

DECLARATION OF DISCLOSURE

What you will find in this packet:

- **Additional Resources** (FamLaw-101-INFO)
- **Requirements for Filing Court Papers** (MC-500-INFO)
- **Declaration of Disclosure Instructions** (FamLaw-105)
- **Start Your Online Divorce Workshop** (FamLaw-102)
- **Declaration of Disclosure** (FL-140)
- **Schedule of Assets and Debts** (FL-142)
- **Income and Expense Declaration** (FL-150)
- **After Service of Disclosure Documents...** (FamLaw-106)
- **Declaration Regarding Service of Declaration of Disclosure and Income and Expense Declaration** (FL-141)

You Can Get Court Forms FREE at: www.cc-courts.org/forms

If you don't find what you're looking for here, you may want to check out the additional resources listed on the back of this page

~ Additional Resources ~

Contra Costa Superior Court

www.cc-courts.org/familylaw

Virtual Self-Help Law Center

www.cc-courthelp.org/familylawtopics

Family Law court is for people who are ending a marriage or other committed relationship, dividing what they own and owe, working out child custody and visitation issues, dealing with child support or spousal support, addressing domestic violence issues, or identifying a child's legal parents.

Often, people involved in court cases need more than just legal help. It's important that you understand what is happening to you and get the help you need. For some suggestions about where to get other help, go to the California Court's Self-Help Center at www.courts.ca.gov/selfhelp.htm or check out one of the sites below:

Contra Costa County Bar Association's Lawyer Referral Service

www.cccba.org/community/find-a-lawyer/index.php

Contra Costa County (CA) Resource Center (211)

65.166.193.134/IFTWSQL4/cccc/public.aspx

(or do an internet search for 211 Contra Costa County Resource Center)

Legal glossaries in 12 languages, prepared by the Superior Court in Sacramento

www.saccourt.ca.gov

A Guide to California's Free Website for Legal Help

www.lawhelpcalifornia.org

The
C o n t r a C o s t a C o u n t y

Bar Association

is proud to sponsor

the

F a m i l y L a w

MODERATE MEANS PROGRAM

IF you qualify*,
we will refer you to an experienced Family Law Attorney
who has agreed to represent clients at a reduced rate.
Please telephone us at:

925 / 677- 0234

Monday - Friday 1:00-4:00 p.m.

**This is not a low income or pro-bono service.*

The Clerk of the Court cannot accept for filing any papers that do not comply with California Rules of Court 2.100 et seq. (CRC 2.118)

To avoid having your papers rejected by the clerk:

Use Judicial Council forms whenever possible

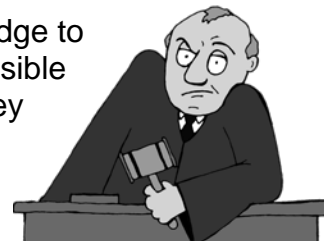
If you print Judicial Council forms from your computer, print them out single-sided. (Don't print double-sided unless you know how to tumble the pages). Judicial Council forms can be found at <http://www.courts.ca.gov/forms.htm>.

If the form you need is not on the Judicial Council website, you will have to make your own form which follows these rules

1. White or unbleached paper – 8 1/2 by 11 inches
2. One-sided paper – only one side of each page may be used
3. 12 pt font (Courier, Times New Roman, Arial or equivalent (Handwritten papers are OK – but write legibly)
4. Line spacing - One and one-half or double-spaced (use pleading paper – either the Judicial Council form MC-20 or create your own using the legal template in your word processor)
5. Margins – at least 1 inch from the left edge and ½ inch from right edge
6. Page Numbers – pages must be numbered consecutively on the bottom (1, 2, 3 ...)
7. Binding – Original and copies must be firmly bound (e.g. stapled) AND the Original must be 2-hole punched at the top.

You will need the **Original document**, signed in ink (blue is best), and correct number of identical copies (***original for the Court, a copy for each party***) for the clerk to file.

The Rules are important – Remember - You want the Judge to understand what you have written. Don't make that impossible by submitting papers that are too hard to read because they are upside down, the print is too small or too light, or the pages have fallen out of the file because they are too small or too large and/or not properly fastened.



DECLARATION OF DISCLOSURE

INSTRUCTIONS

1. Parties to dissolution, legal separation and nullity cases are required to exchange a Preliminary Declaration of Disclosure with the other party. The following forms are the **Declaration of Disclosure** forms:
 - ☐ Declaration of Disclosure (FL-140)
 - ☐ Schedule of Assets and Debts (FL-142)
 - ☐ Income and Expense Declaration (FL-150)
2. Complete these 3 forms. Make 1 copy each of forms FL-140 and FL-142. Do not file these forms with the court.
3. Make 2 copies of form FL-150 and file with the court.
4. Serve a copy of each form (FL-140, FL-142, and a filed copy of FL-150) on the other party in your case.
5. Complete and sign the Declaration Re: Service of Declaration of Disclosure (FL- 141). This document is very important; it tells the Court that you have completed and served your Preliminary Declaration of Disclosure.
6. Make 2 copies and file FL-141 with the court. File the completed Proof of Service and copies at the Clerk's Office, in Martinez.
7. Serve a copy of the filed FL-141 on the other party by mail. See Form FL-335, Proof of Service by Mail.

There are instructions for filling out these forms on the court's self-help website at www.cc-courthelp.org/formsinstructions.

It is best to serve the Declaration of Disclosure on the other party as soon as possible so your case will move forward.

You can prepare these forms and serve them with the Summons and Petition or you can serve them later by mail or personal service.

There is a requirement to complete a Final Declaration of Disclosure but parties may agree to waive this requirement as part of the judgment process.

Start Your Divorce Online Workshop

Family Law Facilitator's Office

The **Start Your Divorce** workshop is now online!

Go To:

www.cc-courts.org/family/divorce.aspx

To complete the workshop you will need the following packet(s):

_____ Divorce: Start Your Divorce

_____ Fee Waiver

YOU CAN ALSO DOWNLOAD THESE PACKETS AT THE COURT WEBSITE AT www.cc-courts.org/forms. On the main page, go to "General Information" and select "Forms." Click on "Forms Packets" and scroll down to "Family Law Packets & Forms."

Once you have completed your forms, you can contact the Family Law Facilitator's Office for a review of your documents. For updated information on how to contact our office, please visit our webpage at <https://www.cc-courts.org/family/flf.aspx>.

Please note that our office cannot give legal advice. Our office can review your documents for procedural issues, but cannot help you strategize or research legal topics. If you need legal advice, please contact an attorney outside of the court.

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> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Petitioner's <input type="checkbox"/> Respondent's </div> <div> <input type="checkbox"/> Preliminary <input type="checkbox"/> Final </div> </div>	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: _____

(TYPE OR PRINT NAME)



SIGNATURE

THIS FORM SHOULD NOT BE FILED WITH THE COURT**FL-142**

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.	ASSETS DESCRIPTION	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.	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>			\$	\$
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 ACQUIRED
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)

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

- (If you have more than one job, attach an 8 1/2-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.)

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*):

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*):

- (If you need more space to answer any questions on this form, attach an 8 1/2-by-11-inch sheet of paper and write the question number before your answer.) Number of pages attached:

Date: _____

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PETITIONER: RESPONDENT: OTHER PARTY/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 <input type="checkbox"/> federally taxable*	\$	_____
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 allowances, royalty payments) (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 <input type="checkbox"/> federally tax deductible*.....	\$ _____
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).....	\$ _____

* Check the box if the spousal support order or judgment was executed by the parties and the court before January 1, 2019, or if a court-ordered change maintains the spousal support payments as taxable income to the recipient and tax deductible to the payor.

PETITIONER: RESPONDENT: OTHER PARTY/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

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

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

15. Attorney fees (This information 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: RESPONDENT: OTHER PARTY/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 expense for the children in this case

- | | Amount per month |
|---|------------------|
| a. Childcare 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 <i>(specify below)</i> | \$ _____ |

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 <i>(examples: fire, theft, other insured loss)</i> | \$ _____ | _____ |
| 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)*:

***AFTER SERVICE OF THE
DISCLOSURE DOCUMENTS,
COMPLETE, FILE AND SERVE
THE FOLLOWING FORM***

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:	
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 and 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.