Name	
Address	
City, State, Zip	
Phone	heck your email. You will receive information and
	ocuments at this email address.
Email	
I am [] Petitioner [] Responde	nt
[] Petitioner's Attorney [] Responde	nt's Attorney (Utah Bar #:)
[] Petitioner's Licensed Paralegal Practitioner[] Respondent's Licensed Paralegal Practition	or /Utob Por#
[] Respondent's Licensed Paralegal Practition	er (Utah Bar #:)
In the District (Court of Utah
Iudicial District	County
Judicial District	County
Court Address	
In the Matter of (select one)	
in the Matter of (selectione)	Financial Declaration
[] the Marriage of (for a diverse with as withou	(Utah Rule of Civil Procedure 26.1)
[] the Marriage of (for a divorce with or without children, annulment, separate maintenance, or	
temporary separation case)	Case Number
[] the Children of (to establish custody, paren	t-
time or child support)	
[] the Parentage of the Children of (for a	Judge
paternity case)	
(name of Petitioner)	Commissioner
and	
(name of Pagnandant)	-
(name of Respondent)	
Other parties (if any)	_
Other parties (if any)	

You must fully and accurately disclose all assets and income in this document and provide attachments. If you fail to disclose all assets and income, you could be subject to sanctions under Utah Rule of Civil Procedure 37. Sanctions can include an award of non-disclosed assets to the other party, attorney's fees or other sanctions.

1.	I am	I am providing this form to the other party and (Choose one.):						
	[]	I am not filing the Financial Declaration with the countering about child support, spousal support, property, defees and court costs is not scheduled, or because the coordered me to file it.	lebts, attorney					
		I am filing the separate Certificate of Service of Financial	Declaration.					
	[]	I am filing the Financial Declaration with the court be about child support, spousal support, property, debts, att court costs is scheduled, or the court has ordered me to	orney fees and					
		I am also filing the separate Certificate of Service of Fina	incial Declaration.					
2.	I am	attaching the following documents, if available:						
	Tax •	returns. For the two years before the petition was filed: federal and state income tax returns – personal and for any entities in which I have a majority or controlling interest all documents used to prepare the tax returns	[] Attached [] Not attached [] Doesn't apply					
	_	stubs or other proof of income. For the 12 months are the petition was filed: pay stubs other proof of all earned and un-earned income	[] Attached [] Not attached [] Doesn't apply					
		n applications. For the 12 months before the petition filed: all loan applications financial statements used to apply for the loans	[] Attached [] Not attached [] Doesn't apply					
	all re	I estate documents. Documents verifying the value of eal estate in which I have an interest. This includes the trecent appraisal, tax valuation, and refinance uments.	[] Attached [] Not attached [] Doesn't apply					
	was This certi	incial statements. For the 3 months before the petition filed all financial statements for all financial accounts. includes checking, savings, money market funds, ficates of deposit, brokerage, investment, and ement.	[] Attached [] Not attached [] Doesn't apply					

Docum		nent		Reason		
			n proof of amounts liste eached that amount.)	ed. If the proof is	s not available	e, estimat
[]	•	•	se all that apply):			
LJ	[] an hourly	•				
	[] a salaried					
				dulo C. oto \		
		-	1099, Form K-1, Sche			
	[] otner (Expi	ain):				
Na	me of employer		yer's address and none number	Job title	Hourly rate or annual salary	Hours wee (If hou
					\$	
					\$	
1					\$	
[]	I am unemplo	yed becau	Ise:			
[]	I am unemplo	yed becau	use:			
[]	I am unemplo	yed becau	use:			
[]			use: nounts in paragrapl	h 3.		
[]		ted the am	nounts in paragrapl	h 3.	ation	

- 4. **Gross Monthly Income** (You must attach proof of amounts listed. If the proof is not available, estimate the amount and explain how you reached that amount.)
 - [] I have the following monthly income before tax deductions:

 (Print your pre-tax income in the boxes below. For income that changes from month to month, calculate the annual total and divide by 12 months to list a monthly average.)

Source of income	Monthly amount
Work (Including self employment, wages, salaries, commissions, bonuses, tips and overtime)	\$
Rental income	\$
Business income	\$
Interest	\$
Dividends	\$
Retirement income (Including pensions, 401(k), IRA, etc.)	\$
Worker's compensation	\$
Private disability insurance	\$
Social Security Disability Income (SSDI)	\$
Supplemental Security Income (SSI)	\$
Social Security (Other than SSDI or SSI)	\$
Unemployment benefits	\$
Education benefits (Including grants, loans, cash scholarships, etc.)	\$
Veteran's benefits	\$
Alimony	\$
Child support	\$
Payments from civil litigation	\$
Victim restitution	\$
Public assistance (Including AFDC, FEP, TANF, welfare, etc.)	\$
Financial support from household members	\$
Financial support from non-household members	\$
Trust income	\$
Annuity income	\$
Other (Describe)	\$
Other (Describe)	\$
Total gross monthly income	\$

] I have no income because Monthly Tax Deductions (You vailable, estimate the amount and expenses of the control of the contr	must attach proof of a	mounts listed. If the proof is no
//	must attach proof of a	mounts listed. If the proof is no
		mounts listed. If the proof is no
		mounts listed. If the proof is no
	•	•
] I have no monthly tax ded	uctions because I h	ave no income.
] I have the following month	ly tax deductions.	-
Type of tax deduction	Amount	
Federal income tax	\$	
State income tax	\$	
Municipal income tax	\$	
FICA	\$	
Medicare	\$	
Total monthly tax deductions	\$	
] I have estimated the amou	ınts in paragraph 5.	
Item estimated	Bas	is for estimation
After Tax Income		
] My monthly income is:		
\$	Gross monthly income	e from section 4

		= \$ Equals after-tax monthly income
	[]	have no income.
7.	estima	hly Expenses (You must attach proof of amounts listed. If the proof is not available, te the amount and explain how you reached that amount. Include amounts you pay for If and any spouse, children or other dependents in your household.)
	[]	No party has requested alimony so I am only completing the "Current Amount" column, which represents the amount I pay now.
	[]	One of the parties has requested alimony so I am completing both the "Current Amount" and the "Marital Expenses" column, which represents the amount paid during the marriage prior to separation.

Monthly expense	Current Amount	Marital Expenses
Rent or mortgage	\$	\$
Real estate taxes (if not included in mortgage)	\$	\$
Real estate insurance (if not included in mortgage)	\$	\$
Real estate maintenance	\$	\$
Food and household supplies	\$	\$
Clothing	\$	\$
Automobile payments	\$	\$
Automobile insurance	\$	\$
Automobile fuel	\$	\$
Automobile maintenance	\$	\$
Other transportation costs (public transportation, parking, etc.)	\$	\$
Utilities (such as electricity, gas, water, sewer, garbage)	\$	\$
Telephone	\$	\$
Paid television, cable, satellite	\$	\$
Internet	\$	\$
Credit card payments	\$	\$
Loans and other debt payments	\$	\$
Alimony	\$	\$
Child support	\$	\$
Child care	\$	\$

Monthly expense	Current Amount	Marital Expenses
Extracurricular activities for children	\$	\$
Education (children)	\$	\$
Education (self)	\$	\$
Health care insurance	\$	\$
Health care expenses (excluding insurance listed above)	\$	\$
Other insurance (describe)	\$	\$
Entertainment	\$	\$
Laundry and dry cleaning	\$	\$
Donations	\$	\$
Gifts	\$	\$
Union and other dues	\$	\$
Garnishment or income withholding order	\$	\$
Retirement deposits (including pensions, 401(k), IRA, etc.)	\$	\$
Other (describe)	\$	\$
Other (describe)	\$	\$
Total monthly expenses	\$	\$

[] I have estimated the amounts in paragraph 7.

Item estimated	Basis for estimation

	· · · · · · · · · · · · · · · · · · ·
	(You must attach proof of amounts listed. If the proof is not available, explain how you reached that amount. Add additional sheets if needed.)
[] I have no busine	ess interests.
[] I have the follow	ving business interests.
Business name	
Address & phone	

Natu	re of business					
Curre busir	ent value of the ness	Date of formation	n:	Percent owner	d by oner% Resp	ondent
Busir	ness name					
Addr	ess & phone					
Natu	re of business					
Curre busir	ent value of the ness	Date of formation	n:	Percent owner	d by oner% Resp	ondent
[]	I have estimated	the am	nounts in	paragraph 8.		
	Item estimate	ed		Basi	s for estimation	
estima	ate the amount and	explain h	ow you rea		ed. If the proof is not a int. Add additional she	
	I have no financ					
[]	I have the follow	ring tina ⊤	nciai asse	eis.		Cumant
	Asset	Name	& address	of institution	Names on account	Current balance
	or credit union ount number:					
Date	opened:					
	hecking					
	avings ther					\$

9.

Asset	Name & address of institution	Names on account	Current balance
Bank or credit union Account number:			
Date opened:			
Type: [] checking [] savings [] other			\$
Stocks, bonds, securities, money market account Account number: Date opened:			\$
Retirement account			Ψ
Account number:			
Date opened:			
Plan name:			
Plan representative:			\$
Profit sharing plan Account number:			
Date opened:			
Plan name:			
Plan representative:			\$
Annuity Account number:			
Date opened:			
Plan name:			
Plan representative:			\$

	Asset	Name	& address of institu	tion	Names on account	Current balance
Life ins Account Date op	number:					Term life benefit amount:
						\$
Plan na	me:					Whole life
Plan representative:					benefit amount:	
						Cash value:
						\$
	owed to me					
Date of	loan: 					\$
Cash						\$
Other (d	describe)					
						\$
Other (d	describe)					
						\$
[] Ih	ave estimated	the am	nounts in paragra	ph 9.		
	Item estimate	d		Basi	s for estimation	
					ne proof is not available dditional sheets if need	
[] Ih	ave no real es	tate.				
[] Ih	ave the followi	ng real	estate.			
Home						

10.

Address						
			\$	\$		
Date acquired	Name(s) on title		\$ Original cost	Curre	ent value	
			\$	\$		
First mortgage or lien holder (name & address)		Amount owe	ed Mo	nthly payments	
			\$	\$		
Second mortgage or lien hold	er (name & address)		Amount owe	ed \$	nthly payments	
Other real estate						
Address						
			¢	¢		
Date acquired	Name(s) on title		Original cost	\$ Curre	ent value	
			¢	¢		
First mortgage or lien holder (name & address)		Amount owe	ed Mo	\$ Monthly payments	
			\$	\$		
Second mortgage or lien hold	er (name & address)		Amount owe	ed \$	nthly payments	
Item estimat	ted	Ва	asis for estimat	ion		
Personal Property and collectibles. You must the amount and explain h	st attach proof of a now you reached th	mounts listed. If	the proof is no	ot available, o	estimate	
[] I have the follow		roperty.				
Property description (if automobile, include year, make, and model) Debt owed to (name and address)		Names on title (if applicable)	Current value	Amount owed	Minimum monthly payments	
Vehicle			\$	\$	\$	
Vehicle				1.		
Vehicle			\$	\$	\$	

11.

Property description (if automobile, include year, make, and model)	Debt owed to (name and address)	Names on title (if applicable)	Current value	Amount owed	Minimum monthly payments
			\$	\$	\$
			\$	\$	\$

Basis for estimation		

12.	Debts Owed (Do not include amounts you owe on property reported in the Real Estate or
	Personal Property sections. You must attach proof of amounts listed. You must also attach 3
	months of credit/debit account statements. If the proof is not available, estimate the amount and
	explain how you reached that amount. Add additional sheets if needed.)

Γ	1	Ob I	not	OWE	anv	debts.
L	J	ı uu	HOL	OWE	arry	ucuts.

[] I owe the following debts.

Type of debt (such as credit card, cash loan, or installment payment and account number, if any)	Debt owed to (name and address and phone number)	Names on debt	Amount owed	Minimum monthly payments
Type of debt:				
Account number:			\$	\$
			Ψ	Ψ
Type of debt:				
Account number:				
Account number:				
			\$	\$
Type of debt:				
Account number:				
			\$	\$
			Ψ	Ψ

Type of debt (such as credit card, cash loan, or installment payment and account number, if any)	Debt owed to (name and address and phone number)	Names on debt	Amount owed	Minimum monthly payments
Type of debt:				
Account number:			\$	\$
Type of debt:				
Account number:			\$	\$
Type of debt:				
Account number:			\$	\$

[] I have estimated the amounts in paragraph 12.

Item estimated	Basis for estimation

Warning

If you do not fully disclose all assets and income in this document and provide attachments you could be subject to sanctions under Utah Rule of Civil Procedure 37.

Sanctions can include an award of non-disclosed assets to the other party, attorney's fees or other sanctions.

Petitioner or Respondent

I declare under criminal penalty under the	e law of Utah that everything stated	in this document is true.
Signed at		(city, and state or country).
	Signature ▶	
Date	Printed Name	
Attorney or Licensed Paralegal I	Practitioner of record (if appl	icable)
Data	Signature ▶	
Date	Printed Name	