

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address): ATTORNEY FOR (Name):	TELEPHONE NO.:	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:		
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT:		
REQUEST FOR PRODUCTION OF AN INCOME AND EXPENSE DECLARATION AFTER JUDGMENT		
		CASE NUMBER:

(NOTE: This request must be served on the petitioner or respondent and not on an attorney who was or is representing that party.)

To (name):

1. a. As permitted by Family Code section 3664(a), declarant requires that you complete and return the attached *Income and Expense Declaration* (form FL-150) within 30 days after the date this request is served on you. Family Code section 3665(a) requires you to attach copies of your most recent state and federal income tax returns (whether individual or joint) to the completed *Income and Expense Declaration* (form FL-150).
- b. The completed *Income and Expense Declaration* (form FL-150) should be mailed to the following person at the following address (specify) :

2. You may consult an attorney about completion of the *Income and Expense Declaration* (form FL-150) or you may proceed without an attorney. The information provided will be used to determine whether to ask for a modification of child, spousal, or family support at this time.

3. If you wish to do so, you may serve a request for a completed *Income and Expense Declaration* (form FL-150) on me. Each of us may use this procedure once a year after judgment even though no legal matter is pending.

Date:

(TYPE OR PRINT NAME)



(SIGNATURE OF DECLARANT)

WARNING: If a court later finds that the information provided in response to this request is incomplete or inaccurate or missing the prior year's tax returns, or that you did not submit the information in good faith, the court may order you to pay all costs necessary for me to get complete and accurate information. In addition you could be found to be in contempt and receive other penalties.

PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	

**PROOF OF SERVICE BY MAIL
REQUEST FOR PRODUCTION OF AN INCOME AND EXPENSE DECLARATION AFTER JUDGMENT**

1. I am at least 18 years old and **not a party to this cause**. I am a resident of or employed in the county where the mailing took place, and my residence or business address is (*specify*) :

2. I served a copy of the following documents:
 - a. a completed *Request for Production of an Income and Expense Declaration After Judgment*, and
 - b. a **blank** *Income and Expense Declaration* (a four-page form) (form FL-150).

3. I served a copy of the foregoing documents by mailing them in a sealed envelope with postage fully prepaid, certified mail, return receipt requested, as follows:
 - a. I deposited the envelope with the United States Postal Service.
 - b. I placed the envelope for collection and processing for mailing following this business's ordinary practice with which I am readily familiar. 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.

4. Manner of service:
 - a. Date of mailing:
 - b. Place mailed from:
 - c. Addressed as follows:

Name:

Street:

City, state, and zip code:

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)