

Give financial information in a family law case

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If your family law case involves money, you'll need to give the judge information about your finances. Do this by filing a Financial Declaration form and proof of your income. You can file paystubs, tax returns, and other personal financial information under a sealed cover sheet to protect your privacy. (Forms and instructions)

Form attached:

Financial Declaration of (name): _____ (FL All Family 131)

Form attached:

Sealed Cover Sheet – Confidential (All Civil 040)

What is a Financial Declaration?

A Financial Declaration is a statement about your income, assets, and expenses. It may also include information about the other party's income.

File a Financial Declaration when the judge will be making decisions about money in a family law case. This could be for:

- Child support
- Alimony (called spousal maintenance)
- Dividing property in a divorce
- Fees and costs for the case

You may need to file a Financial Declaration at the beginning of your case, when filing or responding to a motion for temporary orders, or to prepare for trial.

What other financial information do I need?

Financial records can help prove to the judge that what you're saying in your Financial Declaration is true. Local court rules (http://www.courts.wa.gov/court_rules/?fa=court_rules.localsupbycrt) may also require you to file certain kinds of financial records about your income, such as taxes, paystubs, or W-2s.

Usually, you **don't** have to show proof of your expenses unless the judge or the other party questions them.

If health issues have limited your ability to work, you may want to file health records to prove it.

How do I keep my information private?

Both financial and health records have sensitive personal information. You can file those records under a Sealed Cover Sheet to keep them confidential. You can also black out (redact) information that you don't want anyone to see,

like your social security number or your address, if it's confidential.

Using a Sealed Cover Sheet keeps your records away from the public. You still must give a copy of anything you file with the court to the person/s on the other side of your case.

What information do I need?

It's helpful to have your most recent paystubs, taxes, or benefits statements with you when filling out your Financial Declaration. If your paychecks vary, you may want to add up the past 6 months or a year and calculate the average monthly amount.

You must put how much you spend each month on:

- housing
- utilities
- food
- health care
- transportation
- children's expenses
- other household and personal expenses.
- debt payments

Have bills or statements handy for reference. It's okay to estimate.

Step-by-step

If you're filing a Financial Declaration with a motion or other forms, follow the instructions with those forms for making copies and filing and serving all the

papers together. If you're just filing the Financial Declaration and proof of income or health records, follow these steps:

1. **Fill out and sign** the Financial Declaration (and Sealed Cover Sheet, if needed). You can fill out the forms online or print them. If you're filing any health records or proof of income, number each page and attach them to the Sealed Cover Sheet. Check the boxes on the Sealed Cover Sheet that describe the documents you're attaching.
2. **Make at least 2 copies** of your completed forms and any attachments. Make more if needed. You'll need one copy for yourself, plus one for each other party to the case. Sometimes you need an extra copy for the judge.
3. **File** your papers with the court clerk.
4. **Arrange to mail or deliver the papers to the other parties.** Have your server fill out a Proof of Mailing and Hand Delivery.
5. **Deliver a set of working copies to the judge, if needed.**
6. **File** Proof of Mailing and Hand Delivery with the court clerk.

WashingtonLawHelp.org gives general information. It is not legal advice. Find organizations that provide free legal help on our Get legal help page.

Superior Court of Washington, County of _____

In re:

Petitioner/s *(person/s who started this case)*:

And Respondent/s *(other party/parties)*:

No. _____

Financial Declaration of
(name): _____

(FNDCLR)

Financial Declaration

1. Your personal information

Name: _____

Highest year of education you completed: _____ Your job/profession is: _____

Are you working now?

☐ Yes. List the date you were hired *(month / year)*: _____

☐ No. List the last date you worked *(month / year)*: _____

What was your monthly pay *before* taxes: \$ _____

Why are you not working now? _____

2. Summary of your financial information

*(Complete this section **after** filling out the rest of this form.)*

1. Total Monthly Net Income <i>(copy from section 3, line C. 3.)</i>	\$
2. Total Monthly Expenses After Separation <i>(copy from section 7, line I.)</i>	\$
3. Total Monthly Payments for Other Debts <i>(copy from section 9)</i>	\$
4. Total Monthly Expenses + Payments for Other Debts <i>(add line 2 and line 3)</i>	\$
Gross Monthly Income of Other Party <i>(copy from section 3. A.)</i>	\$

3. Income

List monthly income and deductions below for you and the other person in your case. If your case involves child support, this same information is required on your *Child Support Worksheets*. If you do not know the other person's financial information, give an estimate.

Tip: If you do not get paid once a month, calculate your *monthly* income like this:

Monthly income = Weekly x 4.3 **or** 2-week x 2.15 **or** Twice a month x 2

A. Gross Monthly Income (before taxes, deductions, or retirement contributions)		
	You	Other Party
Monthly wage / salary		
Income from interest / dividends		
Income from business		
Spousal support / maintenance received (Paid by: _____)		
Other income		
Total Gross Monthly Income (add all lines above)		
Total gross income for this year before deductions (starting January 1 of this year until now)		

B. Monthly Deductions		
	You	Other Party
Income taxes (federal and state)		
FICA (Soc.Sec. + Medicare) or self-employment taxes		
State Industrial Insurance (Workers' Comp.)		
Mandatory union or professional dues		
Mandatory pension plan payments		
Voluntary retirement contributions (up to the limit in RCW 26.19.071(5)(g))		
Spousal support / maintenance paid		
Normal business expenses		
Total Monthly Deductions (add all lines above)		

C. Net Monthly Income		
	You	Other Party
1. Total Gross Monthly Income (from A above)		
2. Total Monthly Deductions (from B above)		
3. Net Monthly Income (Line 1 minus Line 2)		

4. Other Income and Household Income

Tip: If this income is not once a month, calculate the *monthly* amount like this:

Monthly income = Weekly x 4.3 or 2-week x 2.15 or Twice a month x 2

A. Other Income (Do not repeat income you already listed on page 2.)		
	You	Other Party
Child support received from other relationships		
Other income (From: _____)		
Other income (From: _____)		
Total Other Income (add all lines above)		

B. Household Income (Monthly income of other adults living in the home)		
	Your Home	Other Party's Home
Other adult's gross income (Name: _____)		
Other adult's gross income (Name: _____)		
Total Household Income of other adults in the home (add all lines above)		

5. Disputed Income – If you disagree with the other party's statements about anyone's income, explain why the other party's statements are not correct, and your statements are correct:

6. Available Assets

List your liquid assets, like cash, stocks, bonds, that can be easily cashed.	
Cash on hand and money in all checking & savings accounts	\$
Stocks, bonds, CDs and other liquid financial accounts	\$
Cash value of life insurance	\$
Other liquid assets	\$
Total Available Assets (add all lines above)	

7. Monthly Expenses After Separation

Tell the court what your monthly expenses are (or will be) after separation. If you have dependent children, your expenses must be based on the parenting plan or schedule you expect to have for the children.

A. Housing Expenses		F. Transportation Expenses	
Rent / Mortgage Payment		Automobile payment (<i>loan or lease</i>)	
Property Tax (if not in monthly payment)		Auto insurance, license, registration	
Homeowner's or Rental Insurance		Gas and auto maintenance	
Other mortgage, contract, or debt payments based on equity in your home		Parking, tolls, public transportation	
Homeowner's Association dues or fees		Other transportation expenses	
Total Housing Expenses		Total Transportation Expenses	
B. Utilities Expenses		G. Personal Expenses (not children's)	
Electricity and heating (gas and oil)		Clothes	
Water, sewer, garbage		Hair care, personal care	
Telephone(s)		Recreation, clubs, gifts	
Cable, Internet		Education, books, magazines	
Other (<i>specify</i>):		Other Personal Expenses	
Total Utilities Expenses		Total Personal Expenses	
C. Food and Household Expenses		H. Other Expenses	
Groceries for (<i>number of people</i>): _____		Life insurance (not deducted from pay)	
Household supplies (cleaning, paper, pets)		Other (<i>specify</i>):	
Eating out		Other (<i>specify</i>):	
Other (<i>specify</i>):		Other (<i>specify</i>):	
Total Food and Household Expenses		Total Other Expenses	
D. Children's Expenses		List all Total Expenses from above:	
Childcare, babysitting		A. Total Housing Expenses	
Clothes, diapers		B. Total Utilities Expenses	
Tuition, after-school programs, lessons		C. Total Food and Household Expenses	
Other expenses for children		D. Total Children's Expenses	
Total Children's Expenses		E. Total Health Care Expenses	
E. Health Care Expenses		F. Total Transportation Expenses	
Insurance premium (health, vision, dental)		G. Total Personal Expenses	
Health, vision, dental, orthodontia, mental health expenses not covered by insurance		H. Total Other Expenses	
Other health expenses not covered by insurance		I. All Total Expenses (add A - H above)	
Total Health Care Expenses		Use section 10 below to explain any unusual expenses, or attach additional pages.	

8. Debts included in Monthly Expenses listed in section 7 above

Debt for what expense (mortgage, car loan, etc.)	Who do you owe (Name of creditor)	Amount you owe this creditor now	Last Monthly Payment made
		\$	Date:
		\$	Date:
		\$	Date:
		\$	Date:

9. Monthly payments for other debts (not included in expenses listed in section 7)

Describe Debt (credit card, loan, etc.)	Who do you owe (Name of creditor)	Amount you owe this creditor now	Last Monthly Payment (Date and Amount)	
		\$	Date:	\$
		\$	Date:	\$
		\$	Date:	\$
		\$	Date:	\$
		\$	Date:	\$
		\$	Date:	\$
Total Monthly Payments for Debts				

10. Explanation of expenses or debts (if any needed):

11. Lawyer Fees

List your total lawyer fees and costs for this case as of today.

Amount paid	\$	Source of the money you used to pay these fees and costs: Describe your agreement with your lawyer to pay your fees and costs:
Amount still owed	\$	
Total Fees/Costs	\$	

I declare under penalty of perjury under the laws of the state of Washington that the facts I have provided on this form are true.

Signed at (city and state): _____ Date: _____



Sign here

Print name

Financial Records – You must provide financial records as required by statute and state and local court rules. These records may include:

- Personal Income Tax Returns
- Partnership or Corporate Income Tax Returns
- Pay stubs
- Other financial records

Important! Do not attach financial records to this form. Financial records should be served on the other party and filed with the court separately using the *Sealed Financial Source Documents* cover sheet (FL All Family 011). If filed separately using the cover sheet, the records will be sealed to protect your privacy (although they will be available to all parties and lawyers in this case, court personnel and certain state agencies and boards.) See GR 22(c)(2).

Superior Court of Washington, County of _____
Tribunal Superior de Washington, Condado de _____

In re:

En referencia a:

Petitioner/s (*person/s who started this case*):
Las partes demandantes (personas que iniciaron este caso):

And Respondent/s (*other party/parties*):
Y las partes demandadas (las otras partes):

No. _____

Núm. _____

Sealed Cover Sheet – Confidential:
Portada de documentos bajo sello –
Confidencial:

(check one)

(*marque una opción*)

☐ Sealed Financial Source Documents
(SEALFN)

Documentos sellados sobre fuentes económicas (SEALFN)

☐ Sealed Personal Health Care Records
(SEALPHC)

Registros sellados de atención médica personal (SEALPHC)

☐ Sealed Confidential Report (SEALRPT)
Informe confidencial sellado (SEALRPT)

Court Clerk: This is a Restricted Access Document. Do not file in a public access file.

Actuario del tribunal: este es un documento de acceso restringido. No archivar en un archivo de acceso público.

Sealed Cover Sheet – Confidential
Portada de documentos bajo sello – Confidencial

Important! Use this cover sheet as **page 1** of a separate filing. Check document/s below. Write “Confidential” at least one inch from the top of the first page of each attached document. For use only in family law, guardianship, and protection order cases.

¡Importante! Use esta portada como la **página 1** de una presentación por separado. Marque los documentos a continuación. Escriba “Confidencial” por lo menos una pulgada debajo del borde superior de la primera página de cada documento adjunto. Para uso exclusivo en casos de derecho familiar, tutela y órdenes de protección.

- [] Financial Source Documents (SEALFN) (*describe*) _____
Documentos sobre fuentes económicas (SEALFN) (describa)
- [] Health Care Records (SEALPHC)
Registros de atención médica (SEALPHC)
- [] Medical/Psychological Report (SEALRPT)
Informe médico/psicológico (SEALRPT)
- [] Court Visitor/Guardian ad Litem Report (SEALRPT)
Informe al tribunal del visitante/tutor ad litem (SEALRPT)
- [] Social Security Representative Payee Report (SEALRPT)
Informe del representante para recepción de pagos del Seguro Social (SEALRPT)
- [] Other _____
Otro

Submitted by:
Presentado por:

► _____
Signature *Print Name* []WSBA []CPG#
Firma *Nombre en letra de molde* WSBA CPG#

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