specify): 29			
25.	TOTAL DEBTS FROM CONTINUATION SHEET 30			
26.	TOTAL DEBTS 31		\$	

27. (Specify number) _____ pages are attached as continuation sheets.

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) 33 (SIGNATURE OF DECLARANT)

FL-142 (Rev. January 1, 2006) SCHEDULE OF ASSETS AND DEBTS (Family Law) Page 4 of 4

*List all debts (money owed). In the first column, put a **W** or **H** to show that the debt is separate property. In the second column, write the total amount of money still owed. In the last column, put the date the debt started. Use continuation sheets as needed.*

- 24 If you or your spouse currently have any student loans, list the details here.
- 25 If you or your spouse owes money for taxes, list details here.
- 26 Support arrearages means being behind in payments ordered by the court, such as child support or spousal support. If either you or your spouse is behind in support payments, attach copies of court orders and statements.
- 27 Unsecured loans are those that are not guaranteed or protected. If you or your spouse have unsecured loans, list them here. Write the name of the bank and the loan number. Attach copies of most recent statements.
- 28 List all credit cards. Write the name, address and account number for each creditor (company that issued the credit card). Attach copies of most recent statements.
- 29 List any other debts owed by you or your spouse.
- 30 If you used extra sheets, add up all amounts and list them here.
- 31 Add up your total debts (19-25) and fill in the amount.
- 32 If you used continuation sheets, check the box and write the number of continuation sheets you are attaching (not copies of statements or other attachments).
- 33 Date the form. Type or print your name on the left. Sign your name on the right.

How to fill out

INCOME AND EXPENSE DECLARATION (FL-150)

DIRECTIONS

- ▶ Find the number on the sample form. *Example:* ❶
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in blue or black ink
- ▶ If you know the CASE NUMBER fill it in. If not known leave it blank.

- ❶ Print your name, address and phone number.
- ❷ If not filled in for you, write “Fresno” after COUNTY OF. The address is: 1130 "O" Street., Fresno CA 93724-2201. The Branch Name is: B.F. Sisk Courthouse.
- ❸ Fill in the names of the Petitioner/Plaintiff and Respondent/Defendant. (The Plaintiff is the person that starts a case against another person, the Defendant.) Fill in name(s) of Other Parent/Claimant if it applies to this case.
- ❹ Fill in information about your job. If you don't have a job, fill in information about **your last job**. If you have more than one job, use another sheet of paper and write the information requested for each additional job.
 - Fill in the name (a) of where you work, the address (b) and phone (c), and your job title (d), example: driver.
 - Fill in the date you started this job (e). If you are unemployed, write the date your job ended (f), how many hours you work(ed) every week (g), and how much money you get paid before taxes are taken out (h). Check the first box if this is a monthly amount, the second box if weekly, or the third box if hourly.
 - Be sure to include **copies of your pay stubs** for the last two months. Use a **dark marker** to cross out your social security number.
- ❺ Fill in your age (a) and check the “Yes” box if you finished high school (b). If you check No, fill in the last grade you finished. Fill out (c). or (d) if you have taken college classes. Fill out (e) if this applies to you.
- ❻ Check box (a) and fill in the year of your last tax return. For (b), check the box that applies to you. For (c), check California OR check “Other” if you last filed taxes in another state, and write the state's name. For (d), write the number of “exemptions” you claim when filing your taxes.
- ❼ Write down the total amount the other person in this case makes in a month, and explain how you know this.
- ❽ Fill in the date, type or print your name on the left, and sign on the right.

**INCOME AND
EXPENSE DECLARATION
(FL-150)**

- page two -

DIRECTIONS:

- ▶ Find a number on the sample form
Example: 9
- ▶ Go to the same number below to find out how to fill out the form
- ▶ Type or print in blue or black ink
- ▶ If you know the CASE NUMBER fill it in. If not known leave it blank.

- 9 Print out first and last names for you and the other person(s) in this case.
Include your pay stubs for the last two months with this form. Also include proof of any other money you make. Bring a copy of your last federal tax return with you to the court hearing. Use a black marker to cross out social security numbers.
- 10 Fill out a. through k. if it applies to you, and check any boxes that apply to you. The first column is for money earned last month. For the second column, add up amounts for the past 12 months then divide by 12 to get the average amount.
- 11 If you have investments, fill in amounts. If you fill in an amount for d., write a description. If you have property, include a separate page that lists total money earned on the property and expenses.
- 12 Fill out this section only if you are self-employed (own a business). Include a “profit and loss statement” for each business, or a schedule C from your tax return.
- 13
 - Check “Additional Income,” if you received extra money in the last 12 months. Write down the amount and where the money came from. Examples: “I won the lottery.” “My uncle left me money in his will.”
 - Check “Change in Income,” if the amount of money you normally receive has changed a lot during the past 12 months. Write down the reason. Examples: “I got hurt on the job and am now on disability.” “I got a new job that pays better than my old one.”
- 14 Fill in amounts deducted (taken away) from your earnings last month. Fill out all that apply. If you fill out (f), you must write an explanation on a separate page labeled “Question 10f.”
- 15 List your assets (accounts, stocks and bonds, property, etc.). Put in the total value (worth) for each line listed.

**INCOME AND
EXPENSE DECLARATION
(FL-150)**

- page three -

DIRECTIONS:

- ▶ Find a number on the sample form
Example: 16
- ▶ Go to the same number below to find out how to fill out the form
- ▶ Type or print in blue or black ink
- ▶ If you know the CASE NUMBER fill it in. If not known leave it blank.

- 16 Print out first and last names for you and the other person(s) in this case.
- 17 Give information about all persons who live with you.
- Write their names, ages, and how they are related to you (parent, child, other relative, friend).
 - Write how much money each person receives each month (before taxes), and check the Yes or No box if this person pays some of the living expenses.
- 18 For **Average monthly expenses**, check the first box if you are estimating (best guess) expenses, or the second box if actual (exact) expenses. Check third box only if you expect these to be your expenses each month.
- For a., check first box if you rent or the second box if you own your home. Fill in monthly payment. If you have a mortgage, fill out (1), (2) and (3). Fill out (4) and (5) if it applies to you.
 - Fill in amounts for b. through q. as they apply to you.
 - For j. and q., describe the expense.
 - Add lines a. through q., but don't add in mortgage principal and interest from line (a) (2).
 - Put this amount in the total expenses box, line r.
 - Line s. is monthly expenses for the household NOT paid by you.
- 19 List all installment payments and debts you may have. This could include car payments, credit card payments, etc.
- First column: fill in the name of the creditor (who gets the payment?).
 - Second column: describe what the payment is for. Third column: amount of last payment to the creditor
 - Fourth column: amount still owed. Last column: date last payment was made.
- 20 If you are represented by an attorney or you have paid money to an attorney, complete this section. If you have not paid any money to an attorney in this case, leave this section blank.
- 21 Do not fill out this section. Skip to next page....

**INCOME AND
EXPENSE DECLARATION
(FL-150)**

- page four -

DIRECTIONS:

- ▶ Find a number on the sample form
Example: 22
- ▶ Go to the same number below to find out how to fill out the form
- ▶ Type or print in blue or black ink
- ▶ If you know the CASE NUMBER fill it in. If not known leave it blank.

22 Print out first and last names for you and the other person(s) in this case.

Fill out the rest of this page only if your case involves child support.

23 Fill in the number of children you have with the other parent that are **under age 18**.

- Estimate the amount of time the children are with you and with the other parent. Example: “The children are with me 30% of the time and with the other parent 70% of the time.”
- If unsure about using percentages, use the space provided to describe the parents’ schedules for taking care of the children.

24 Check the first box if your work place provides health insurance for your children. Otherwise, check the second box. Write the name and address of this insurance company in the space provided. Fill in monthly amount you pay (or would pay to fully cover the children) for health insurance. DO NOT include costs already paid by your job.

25 Fill in monthly amounts that apply to your case. Describe educational or special needs.

26 List any “special hardships” (things that make daily living hard).

- For a. through c., fill in monthly amounts that apply.
- In the second column, fill in the number of months the situation has lasted
- If you have children under age 18 from other relationships, list their names and ages in the space provided.
- If you get child support for these children, fill in that amount.
- If you fill out lines a., b., and c., space has been provided to explain why it’s hard for you to pay expenses.

27 In the space provided you may write other information you want the court to know about your case.

FL-141

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number and address) <div style="text-align: center; font-size: 24px; font-weight: bold;">1</div>	
TELEPHONE NO.: _____ FAX NO.: _____ E-MAIL ADDRESS: _____ ATTORNEY'S FCB NUMBER: _____	SUPERIOR COURT OF CALIFORNIA, COUNTY OF _____ STREET ADDRESS: _____ MAILING ADDRESS: _____ CITY AND ZIP CODE: _____ BRANCH NAME: _____
PETITIONER: _____ RESPONDENT: _____ OTHER PARENT/PARTY: _____	CASE NUMBER: _____ <div style="text-align: center; font-size: 24px; font-weight: bold;">5</div>
DECLARATION REGARDING SERVICE OF DECLARATION OF DISCLOSURE AND INCOME AND EXPENSE DECLARATION <input type="checkbox"/> Petitioner's <input type="checkbox"/> Respondent's <input type="checkbox"/> Preliminary <input type="checkbox"/> Final <div style="text-align: center; font-size: 24px; font-weight: bold;">4</div>	

6 I am the attorney for petitioner respondent in this matter.

7 Petitioner's Respondent's Preliminary Declaration of Disclosure (form FL-140), current Income and Expense Declaration (form FL-150), completed Schedule of Assets and Debts (form FL-142) or Community or Separate Property Declarations (form FL-150) with appropriate attachments, all tax returns filed by the party in the two years before service of the preliminary disclosures, and all other required information under Family Code section 2104 were served on:
 the other party the other party's attorney by personal service mail
 Other (specify): _____
 on (date): _____

8 Petitioner's Respondent's Final Declaration of Disclosure (form FL-140), current Income and Expense Declaration (form FL-150), completed Schedule of Assets and Debts (form FL-142) or Community or Separate Property Declarations (form FL-150) with attachments, and the material facts and information required by Family Code section 2105 were served on:
 the other party other party's attorney by personal service mail
 Other (specify): _____
 on (date): _____

9 Service of Petitioner's Respondent's preliminary final declaration of disclosure and current income and expense declaration has been waived as follows:
 a. The parties agreed to waive final declaration of disclosure requirements under Family Code section 2105(d). (Form FL-144 may be used for this purpose.) The waiver was filed on (date): _____
 is being filed at the same time as this form.
 b. The party has failed to comply with disclosure requirements, and the court has granted the request for voluntary waiver of receipt under Family Code section 2107 on (date): _____
 c. This is a default proceeding that does not include a stipulated judgment or settlement agreement. Petitioner waives final disclosure requirements under Family Code section 2110.

*Current is defined as completed within the past three months providing no facts have changed. (Cal. Rules of Court, rule 5.250.)
 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 _____

NOTE: File this document with the court.
 Do not file a copy of the Preliminary or Final Declaration of Disclosure or any attachments to either declaration of disclosure with this document.

Form Adopted for Marriages Use Judicial Council of California FL-141 (Rev. July 1, 2013) Declaration Regarding Service of Declaration of Disclosure and Income and Expense Declaration (Family Law) Family Code, §§ 2103, 2104, 2105, 2106, 2112 www.courtinfo.gov Page 1 of 1

How to fill out

DECLARATION OF DISCLOSURE (FL-141)

DIRECTIONS

- Find the number on the sample form. Example: 1
- Go to the same number below to find out how to fill out the form.
- Type or print in blue or black ink.
- If you know the CASE NUMBER fill it in.

- 1 Write your name, address and phone number.
- 2 Write "Fresno" after COUNTY OF. The address is 1130 "O" Street, Fresno CA 93724. The branch is B.F. Sisk B.F. Sisk Courthouse.
- 3 Write the name of the petitioner and respondent. The petitioner is the person who started the case.
- 4 Check the box that identifies you as the petitioner or the respondent. Check "preliminary".
- 5 Write the case number if you have one.
- 6 Check the box that identifies you as the petitioner or the respondent.
- 7 **Number #2** refers to "preliminary disclosure". **Number #3** refers to "final disclosure". Complete #2 if you have served your preliminary disclosure and check the box indicating who was served, the other party or their attorney. Check the box showing how they were served, personally or by mail. Write the date they were served. If you served the "final disclosure" complete **number #3** the same way as **number #2**.
- 8 If you are finishing your case by default (the respondent hasn't filed anything in 30 days since being served) check the boxes "Service of", "Respondent's", "Preliminary", "Final" and "current income and expense declaration." Check box "c".
- 9 Date, print and sign your name.

BLANK

FORMS

(To be completed)

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): TELEPHONE NO.: _____ FAX NO. : _____ E-MAIL ADDRESS: _____ ATTORNEY FOR (Name): _____	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	
<div style="text-align: center;">DECLARATION OF DISCLOSURE</div> <input type="checkbox"/> Petitioner's <input type="checkbox"/> Preliminary <input type="checkbox"/> Respondent's <input type="checkbox"/> Final	CASE NUMBER:

DO NOT FILE DECLARATIONS OF DISCLOSURE OR FINANCIAL ATTACHMENTS WITH THE COURT

In a dissolution, legal separation, or nullity action, both a preliminary and a final declaration of disclosure must be served on the other party with certain exceptions. Neither disclosure is filed with the court. Instead, a declaration stating that service of disclosure documents was completed or waived must be filed with the court (see form FL-141).

- *In summary dissolution cases, each spouse or domestic partner must exchange preliminary disclosures as described in Summary Dissolution Information (form FL-810). Final disclosures are not required (see Family Code section 2109).*
- *In a default judgment case that is not a stipulated judgment or a judgment based on a marital settlement agreement, only the petitioner is required to complete and serve a preliminary declaration of disclosure. A final disclosure is not required of either party (see Family Code section 2110).*
- *Service of preliminary declarations of disclosure may not be waived by an agreement between the parties.*
- *Parties who agree to waive final declarations of disclosure must file their written agreement with the court (see form FL-144).*

The petitioner must serve a preliminary declaration of disclosure at the same time as the Petition or within 60 days of filing the Petition. The respondent must serve a preliminary declaration of disclosure at the same time as the Response or within 60 days of filing the Response. The time periods may be extended by written agreement of the parties or by court order (see Family Code section 2104(f)).

Attached are the following:

1. A completed *Schedule of Assets and Debts* (form FL-142) or A *Property Declaration* (form FL-160) for (specify):
 Community and Quasi-Community Property Separate Property.
2. A completed *Income and Expense Declaration* (form FL-150).
3. All tax returns filed by the party in the two years before the date that the party served the disclosure documents.
4. A statement of all material facts and information regarding valuation of all assets that are community property or in which the community has an interest (*not a form*).
5. A statement of all material facts and information regarding obligations for which the community is liable (*not a form*).
6. An accurate and complete written disclosure of any investment opportunity, business opportunity, or other income-producing opportunity presented since the date of separation that results from any investment, significant business, or other income-producing opportunity from the date of marriage to the date of separation (*not a form*).

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

Date: _____ ▶ _____
SIGNATURE

(TYPE OR PRINT NAME)

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name and Address</i>):	TELEPHONE NO.:
ATTORNEY FOR (<i>Name</i>):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
PETITIONER:	
RESPONDENT:	
SCHEDULE OF ASSETS AND DEBTS <input type="checkbox"/> Petitioner's <input type="checkbox"/> Respondent's	CASE NUMBER:

- INSTRUCTIONS -

List all your known community and separate assets or debts. Include assets even if they are in the possession of another person, including your spouse. If you contend an asset or debt is separate, put P (for Petitioner) or R (for Respondent) in the first column (separate property) to indicate to whom you contend it belongs.

All values should be as of the date of signing the declaration unless you specify a different valuation date with the description. For additional space, use a continuation sheet numbered to show which item is being continued.

ITEM NO.	ASSETS DESCRIPTION	SEP. PROP	DATE ACQUIRED	CURRENT GROSS FAIR MARKET VALUE	AMOUNT OF MONEY OWED OR ENCUMBRANCE
1.	REAL ESTATE (<i>Give street addresses and attach copies of deeds with legal descriptions and latest lender's statement.</i>)			\$	\$
2.	HOUSEHOLD FURNITURE, FURNISHINGS, APPLIANCES (<i>Identify.</i>)				
3.	JEWELRY, ANTIQUES, ART, COIN COLLECTIONS, etc. (<i>Identify.</i>)				

ITEM NO.	SEP. PROP	DATE ACQUIRED	CURRENT GROSS FAIR MARKET VALUE	AMOUNT OF MONEY OWED OR ENCUMBRANCE
4. VEHICLES, BOATS, TRAILERS <i>(Describe and attach copy of title document.)</i>			\$	\$
5. SAVINGS ACCOUNTS <i>(Account name, account number, bank, and branch. Attach copy of latest statement.)</i>				
6. CHECKING ACCOUNTS <i>(Account name and number, bank, and branch. Attach copy of latest statement.)</i>				
7. CREDIT UNION, OTHER DEPOSIT ACCOUNTS <i>(Account name and number, bank, and branch. Attach copy of latest statement.)</i>				
8. CASH <i>(Give location.)</i>				
9. TAX REFUND				
10. LIFE INSURANCE WITH CASH SURRENDER OR LOAN VALUE <i>(Attach copy of declaration page for each policy.)</i>				

ITEM NO.	SEP. PROP	DATE ACQUIRED	CURRENT GROSS FAIR MARKET VALUE	AMOUNT OF MONEY OWED OR ENCUMBRANCE
11. STOCKS, BONDS, SECURED NOTES, MUTUAL FUNDS <i>(Give certificate number and attach copy of the certificate or copy of latest statement.)</i>			\$	\$
12. RETIREMENT AND PENSIONS <i>(Attach copy of latest summary plan documents and latest benefit statement.)</i>				
13. PROFIT - SHARING, ANNUITIES, IRAS, DEFERRED COMPENSATION <i>(Attach copy of latest statement.)</i>				
14. ACCOUNTS RECEIVABLE AND UNSECURED NOTES <i>(Attach copy of each.)</i>				
15. PARTNERSHIPS AND OTHER BUSINESS INTERESTS <i>(Attach copy of most current K-1 form and Schedule C.)</i>				
16. OTHER ASSETS				
17. TOTAL ASSETS FROM CONTINUATION SHEET				
18. TOTAL ASSETS			\$	\$

ITEM NO.	DEBTS—SHOW TO WHOM OWED	SEP. PROP.	TOTAL OWING	DATE INCURRED
19. STUDENT LOANS <i>(Give details.)</i>			\$	
20. TAXES <i>(Give details.)</i>				
21. SUPPORT ARREARAGES <i>(Attach copies of orders and statements.)</i>				
22. LOANS—UNSECURED <i>(Give bank name and loan number and attach copy of latest statement.)</i>				
23. CREDIT CARDS <i>(Give creditor's name and address and the account number. Attach copy of latest statement.)</i>				
24. OTHER DEBTS <i>(Specify.):</i>				
25. TOTAL DEBTS FROM CONTINUATION SHEET				
26. TOTAL DEBTS			\$	

27. *(Specify number):* _____ pages are attached as continuation sheets.

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, State Bar number, and address): TELEPHONE NO.: E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF FRESNO STREET ADDRESS: 1130 "O" Street MAILING ADDRESS: CITY AND ZIP CODE: Fresno, CA 93724-2201 BRANCH NAME: B.F. Sisk Courthouse	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/CLAIMANT:	
INCOME AND EXPENSE DECLARATION	CASE NUMBER:

1. **Employment** (Give information on your current job or, if you're unemployed, your most recent job.)

Attach copies of your pay stubs for last two months (black out social security numbers).

- a. Employer:
- b. Employer's address:
- c. Employer's phone number:
- d. Occupation:
- e. Date job started:
- f. If unemployed, date job ended:
- g. I work about _____ hours per week.
- h. I get paid \$ _____ gross (before taxes) per month per week per hour.

(If you have more than one job, attach an 8½-by-11-inch sheet of paper and list the same information as above for your other jobs. Write "Question 1—Other Jobs" at the top.)

2. **Age and education**

- a. My age is (specify):
- b. I have completed high school or the equivalent: Yes No If no, highest grade completed (specify):
- c. Number of years of college completed (specify): Degree(s) obtained (specify):
- d. Number of years of graduate school completed (specify): Degree(s) obtained (specify):
- e. I have: professional/occupational license(s) (specify):
 vocational training (specify):

3. **Tax information**

- a. I last filed taxes for tax year (specify year):
- b. My tax filing status is single head of household married, filing separately
 married, filing jointly with (specify name):
- c. I file state tax returns in California other (specify state):
- d. I claim the following number of exemptions (including myself) on my taxes (specify):

4. **Other party's income.** I estimate the gross monthly income (before taxes) of the other party in this case at (specify): \$
This estimate is based on (explain):

(If you need more space to answer any questions on this form, attach an 8½-by-11-inch sheet of paper and write the question number before your answer.) Number of pages attached: _____

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

Date:

_____ (TYPE OR PRINT NAME) ▶ _____ (SIGNATURE OF DECLARANT)

PETITIONER/PLAINTIFF: _____ RESPONDENT/DEFENDANT: _____ OTHER PARENT/CLAIMANT: _____	CASE NUMBER: _____
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Attach copies of your pay stubs for the last two months and proof of any other income. Take a copy of your latest federal tax return to the court hearing. (Black out your social security number on the pay stub and tax return.)

5. **Income** (For average monthly, add up all the income you received in each category in the last 12 months and divide the total by 12.)

	Last month	Average monthly
a. Salary or wages (gross, before taxes)	\$ _____	_____
b. Overtime (gross, before taxes)	\$ _____	_____
c. Commissions or bonuses	\$ _____	_____
d. Public assistance (for example: TANF, SSI, GA/GR) <input type="checkbox"/> currently receiving	\$ _____	_____
e. Spousal support <input type="checkbox"/> from this marriage <input type="checkbox"/> from a different marriage	\$ _____	_____
f. Partner support <input type="checkbox"/> from this domestic partnership <input type="checkbox"/> from a different domestic partnership	\$ _____	_____
g. Pension/retirement fund payments	\$ _____	_____
h. Social security retirement (not SSI)	\$ _____	_____
i. Disability: <input type="checkbox"/> Social security (not SSI) <input type="checkbox"/> State disability (SDI) <input type="checkbox"/> Private insurance	\$ _____	_____
j. Unemployment compensation	\$ _____	_____
k. Workers' compensation	\$ _____	_____
l. Other (military BAQ, royalty payments, etc.) (specify):	\$ _____	_____

6. **Investment income** (Attach a schedule showing gross receipts less cash expenses for each piece of property.)

a. Dividends/interest	\$ _____	_____
b. Rental property income	\$ _____	_____
c. Trust income	\$ _____	_____
d. Other (specify):	\$ _____	_____

7. **Income from self-employment, after business expenses for all businesses** \$ _____

I am the owner/sole proprietor business partner other (specify): _____

Number of years in this business (specify): _____

Name of business (specify): _____

Type of business (specify): _____

Attach a profit and loss statement for the last two years or a Schedule C from your last federal tax return. Black out your social security number. If you have more than one business, provide the information above for each of your businesses.

8. **Additional income.** I received one-time money (lottery winnings, inheritance, etc.) in the last 12 months (specify source and amount): _____

9. **Change in income.** My financial situation has changed significantly over the last 12 months because (specify): _____

10. **Deductions** Last month

a. Required union dues	\$ _____	_____
b. Required retirement payments (not social security, FICA, 401(k), or IRA)	\$ _____	_____
c. Medical, hospital, dental, and other health insurance premiums (total monthly amount)	\$ _____	_____
d. Child support that I pay for children from other relationships	\$ _____	_____
e. Spousal support that I pay by court order from a different marriage	\$ _____	_____
f. Partner support that I pay by court order from a different domestic partnership	\$ _____	_____
g. Necessary job-related expenses not reimbursed by my employer (attach explanation labeled "Question 10g")	\$ _____	_____

11. **Assets** Total

a. Cash and checking accounts, savings, credit union, money market, and other deposit accounts	\$ _____	_____
b. Stocks, bonds, and other assets I could easily sell	\$ _____	_____
c. All other property, <input type="checkbox"/> real and <input type="checkbox"/> personal (estimate fair market value minus the debts you owe)	\$ _____	_____

PETITIONER/PLAINTIFF: _____ RESPONDENT/DEFENDANT: _____ OTHER PARENT/CLAIMANT: _____	CASE NUMBER: _____
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12. The following people live with me:

Name	Age	How the person is related to me? (ex: son)	That person's gross monthly income	Pays some of the household expenses?
a.				<input type="checkbox"/> Yes <input type="checkbox"/> No
b.				<input type="checkbox"/> Yes <input type="checkbox"/> No
c.				<input type="checkbox"/> Yes <input type="checkbox"/> No
d.				<input type="checkbox"/> Yes <input type="checkbox"/> No
e.				<input type="checkbox"/> Yes <input type="checkbox"/> No

13. Average monthly expenses Estimated expenses Actual expenses Proposed needs

- | | |
|---|---|
| <p>a. Home:</p> <p>(1) <input type="checkbox"/> Rent or <input type="checkbox"/> mortgage... \$ _____</p> <p style="padding-left: 20px;">If mortgage:</p> <p style="padding-left: 40px;">(a) average principal: \$ _____</p> <p style="padding-left: 40px;">(b) average interest: \$ _____</p> <p>(2) Real property taxes \$ _____</p> <p>(3) Homeowner's or renter's insurance (if not included above) \$ _____</p> <p>(4) Maintenance and repair \$ _____</p> <p>b. Health-care costs not paid by insurance... \$ _____</p> <p>c. Child care \$ _____</p> <p>d. Groceries and household supplies..... \$ _____</p> <p>e. Eating out..... \$ _____</p> <p>f. Utilities (gas, electric, water, trash) \$ _____</p> <p>g. Telephone, cell phone, and e-mail \$ _____</p> | <p>h. Laundry and cleaning \$ _____</p> <p>i. Clothes \$ _____</p> <p>j. Education \$ _____</p> <p>k. Entertainment, gifts, and vacation..... \$ _____</p> <p>l. Auto expenses and transportation (insurance, gas, repairs, bus, etc.) \$ _____</p> <p>m. Insurance (life, accident, etc.; do not include auto, home, or health insurance)... \$ _____</p> <p>n. Savings and investments..... \$ _____</p> <p>o. Charitable contributions..... \$ _____</p> <p>p. Monthly payments listed in item 14 (itemize below in 14 and insert total here) . . \$ _____</p> <p>q. Other (specify): \$ _____</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>r. TOTAL EXPENSES (a-q) (do not add in the amounts in a(1)(a) and (b)) \$ _____</p> </div> <p>s. Amount of expenses paid by others \$ _____</p> |
|---|---|

14. Installment payments and debts not listed above

Paid to	For	Amount	Balance	Date of last payment
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	

15. Attorney fees (This is required if either party is requesting attorney fees.):

- a. To date, I have paid my attorney this amount for fees and costs (specify): \$ _____
- b. The source of this money was (specify): _____
- c. I still owe the following fees and costs to my attorney (specify total owed): \$ _____
- d. My attorney's hourly rate is (specify): \$ _____

I confirm this fee arrangement.

Date:

(TYPE OR PRINT NAME OF ATTORNEY)



(SIGNATURE OF ATTORNEY)

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/CLAIMANT:	CASE NUMBER:
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CHILD SUPPORT INFORMATION
(NOTE: Fill out this page only if your case involves child support.)

16. Number of children

- a. I have *(specify number)*: _____ children under the age of 18 with the other parent in this case.
- b. The children spend _____ percent of their time with me and _____ percent of their time with the other parent.
(If you're not sure about percentage or it has not been agreed on, please describe your parenting schedule here.)

17. Children's health-care expenses

- a. I do I do not have health insurance available to me for the children through my job.
- b. Name of insurance company: _____
- c. Address of insurance company: _____

- d. The monthly cost for the **children's** health insurance is or would be *(specify)*: \$ _____
(Do not include the amount your employer pays.)

18. Additional expenses for the children in this case

Amount per month

- a. Child care so I can work or get job training. \$ _____
- b. Children's health care not covered by insurance \$ _____
- c. Travel expenses for visitation \$ _____
- d. Children's educational or other special needs *(specify below)*: \$ _____

19. Special hardships. I ask the court to consider the following special financial circumstances

- (attach documentation of any item listed here, including court orders):*
- | | Amount per month | For how many months? |
|---|------------------|----------------------|
| a. Extraordinary health expenses not included in 18b. | \$ _____ | _____ |
| b. Major losses not covered by insurance (examples: fire, theft, other insured loss) | \$ _____ | _____ |
| c. (1) Expenses for my minor children who are from other relationships and are living with me | \$ _____ | _____ |
| (2) Names and ages of those children <i>(specify)</i> : | | |

(3) Child support I receive for those children. \$ _____

The expenses listed in a, b, and c create an extreme financial hardship because *(explain)*:

20. Other information I want the court to know concerning support in my case *(specify)*:

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>):	
TELEPHONE NO.: FAX NO. : E-MAIL ADDRESS: ATTORNEY FOR (<i>Name</i>):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	
DECLARATION REGARDING SERVICE OF DECLARATION OF DISCLOSURE AND INCOME AND EXPENSE DECLARATION <input type="checkbox"/> Petitioner's <input type="checkbox"/> Preliminary <input type="checkbox"/> Respondent's <input type="checkbox"/> Final	CASE NUMBER:

1. I am the attorney for petitioner respondent in this matter.
2. Petitioner's Respondent's *Preliminary Declaration of Disclosure* (form FL-140), current* *Income and Expense Declaration* (form FL-150), completed *Schedule of Assets and Debts* (form FL-142) or *Community and Separate Property Declarations* (form FL-160) with appropriate attachments, all tax returns filed by the party in the two years before service of the preliminary disclosures, and all other required information under Family Code section 2104 were served on:
 the other party the other party's attorney by personal service mail
 Other (*specify*):
on (*date*):
3. Petitioner's Respondent's *Final Declaration of Disclosure* (form FL-140), current* *Income and Expense Declaration* (form FL-150), completed *Schedule of Assets and Debts* (form FL-142) or *Community or Separate Property Declarations* (form FL-160) with attachments, and the material facts and information required by Family Code section 2105 were served on:
 the other party other party's attorney by personal service mail
 Other (*specify*):
on (*date*):
4. Service of Petitioner's Respondent's preliminary final declaration of disclosure current income and expense declaration has been waived as follows:
 - a. The parties agreed to waive final declaration of disclosure requirements under Family Code section 2105(d.) (*Form FL-144 may be used for this purpose.*) The waiver was filed on (*date*):
 is being filed at the same time as this form.
 - b. The party has failed to comply with disclosure requirements, and the court has granted the request for voluntary waiver of receipt under Family Code section 2107 on (*date*):
 - c. This is a default proceeding that does not include a stipulated judgment or settlement agreement. Petitioner waives final disclosure requirements under Family Code section 2110.

*Current is defined as completed within the past three months providing no facts have changed. (Cal. Rules of Court, rule 5.260.)

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

NOTE: File this document with the court.
Do not file a copy of the Preliminary or Final Declaration of Disclosure or any attachments to either declaration of disclosure with this document.