Your name and address or	attorney's name and address:	TELEPHONE NO.:	FOR COURT USE ONLY	
_				
ATTORNEY FOR (Name):				
SUPERIOR COURT	OF CALIFORNIA, COUNTY OF			
STREET ADDRESS:				
MAILING ADDRESS:				
CITY AND ZIP CODE:				
BRANCH NAME:				
PETITIONER/PLAINTIFF:				
RESPONDENT/DEFENDANT:				
OTHE	ER PARENT:			
			CASE NUMBER:	
	FINANCIAL STATEMENT (SIMPLIFIED	0)		
	`	<u></u>		
	NOTICE: Read page 2 to find out if you o	qualify to use this form	and how to use it.	
4 o	nly source of income is TANF, SSI, or GA/GR.	to doo tino to tin		
	e applied for TANF, SSI, or GA/GR.			
	of the following number of natural or adopted c	hildran from this relations	shin	
	from this relationship are with me this amount o			
	from this relationship are with the other parent		· · · · · · · · · · · · · · · · · · ·	
c. Our arrange	ment for custody and visitation is (specify, using	j extra sneet ii necessary	/).	
4. My tax filing status is: single married filing jointly head of household married filing separately.				
-		-	<u> </u>	
Attach 1	This income comes from the following:			
copy of pay	Salary/wages: Amount before taxes per	month		
stubs for	Retirement: Amount before taxes per mo			
last 2	Unemployment compensation: Amount r	per month	\$	
last 2 Unemployment compensation: Amount per month \$ months here Workers' compensation: Amount per month \$				
(cross out Social security: SSI Other Amount per month				
social	Disability: Amount per month			
security	Interest income (from bank accounts or			
numbers) I have no income other than as stated in this paragraph.				
6. I pay the following monthly expenses for the children in this case:				
	care or preschool to allow me to work or go to so		\$	
	h care not paid for by insurance			
	ol, education, tuition, or other special needs of t			
	l expenses for visitation			
	-			
	e (specify number)other minor chi			
	are			
	owing average monthly amounts (please attach			
	elated expenses that are not paid by my employ	· •	· · · · · · ———	
	ired union dues		· · · · · · · · · · · · · · · · · · ·	
	ired retirement payments (not social security, Fl			
	n insurance costs			
	support I am paying for other minor children of			
	sal support I am paying because of a court orde			
g Month	nly housing costs: rent or morto	gage		
If mortgage: interest payments \$ real property taxes \$				
9. Information concerning my current employment my most recent employment:				
Employer:				
Address:				
Telephone num	ber:			
My occupation:	- J.			
Date work starte			-) (
Date work stopp	oed (if applicable): What was your gi	oss income (betore taxe	s) before work stopped?:	

PETITIONER/PLAINTIFF:	CASE NUMBER:			
RESPONDENT/DEFENDANT:				
OTHER PARENT:				
10. My estimate of the other party's gross monthly income (before taxes) is	\$			
11. My current spouse's monthly income (before taxes) is\$				
12. Other information I want the court to know concerning child support in my case (attach extra sheet with the information).				
13. I am attaching a copy of page 3 of form FL-150, Income and Expense Declaration showing my expenses.				
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)			
PETITIO	DNER/PLAINTIFF RESPONDENT/DEFENDANT			
INSTRUCTIONS				

Step 1: Are you eligible to use this form? If your answer is YES to any of the following questions, you may NOT use this form:

- Are you asking for spousal support (alimony) or a change in spousal support?
- Is your spouse or former spouse asking for spousal support (alimony) or a change in spousal support?
- Are you asking the other party to pay your attorney fees?
- Is the other party asking you to pay his or her attorney fees?
- Do you receive money (income) from any source other than the following?
 - Welfare (such as TANF, GR, or GA)
 - Salary or wages
 - Disability
 - Unemployment

- Interest
- Workers' compensation
- Social security
- Retirement

• Are you self-employed?

If you are eligible to use this form and choose to do so, you do not need to complete the *Income and Expense Declaration* (form FL-150). Even if you are eligible to use this form, you may choose instead to use the *Income and Expense Declaration* (form FL-150).

Step 2: Make 2 copies of each of your pay stubs for the last two months. If you received money from other than wages or salary, include copies of the pay stub received with that money.

Privacy notice: If you wish, you may cross out your social security number if it appears on the pay stub, other payment notice or your tax return

- Step 3: Make 2 copies of your most recent federal income tax form.
- **Step 4: Complete this form with the required information.** Type the form if possible or complete it neatly and clearly in black ink. If you need additional room, please use plain or lined paper, 8½-by-11", and staple to this form.
- Step 5: Make 2 copies of each side of this completed form and any attached pages.
- **Step 6: Serve a copy on the other party.** Have someone other than yourself mail to the attorney for the other party, the other party, and the local child support agency, if they are handling the case, 1 copy of this form, 1 copy of each of your stubs for the last two months, and 1 copy of your most recent federal income tax return.
- **Step 7: File the original with the court.** Staple this form with 1 copy of each of your pay stubs for the last two months. Take this document and give it to the clerk of the court. Check with your local court about how to submit your return.
- Step 8: Keep the remaining copies of the documents for your file.
- Step 9: Take the copy of your latest federal income tax return to the court hearing.

It is very important that you attend the hearings scheduled for this case. If you do not attend a hearing, the court may make an order without considering the information you want the court to consider.