THERE WILL BE NO REFUNDS OR EXCHANGES ON SUPERIOR COURT FORMS OR PACKETS



SUPERIOR COURT OF CALIFORNIA County of Kings 1640 Kings County Drive, Hanford, CA 93230 (559) 582-1010

DISSOLUTION OF MARRIAGE PACKET (Step 2 of 3)



Online Assistance: www.courts.ca.gov/selfhelp.htm
The California Courts Self-Help Center

E-file California: https://www.kings.courts.ca.gov/online-services/online-case-filing

Kings County Superior Court: www.kings.courts.ca.gov
Hours of Operation (Except for Court Holidays): Monday – Friday 8:00a.m. to 4:00p.m.

FORMS INCLUDED IN THIS PACKET		
Proof of Service of Summons	Judicial Council Form FL-115	
Notice of Acknowledgment of Receipt	Judicial Council Form FL-117	
Declaration Regarding Service of Declaration of Disclosure and Income and Expense Declaration	Judicial Council Form FL-141	
(Please note: This form is mandatory for both parties unless Request to Enter Default (FL-165) will be filed – then mandatory only for Petitioner. The divorce will NOT be finalized until this form has been filed with the Court.)		
Filing Fees:	No filing fee required	

PARTY WITHOUT ATTORNEY OF ATTORNEY STATE BAR NO.:	FOR COURT USE ONLY	
NAME:		
FIRM NAME:		
STREET ADDRESS:		
CITY: STATE: ZIP CODE:		
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:		
PROOF OF SERVICE OF SUMMONS	CASE NUMBER:	
At the time of service I was at least 18 years of age and not a party to this action. Family Law: Petition—Marriage/Domestic Partnership (form FL-100), See Marriage/Domestic Partnership (form FL-120) —or— b. Uniform Parentage: Petition to Determine Parental Relationship (form FL-220) Response to Petition to Determine Parental Relationship (form FL-220)	Summons (form FL-110), and blank Response— L-200), Summons (form FL-210), and blank	
-or-		
c. Custody and Support: Petition for Custody and Support of Minor Children (blank Response to Petition for Custody and Support of Minor Children (and		
d. (1) Completed and blank Declaration Under Uniform Child Custody Jurisdiction and	Completed and blank <i>Financial Statement</i> (<i>Simplified</i>) (form <u>FL-155)</u> Completed and blank <i>Property</i>	
(2) Completed and blank Declaration of	Declaration (form <u>FL-160</u>) Request for Order (form <u>FL-300</u>), and blank	
(3) Completed and blank Schedule of Assets	Responsive Declaration to Request for Order form FL-320)	
(4) Completed and blank Income and Expense Declaration (form FL-150)	Other (specify):	
2. Address where respondent was served:		
3. I served the respondent by the following means (check proper boxes):		
 a. Personal service. I personally delivered the copies to the respondent on (date): at (time): 	(Code Civ. Proc., § 415.10)	
b. Substituted service. I left the copies with or in the presence of (name):	
who is (specify title or relationship to respondent):		
(1) (Business) a person at least 18 years of age who was apparation business of the respondent. I informed the person of the ger		
(2) (Home) a competent member of the household (at least 18 years of age) at the home of the respondent. I informed the person of the general nature of the papers.		
on (date): at (time):		
I thereafter mailed additional copies (by first class, postage prepaid) to the copies were left (Code Civ. Proc., § 415.20b) on (date):	ne respondent at the place where the	
A declaration of diligence is attached, stating the actions taken to first	attempt personal service.	

		FL-115
PETITIONER:		CASE NUMBER:
RESPONDENT:		
	ate): and Acknowledgment of Receipt (form	from (city):
(2) to an address outside Californ		return receipt requested). (Attach signed adent.) (Code Civ. Proc., §§ 415.40, 417.20.)
d. Other (specify code section):	,	,
Continued on Attachment 3d.		
4. Person who served papers		
Name: Address:		
Telephone number: This person is a exempt from registration under Busine b not a registered California process se c a registered California process server (1) Registration no.: (2) County: (3) The fee for service was (specify):	rver. : an employee or an	350(b). independent contractor
		the foregoing is true and correct
5. I declare under penalty of perjury under the	-or-	the loregoing is true and correct.
6. I am a California sheriff, marshal, or co	nstable, and I certify that the foregoin	g is true and correct.
Date:		
(NAME OF PERSON WHO SERVED PAPERS)		CICNATURE OF REPONUANO CERVER PARERO
	(S	GIGNATURE OF PERSON WHO SERVED PAPERS)

PARTY WITHOUT ATTORNEY or ATTORNEY STATE BAR NO.:	FOR COURT USE ONLY
NAME:	· · · · · · · · · · · · · · · · · · ·
FIRM NAME:	
STREET ADDRESS:	
CITY: STATE: ZIP CODE:	
TELEPHONÉ 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:	
	CASE NUMBER:
NOTICE AND ACKNOWLEDGMENT OF RECEIPT	CASE NUMBER.
(Sender completes items 1 through 4 and signs before mailing. Recipient complete	es items 5 and 6, signs, then returns)
To (name of individual being served):	
NOTICE	
The documents identified below are being served on you by mail with this acknowledgme	ant form. You must personally sign, or a
person authorized by you must sign, this form to acknowledge receipt of the documents.	int form. Too most personally sign, or a
person authorized by you must sign, this form to acknowledge receipt of the documents.	
If the documents described below include a summons and you fail to complete and return	this acknowledgment form to the sender
within 20 days of the date of mailing, you will be liable for the reasonable expenses incurr	
attempting to serve you with these documents by any other methods permitted by law. If	
of a summons is deemed complete on the date you sign the acknowledgment of receipt to	
If you do not agree with what is being requested, you must submit a completed Response	
	o lotti to tilo ocari mani oc calcinali sayo.
Date of mailing (specify):	
3. (TYPE OR PRINT SENDER'S NAME) (SIGNATURE	OF SENDER-MUST NOT BE A PARTY IN THIS CASE
(TIPE ON TRIAL SCHOOL OF TANIEL)	AND MUST BE 18 YEARS OR OLDER)
ACKNOWLEDGMENT OF RECEIPT	
4. I agree I received the following:	
· ·	
 Family Law: Petition—Marriage/Domestic Partnership (form <u>FL-100</u>), Sumn Marriage/Domestic Partnership (form <u>FL-120</u>) 	nons (form <u>FL-110</u>), and blank Response—
b. Uniform Parentage: Petition to Determine Parental Relationship (form FL-20	0). Summons (form FL-210), and blank
Response to Petition to Determine Parental Relationship (formFL-220)	y / Commons (ISIIII L-2 10), and Dialik
Tresponse to Feation to Determine Farental Metationship (101111 <u>FL-220</u>)	
c. Custody and Support: Petition for Custody and Support of Minor Children (1	form FL-260), Summons (form FL-210), and
blank Response to Petition for Custody and Support of Minor Children (form	
	·
	mpleted and blank Financial Statement
,	mplified) (form <u>FL-155</u>)
$(UCCJEA)$ (form <u>FL-105</u>) (6) \square Co	mpleted and blank Property Declaration
	rm <u>FL-160</u>)
	quest for Order (form FL-300), and blank
	sponsive Declaration to Request for Order
(-)	rm FL-320)
	,
	ner (specify):
Declaration (form <u>FL-150</u>)	
5. Recipient signed this acknowledgment on (specify date):	
Land and the state of the state	
6.	
(TYPE OR PRINT NAME OF PERSON ACKNOWLEDGING RECEIPT) (SIGNA'	TURE OF PERSON ACKNOWLEDGING RECEIPT)

ATTORNEY OR PARTY MTHOUT 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	CASE NUMBER:
DISCLOSURE AND INCOME AND EXPENSE DECLARATION Petitioner's Preliminary	CASE NUMBER
Respondent's Final	
I am the attorney for petitioner respondent in this matter.	
2. Petitioner's Respondent's Preliminary Declaration of Disclosure (form Declaration (form FL-150), completed Schedule of Assets and Debts (form FL-142) or Declarations (form FL-160) with appropriate attachments, all tax returns filed by the pa preliminary disclosures, and all other required information under Family Code section 2 the other party the other party's attorney by personal service Other (specify): on (date):	Community and Separate Property rty in the two years before service of the 2104 were served on:
 Petitioner's Respondent's Final Declaration of Disclosure (form FL-140 (form FL-150), completed Schedule of Assets and Debts (form FL-142) or Community FL-160) with attachments, and the material facts and information required by Family C 	or Separate Property Declarations (form
the other party other party's attorney by personal service Other (specify): on (date):	mail
4. Service of Petitioner's Respondent's preliminary current income and expense declaration has been waived as follows: a. The parties agreed to waive final declaration of disclosure requirements unde (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.The party has failed to comply with disclosure requirements, and the court has	s granted the request for voluntary waiver of
receipt under Family Code section 2107 on (date):	
 This is a default proceeding that does not include a stipulated judgment or se disclosure requirements under Family Code section 2110. 	ttlement agreement. Petitioner waives final
*Current is defined as completed within the past three months providing no facts have cha	nged. (Cal. Rules of Court, rule 5.260.)
I declare under penalty of perjury under the laws of the State of California that the foregoin	g is true and correct.
Date:	
<u> </u>	SIGNATURE
(TYPE OR PRINT NAME)	SIGNATURE
NOTE: File this document with the court.	

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.

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