

ATTORNEY OR PARTY WITHOUT ATTORNEY:		STATE BAR NO.:	FOR COURT USE ONLY
NAME:			
FIRM NAME:			
STREET ADDRESS:			
CITY:	STATE:	ZIP CODE:	
TELEPHONE NO.:		FAX NO.:	
EMAIL ADDRESS:			
ATTORNEY FOR (name):			
SUPERIOR COURT OF CALIFORNIA, COUNTY OF			
STREET ADDRESS:			
MAILING ADDRESS:			
CITY AND ZIP CODE:			
BRANCH NAME:			
PLAINTIFF/PETITIONER:			
DEFENDANT/RESPONDENT:			
FINANCIAL STATEMENT—CONSUMER DEBT			CASE NUMBER:
<p>Instructions to the judgment debtor for completing this form:</p> <p>Use this form if you have been ordered to appear for examination (come to court to provide information about your income and assets) and you want to provide your financial information in writing instead of coming to court. You can use this form only if you are the judgment debtor, the judgment concerns consumer debt, and the judgment was awarded on or after January 1, 2025. (Code Civ. Proc., § 708.111.)</p> <p>If you are the judgment debtor (the person completing this form), do not file this form with the court. Instead, you must serve (give) this form on the judgment creditor no later than 15 days before the examination.</p> <p>If you complete this form, you must also complete <i>Notice of Financial Statement—Consumer Debt</i> (form EJ-143). Read <i>Information on Debtor's Examinations Regarding Consumer Debt</i> (form EJ-140-INFO/SC-136-INFO) for more instructions on using this form and form EJ-143.</p>			

- I have read *Exemptions From the Enforcement of Judgments* (form EJ-155) and *Current Dollar Amounts of Exemptions From Enforcement of Judgments* (form EJ-156) and (check one)
 - none of the money I earn (income) or money or property I own (assets) is exempt ("exempt" means it cannot be collected by a judgment creditor).
 - all of my money and property is exempt.
 - some of my money and property is exempt. The exempt money or property is (*describe the money or property; you do not need to include the dollar amount or value*):
- Some or all of my money or property is exempt because it is needed to support me, my spouse, or persons who depend on me and my spouse for support. (As used in this form, "spouse" includes registered domestic partners. (Code Civ. Proc., § 17(b)(12).))

PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	CASE NUMBER:
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3. **My monthly income** (if more space is needed to complete any of the lettered subdivisions below, check here and attach a page labeled Attachment 3, and label the information on the attachment with the relevant subdivision letter)

a. My gross monthly income from employment is 3a. \$

b. My monthly payroll deductions are (specify **purpose** and amount)

(1) Federal and state withholding, FICA, and SDI	\$
(2)	\$
(3)	\$
(4)	\$
(5)	\$
(6)	\$

My TOTAL monthly payroll deduction amount is (add (1) through b. \$

c. My monthly take-home pay is (a minus b): c. \$

d. My monthly income from all sources other than employment is (list the source and amount of **any** income you get each month from sources other than employment, including spousal/child support, retirement, social security, disability, unemployment, military basic allowance for quarters (BAQ), veterans payments, dividends, interest, trust income, annuities, net business or rental income, reimbursement for job-related expenses, gambling or lottery winnings, etc.):

(1)	\$
(2)	\$
(3)	\$
(4)	\$
(5)	\$
(6)	\$

My TOTAL other income is (add (1) through (6)): d. \$

e. **TOTAL MONTHLY INCOME** (c plus d) e. \$

4. If you claimed in item 2 that some or all of your money or property is exempt because it is needed to support you, your spouse, or persons who depend on you or your spouse for support, list your spouse and all persons other than you who depend, in whole or in part, on you or your spouse for support. Also list their total monthly take-home income and the sources of that income.
(If more space is needed, check here and attach a page labeled Attachment 4.)

	<u>Name</u>	<u>Age</u>	<u>Relationship to Me</u>	<u>Monthly Take-Home Income and Source</u>
a.			Spouse	
b.				
c.				
d.				
e.				
f.				
g.				

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5. **My money and property** (If you claimed in item 2 that some or all of your money or property is exempt because it is needed to support you, your spouse, or persons who depend on you or your spouse for support, include both your money and the money and property of your spouse and dependents. If more space is needed to complete any of the lettered subdivisions below, check here and attach a page labeled Attachment 5, and label the information on the attachment with the relevant subdivision letter.)

a. Cash 5a. \$

b. Checking, savings, and credit union accounts (list bank name and amount):

(1)	\$
(2)	\$
(3)	\$

TOTAL value of financial accounts is (add (1) through (3)): b. \$

c. Cars, boats, and other vehicles:

Make/Year	Fair Market Value	Amount Still Owed
(1)	\$	\$
(2)	\$	\$
(3)	\$	\$

d. Real estate:

Address	Fair Market Value	Amount Still Owed
(1)	\$	\$
(2)	\$	\$

e. Other personal property (jewelry, furniture, furs, stocks, bonds, life insurance policies, business ownership interests, etc.):

Describe	Fair Market Value	Amount Still Owed
(1)	\$	\$
(2)	\$	\$
(3)	\$	\$

6. **My monthly expenses** (If you claimed in item 2 that some or all of your money or property is exempt because it is needed to support you, your spouse, or persons who depend on you or your spouse for support, include both your expenses and the expenses of your spouse and dependents. If more space is needed to complete any of the lettered subdivisions below, check here and attach a page labeled Attachment 6, and label the information on the attachment with the relevant subdivision letter.)

a. Rent or house payment and maintenance 6a. \$

b. Food and household supplies b. \$

c. Utilities and telephone c. \$

d. Clothing d. \$

e. Medical and dental payments e. \$

f. Insurance (life, health, accident, etc.) f. \$

g. School, childcare g. \$

h. Child, spousal support (another marriage) h. \$

i. Transportation, gas, auto repair, and insurance (list car payments in item 9) i. \$

j. Installment payments (insert total and itemize below in item 9) j. \$

k. Laundry and cleaning k. \$

l. Any other monthly expenses (list each below)

(1)	l(1) \$
(2)	l(2) \$
(3)	l(3) \$

m. **TOTAL MONTHLY EXPENSES** (add a through l): m. \$

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7. **My debts** (If you claimed in item 2 that some or all of your money or property is exempt because it is needed to support you, your spouse, or persons who depend on you or your spouse for support, include both your debts and the debts owed by your spouse and dependents. If more space is needed, check here and attach a page labeled Attachment 7.)

<u>Creditor's Name</u>	<u>For</u>	<u>Monthly Payments</u>	<u>Balance Owed</u>	<u>Owed By</u> (state person's name)
a.				
b.				
c.				
d.				
e.				
f.				

8. Other relevant facts about your financial situation (for example, unusual medical needs, school tuition, expenses for recent family emergencies, or other unusual expenses to help your creditor and the judge understand your budget) (Describe; if more space is needed, check here and attach a page labeled Attachment 8):

9. If you claimed in item 2 that some or all of your money or property is exempt from enforcement of judgment because it is needed to support you, your spouse, or any persons who depend on you or your spouse for support, your spouse must also sign this form, unless you and your spouse live separate and apart.

- My spouse has signed below.
- My spouse and I are living separate and apart.
- I have no spouse.

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)

(TYPE OR PRINT NAME OF SPOUSE)

► _____
(SIGNATURE)

► _____
SIGNATURE OF SPOUSE