

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address)  TELEPHONE NO: ATTORNEY FOR (Name)	For Court Use Only
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SUTTER</b> STREET ADDRESS: 1175 Civic Center Blvd. MAILING ADDRESS: CITY AND ZIP CODE: YUBA CITY, CA 95993	
PETITIONER:  RESPONDENT:	
<input type="checkbox"/> <b>AT-ISSUE MEMORANDUM AND REQUEST FOR TRIAL</b> <input type="checkbox"/> <b>COUNTER AT-ISSUE</b>	CASE NUMBER:

- Petitioner is self-represented     Attorney for Petitioner is: \_\_\_\_\_  
 Respondent is self-represented     Attorney for Respondent is: \_\_\_\_\_

**\*\*\*REQUIRED DISCLOSURES\*\*\***

BEFORE YOUR SETTLEMENT CONFERENCE YOU WILL NEED TO COMPLY WITH DISCLOSURE REQUIREMENTS BY FILING AND/OR EXCHANGING SOME OR ALL OF THE LISTED DOCUMENTS.

- FL-160 PROPERTY DECLARATION- Separate Property      Date Filed: \_\_\_\_\_  
 Required if there is separate property still to be divided by the court.
- FL-160 PROPERTY DECLARATION - Community Property      Date Filed: \_\_\_\_\_  
 Required if there are any community assets or debts that were acquired during the marriage.
- FI-150 INCOME AND EXPENSE DECLARATION      Date Filed: \_\_\_\_\_  
 Required if you are seeking spousal or child support at the time of trial.
- FL-140 DECLARATION OF DISCLOSURE      Date Served: \_\_\_\_\_  
*\*This required disclosure is not filed with the court, it is served on the other party.*
- FL-141 DECLARATION OF SERVICE OF DISCLOSURE      Date Filed: \_\_\_\_\_

Has the other party in this case served you with their Disclosures?

- FL-140 DECLARATION OF DISCLOSURE      Date Served: \_\_\_\_\_

Have the parties and/or counsel met to discuss settlement?  Yes  No

Is the Department of Child Support Services providing service to the parties?  Yes  No

County \_\_\_\_\_ Case Number \_\_\_\_\_

**ISSUES SETTLED**

- Child Custody     Parenting Plan/ Visitation  
 Parentage       Child Support  
 Spousal / Partner Support  
 Property Division     Retirement / Pensions  
 Other Issues: \_\_\_\_\_

Estimated Time for Trial: \_\_\_\_\_  Days  Hours

Date: \_\_\_\_\_

**ISSUES TO BE LITIGATED**

- Child Custody     Parenting Plan/ Visitation  
 Parentage       Child Support  
 Spousal / Partner Support  
 Property Division     Retirement / Pensions  
 Other Issues: \_\_\_\_\_

\_\_\_\_\_  
Type or Print Name

\_\_\_\_\_  
Signature of  Attorney for  Petitioner  Respondent

SHORT TITLE	CASE NUMBER
<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> MSC <input type="checkbox"/> LCH <input type="checkbox"/> TRIAL	

**PROOF OF SERVICE BY MAIL**

[CCP §1013 A (3)]

I am over the age of 18, not a party to this matter, and a resident or employed in the county where the mailing took place. My residence/business address is \_\_\_\_\_.

I served copies of this At-Issue Memorandum and Request for Trial ( ) Declaration of Disclosure (Form FL-140) by enclosing it in a sealed envelope with postage fully prepaid, and depositing it in the United States mail addressed as follows:

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Type or Print Name

\_\_\_\_\_  
Signature of Declarant