

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): JOSE L. BRITO 16788 BAYVIEW DRIVE SUNSET BEACH, CA 90742 TELEPHONE NO.: 949-275-3807 FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): RESPONDENT, IN PRO-PER	FOR COURT USE ONLY FILED Clerk of the Superior Court AUG 24 '09 CASE NUMBER: DN 155706
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO STREET ADDRESS: 325 S. MELROSE DRIVE MAILING ADDRESS: SAME CITY AND ZIP CODE: VISTA, CA 92081 BRANCH NAME: NORTH COUNTY BRANCH	
MARRIAGE OF PETITIONER: TYSHA L. BRITO RESPONDENT: JOSE L. BRITO	
RESPONSE <input type="checkbox"/> and REQUEST FOR <input checked="" type="checkbox"/> Dissolution of Marriage <input type="checkbox"/> Legal Separation <input type="checkbox"/> Nullity of Marriage <input type="checkbox"/> AMENDED	

1. RESIDENCE (Dissolution only) Petitioner Respondent has been a resident of this state for at least six months and of this county for at least three months immediately preceding the filing of the *Petition for Dissolution of Marriage*.

2. STATISTICAL FACTS

a. Date of marriage: 01/27/2007 c. Time from date of marriage to date of separation (specify):
 b. Date of separation: 03/13/2009 Years: 2 Months: 2

3. DECLARATION REGARDING MINOR CHILDREN (include children of this relationship born prior to or during the marriage or adopted during the marriage):

a. There are no minor children.
 b. The minor children are:

<u>Child's name</u>	<u>Birthdate</u>	<u>Age</u>	<u>Sex</u>
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Continued on Attachment 3b.

c. If there are minor children of the Petitioner and Respondent, a completed *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)* (form FL-105) must be attached.

d. A completed voluntary declaration of paternity regarding minor children born to the Petitioner and Respondent prior to the marriage is attached.

4. SEPARATE PROPERTY

Respondent requests that the assets and debts listed in *Property Declaration* (form FL-160) in Attachment 4 below be confirmed as separate property.

Item
 ANY AND ALL ASSETS ACQUIRED PRIOR TO
 THE MARRIAGE AND AFTER THE DATE OF
 SEPARATION

Confirm to
 RESPONDENT

1608 CALLE LAS CASAS, OCEANSIDE, CA
 (BOUGHT IN 06/2005 - BEFORE MARRIAGE)

RESPONDENT

NOTICE: You may redact (black out) social security numbers from any written material filed with the court in this case other than a form used to collect child or spousal support.

5. DECLARATION REGARDING COMMUNITY AND QUASI-COMMUNITY ASSETS AND DEBTS AS CURRENTLY KNOWN

a. There are no such assets or debts subject to disposition by the court in this proceeding.

b. All such assets and debts are listed in *Property Declaration* (form FL-160) in Attachment 5b.
 below *(specify)*:

6. Respondent contends that the parties were never legally married.

7. Respondent denies the grounds set forth in item 6 of the petition.

8. Respondent requests

- | | |
|--|--|
| <p>a. <input checked="" type="checkbox"/> dissolution of the marriage based on</p> <p>(1) <input checked="" type="checkbox"/> irreconcilable differences. (Fam. Code, § 2310(a).)</p> <p>(2) <input type="checkbox"/> incurable insanity. (Fam. Code, § 2310(b).)</p> <p>b. <input type="checkbox"/> legal separation of the parties based on</p> <p>(1) <input type="checkbox"/> irreconcilable differences. (Fam. Code, § 2310(a).)</p> <p>(2) <input type="checkbox"/> incurable insanity. (Fam. Code, § 2310(b).)</p> <p>c. <input type="checkbox"/> nullity of void marriage based on</p> <p>(1) <input type="checkbox"/> incestuous marriage. (Fam. Code, § 2200.)</p> <p>(2) <input type="checkbox"/> bigamous marriage. (Fam. Code, § 2201.)</p> | <p>d. <input type="checkbox"/> nullity of voidable marriage based on</p> <p>(1) <input type="checkbox"/> respondent's age at time of marriage. (Fam. Code, § 2210(a).)</p> <p>(2) <input type="checkbox"/> prior existing marriage. (Fam. Code, § 2210(b).)</p> <p>(3) <input type="checkbox"/> unsound mind. (Fam. Code, § 2210(c).)</p> <p>(4) <input type="checkbox"/> fraud. (Fam. Code, § 2210(d).)</p> <p>(5) <input type="checkbox"/> force. (Fam. Code, § 2210(e).)</p> <p>(6) <input type="checkbox"/> physical incapacity. (Fam. Code, § 2210(f).)</p> |
|--|--|

9. Respondent requests that the court grant the above relief and make injunctive (including restraining) and other orders as follows:

	Petitioner	Respondent	Joint	Other
a. Legal custody of children to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Physical custody of children to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Child visitation be granted to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
As requested in form: <input type="checkbox"/> FL-311 <input type="checkbox"/> FL-312 <input type="checkbox"/> FL-341(C) <input type="checkbox"/> FL-341(D) <input type="checkbox"/> FL-341(E) <input type="checkbox"/> Attachment 9c.				
d. <input type="checkbox"/> Determination of parentage of any children born to the Petitioner and Respondent prior to the marriage.				
e. Attorney fees and costs payable by	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
f. Spousal support payable to (wage assignment will be issued)	<input type="checkbox"/>	<input type="checkbox"/>		
g. <input checked="" type="checkbox"/> Terminate the court's jurisdiction (ability) to award spousal support to Petitioner.				
h. <input checked="" type="checkbox"/> Property rights be determined.				
i. <input type="checkbox"/> Respondent's former name be restored to <i>(specify)</i> :				
j. <input type="checkbox"/> Other <i>(specify)</i> :				

Continued on Attachment 9j.

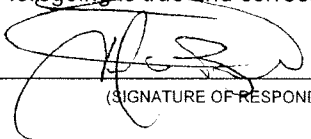
10. **Child support**– If there are minor children born to or adopted by the Petitioner and Respondent before or during this marriage, the court will make orders for the support of the children upon request and submission of financial forms by the requesting party. An earnings assignment may be issued without further notice. Any party required to pay support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent.

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

Date: 08/20/2009

JOSE L. BRITO

 (TYPE OR PRINT NAME)



 (SIGNATURE OF RESPONDENT)

Date:

 (TYPE OR PRINT NAME)

 (SIGNATURE OF ATTORNEY FOR RESPONDENT)

The original response must be filed in the court with proof of service of a copy on Petitioner.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): JOSE L. BRITO 16788 BAYVIEW DRIVE SUNSET BEACH, CA 90742 TELEPHONE NO.: 949-275-3807 FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): RESPONDENT, IN PRO-PER	FOR COURT USE ONLY F I L E D Clerk of the Superior Court AUG 24 '09
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO STREET ADDRESS: 325 S. MELROSE DRIVE MAILING ADDRESS: SAME CITY AND ZIP CODE: VISTA, CA 92081 BRANCH NAME: NORTH COUNTY BRANCH	
PETITIONER: TYSHA L. BRITO RESPONDENT: JOSE L. BRITO	
<input type="checkbox"/> PETITIONER'S <input checked="" type="checkbox"/> RESPONDENT'S <input checked="" type="checkbox"/> COMMUNITY AND QUASI-COMMUNITY PROPERTY DECLARATION <input type="checkbox"/> SEPARATE PROPERTY DECLARATION	CASE NUMBER: DN 155706

INSTRUCTIONS

When this form is attached to the *Petition* or *Response*, values and your proposal regarding division need not be completed. Do not list community, including quasi-community, property with separate property on the same form. Quasi-community property must be so identified. For additional space, use *Continuation of Property Declaration* (form FL-161).

ITEM NO.	BRIEF DESCRIPTION	GROSS FAIR MARKET VALUE	AMOUNT OF DEBT	NET FAIR MARKET VALUE	PROPOSAL FOR DIVISION	
					Award to:	
					PETITIONER	RESPONDENT
1. REAL ESTATE NONE		\$	\$	\$	\$	\$
2. HOUSEHOLD FURNITURE, FURNISHINGS, APPLIANCES NONE						
3. JEWELRY, ANTIQUES, ART, COIN COLLECTIONS, etc. Rings/she has		5,000		5,000	5,000	
4. VEHICLES, BOATS, TRAILERS						
2008 ACURA		38,000		38,000	38,000	
2005 HONDA		9,800	4,300	5,500		5,500
2006 SUZUKI		8,000	4,300	3,700		3,700
2004 HONDA DIRT BIKE (Doesn't belong to us)						

ITEM NO.	BRIEF DESCRIPTION	GROSS FAIR MARKET VALUE	AMOUNT OF DEBT	NET FAIR MARKET VALUE	PROPOSAL FOR DIVISION	
					Award to: PETITIONER	RESPONDENT
5.	SAVINGS, CHECKING, CREDIT UNION, CASH NONE	\$	\$	\$	\$	\$
6.	LIFE INSURANCE (CASH VALUE) NONE					
7.	EQUIPMENT, MACHINERY, LIVESTOCK NONE					
8.	STOCKS, BONDS, SECURED NOTES NONE					
9.	RETIREMENT, PENSION, PROFIT-SHARING, ANNUITIES ONLY FOR CAREER MEN					
10.	ACCOUNTS RECEIVABLE, UNSECURED NOTES, TAX REFUNDS NONE					
11.	PARTNERSHIPS, OTHER BUSINESS INTERESTS NONE					
12.	OTHER ASSETS AND DEBTS USSA VISA - CREDIT CARD CHASE CREDIT CARD		7,000 10,000	7,000 10,000		7,000 10,000
13.	TOTAL FROM CONTINUATION SHEET					
14.	TOTALS	60,800	25,600	35,200	43,000	7,800

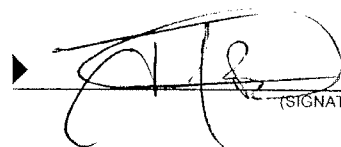
15. A Continuation of Property Declaration (form FL-161) is attached and incorporated by reference.

16. This form does does not contain the locations of, or identifying information about, the assets and debts listed.
NOTE: If the form does contain such information, you may ask the court to seal this document by completing and submitting an Ex Parte Application and Order to Seal Financial Forms (form FL-316).

I declare under penalty of perjury under the laws of the State of California that, to the best of my knowledge, the foregoing is a true and correct listing of assets and obligations and the amounts shown are correct.

Date: 08/20/2009

JOSE L. BRITO
(TYPE OR PRINT NAME)


(SIGNATURE)

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address): JOSE L. BRITO 16788 BAYVIEW DRIVE SUNSET BEACH, CA 90742		TELEPHONE NO.: 949-275-3807
ATTORNEY FOR (Name): RESPONDENT, IN PRO-PER		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO		
STREET ADDRESS: 325 S. MELROSE DRIVE MAILING ADDRESS: SAME CITY AND ZIP CODE: VISTA, CA 92081 BRANCH NAME: NORTH COUNTY BRANCH		
PETITIONER: TYSHA L. BRITO		
RESPONDENT: JOSE L. BRITO		
DECLARATION OF DISCLOSURE		CASE NUMBER: DN 155706
<input type="checkbox"/> Petitioner's	<input checked="" type="checkbox"/> Preliminary	
<input checked="" type="checkbox"/> Respondent's	<input checked="" type="checkbox"/> Final	

DO NOT FILE WITH THE COURT

Both the preliminary and the final declaration of disclosure must be served on the other party with certain exceptions. Neither disclosure is filed with the court. A declaration stating service was made of the final declaration of disclosure must be filed with the court (see form FL-141).

A preliminary declaration of disclosure but not a final declaration of disclosure is required in the case of a summary dissolution (see Family Code section 2109) or in a default judgment (see Family Code section 2110) provided the default is not a stipulated judgment or a judgment based upon a marriage settlement agreement.

A declaration of disclosure is required in a nullity or legal separation action as well as in a dissolution action.

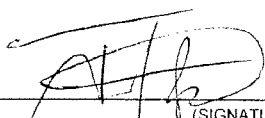
Attached are the following:

1. A completed *Schedule of Assets and Debts* (form FL-142).
2. A completed *Income and Expense Declaration* (form FL-150 (as applicable)).
3. A statement of all material facts and information regarding valuation of all assets that are community property or in which the community has an interest (*not a form*).
4. A statement of all material facts and information regarding obligations for which the community is liable (*not a form*).
5. An accurate and complete written disclosure of any investment opportunity, business opportunity, or other income-producing opportunity presented since the date of separation that results from any investment, significant business, or other income-producing opportunity from the date of marriage to the date of separation (*not a form*).

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

Date: 08/20/2009

JOSE L. BRITO
(TYPE OR PRINT NAME)


(SIGNATURE)

<p>ATTORNEY OR PARTY WITHOUT ATTORNEY OR GOVERNMENTAL AGENCY (under Family Code, §§ 17400, 17406) (Name, state bar number, and address): JOSE L. BRITO 16788 BAYVIEW DRIVE SUNSET BEACH, CA 90742</p> <p>TELEPHONE NO.: 949-275-3807 FAX NO.: ATTORNEY FOR (Name): RESPONDENT, IN PRO-PER</p>	<p style="text-align: right;">FOR COURT USE ONLY</p> <p style="text-align: center; font-size: 2em; font-weight: bold;">F I L E D</p> <p style="text-align: center;">Clerk of the Superior Court</p> <p style="text-align: center; font-size: 1.5em; font-weight: bold;">AUG 24 '09</p>
<p>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO STREET ADDRESS: 325 S. MELROSE DRIVE MAILING ADDRESS: SAME CITY AND ZIP CODE: VISTA, CA 92081 BRANCH NAME: NORTH COUNTY BRANCH</p>	
<p>PETITIONER/PLAINTIFF: TYSHA L. BRITO RESPONDENT/DEFENDANT: JOSE L. BRITO OTHER PARENT:</p>	
<p>PROOF OF SERVICE BY MAIL</p>	<p>CASE NUMBER: DN 155706</p>

NOTICE: To serve temporary restraining orders you must use personal service (see form FL-330).

1. I am at least 18 years of age, not a party to this action, and I am a resident of or employed in the county where the mailing took place.
2. My residence or business address is: 1104 E. WESCOVE PL., STE. E, W. COVINA, CA 91790
3. I served a copy of the following documents (*specify*): RESPONSE - (FAMILY LAW); DECLARATION OF DISCLOSURE (FAMILY LAW); PROPERTY DECLARATION (FAMILY LAW)

by enclosing them in an envelope AND

- a. **depositing** the sealed envelope with the United States Postal Service with the postage fully prepaid.
- b. **placing** the envelope for collection and mailing on the date and at the place shown in item 4 following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service in a sealed envelope with postage fully prepaid.

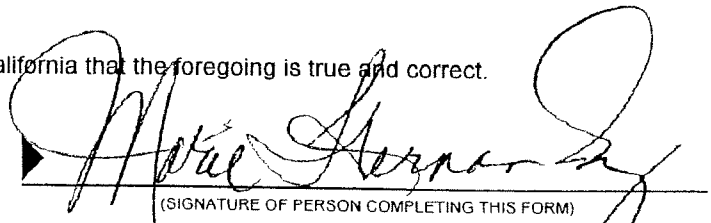
4. The envelope was addressed and mailed as follows:
 - a. Name of person served: SUSAN L. SCHNEPF, ATTORNEY AT LAW
 - b. Address: 751 RANCHEROS DRIVE, STE. 9, SAN MARCOS, CA 92069
 - c. Date mailed: 08/20/2009
 - d. Place of mailing (*city and state*): WEST COVINA, CA

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

Date: 08/20/2009

MARIE HERNANDEZ

 (TYPE OR PRINT NAME)



 (SIGNATURE OF PERSON COMPLETING THIS FORM)

MILITARY PROTECTIVE ORDER

PRIVACY ACT STATEMENT

In accordance with the Privacy Act of 1974 (Public Law 93-502), this notice informs you of the purpose of the form and how it will be used. Please read it carefully.

AUTHORITY: 5 U.S.C. 552, Departmental Regulations; 10 U.S.C. 138, Under Secretary of Defense for Personnel and Readiness; and National Defense Authorization Act for Fiscal Year 1996, Sec. 534.

PRINCIPAL PURPOSE(S): To inform the service member and the protected person that the commanding officer is issuing an order to the member prohibiting contact or communication with the protected person or members of the protected person's family or household and directing that the member take specified actions that support, or are in furtherance of, the prohibition.

ROUTINE USE(S): Any release of information outside of the Department of Defense shall be compatible with the purposes for which the information is being collected and shall be in accordance with an established routine use for the record system where the information is maintained.

DISCLOSURE: Voluntary. Failure to disclose/verify information will not delay either the issuance of the order or the enforceability of the order.

1. SERVICE MEMBER				2. PROTECTED PERSON (Important: see NOTE)			
a. RANK	b. LAST NAME	FIRST NAME	MI	a. RANK	b. LAST NAME	FIRST NAME	MI
SSGT	BRITO	JOSE	L	CTV	BRITO	TYSHA	L
c. UNIT				c. UNIT			
RS ORANGE, HEADQUARTERS				NA			
d. INSTALLATION				d. INSTALLATION			
12TH MCD RS ORANGE CA				NA			

NOTE: Omit information in Item 2 that, if known to the service member in Item 1, could endanger the protected person.

3. INFORMATION SUPPORTING ISSUANCE OF THIS MILITARY PROTECTIVE ORDER INVOLVING DOMESTIC VIOLENCE (30 DAY EXTENSION)

THIS MILITARY PROTECTIVE ORDER IS TERMINATED EFFECTIVE JUN 15 2009 PER THE RECRUITING STATION ORANGE COMMANDING OFFICER.

4. THE PROTECTED PERSON HAS ALSO BEEN ISSUED THE FOLLOWING COURT ORDERS:

a. Civil protection order issued (Date - YYYYMMDD) _____, in _____ Court, _____ County, State of _____	
b. Order issued (Date - YYYYMMDD) _____, in _____ Court, _____ County, State of _____	Property Settlement Custody and/or Visitation

OFFICE
COPY

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address): JOSE L. BRITO 16788 BAYVIEW DRIVE SUNSET BEACH, CA 90742			FOR COURT USE ONLY FILED Clerk of the Superior Court AUG 24 '09
TELEPHONE NO.: 949-275-3807	FAX NO.:	ATTORNEY FOR (Name): RESPONDENT, IN PRO-PER	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO STREET ADDRESS: 325 S. MELROSE DRIVE MAILING ADDRESS: SAME CITY AND ZIP CODE: VISTA, CA 92081 BRANCH NAME: NORTH COUNTY BRANCH			
PETITIONER/PLAINTIFF: TYSHA L. BRITO RESPONDENT/DEFENDANT: JOSE L. BRITO			
RESPONSIVE DECLARATION TO ORDER TO SHOW CAUSE OR NOTICE OF MOTION			CASE NUMBER: DN 155706
HEARING DATE: 08/26/20090	TIME: 9:00AM	DEPARTMENT OR ROOM: 15	

1. CHILD CUSTODY
 - a. I consent to the order requested.
 - b. I do not consent to the order requested but I consent to the following order:

2. CHILD VISITATION
 - a. I consent to the order requested.
 - b. I do not consent to the order requested but I consent to the following order:

3. CHILD SUPPORT
 - a. I consent to the order requested.
 - b. I consent to guideline support.
 - c. I do not consent to the order requested, but I consent to the following order:
 - (1) Guideline
 - (2) Other (specify):

4. SPOUSAL SUPPORT
 - a. I consent to the order requested.
 - b. I do not consent to the order requested.
 - c. I consent to the following order: THAT THE COURT DENY THE PETITIONER'S REQUEST. THAT WE WERE ONLY MARRIED FOR 2 YEARS AND THE PETITIONER EARNS A GOOD LIVING AS A HAIR STYLIST.

5. ATTORNEY FEES AND COSTS
 - a. I consent to the order requested.
 - b. I do not consent to the order requested.
 - c. I consent to the following order: THAT THE PARTIES PAY FOR THEIR OWN COUNSEL AND LEGAL COSTS AND FEES

PETITIONER/PLAINTIFF: TYSHA L. BRITO	CASE NUMBER:
RESPONDENT/DEFENDANT: JOSE L. BRITO	DN 155706

6. PROPERTY RESTRAINT
- a. I consent to the order requested.
- b. I do not consent to the order requested.
- c. I consent to the following order: THAT THE PARTIES BE MUTUALLY RESTRAINED FROM BOTHERING EACH OTHER BY TELEPHONE, CELLULAR OR CONTACT AT WORK OR AS THE PETITIONER HAS BEEN DOING, TELEPHONING MY SUPERVISOR TRYING TO GET INFORMATION AND MAKING DEROGATORY COMMENTS ABOUT ME.
7. PROPERTY CONTROL
- a. I consent to the order requested.
- b. I do not consent to the order requested.
- c. I consent to the following order: THAT THE PETITIONER RETAIN HER 2008 ACURA. THAT I RETAIN MY 2006 SUZUKI. THAT THE 2005 HONDA MOTORCYCLE BE SOLD AND THE PROCEEDS SPLIT BETWEEN THE PARTIES.
8. OTHER RELIEF
- a. I consent to the order requested.
- b. I do not consent to the order requested.
- c. I consent to the following order: THAT USMC POLICY IS THAT WHEN ONE IS DIVORCED THE DIVORCED PARTY COMES OFF THE INSURANCE WHICH I AM SURE APPLIES TO MOST COMPANY POLICIES. THAT THE DEPOSITS WHICH WERE RETURNED WERE APPLIED TO THE CURRENT HOUSING AND THAT THE PETITIONER NEVER CONTRIBUTED TOWARDS ANY OF THE DEPOSITS. CELL IS IN MY NAME.
9. SUPPORTING INFORMATION
- contained in the attached declaration.

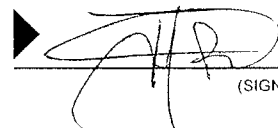
NOTE: To respond to a request for domestic violence restraining orders requested in the *Request for Order (Domestic Violence Prevention)* (form DV-100) you must use the *Answer to Temporary Restraining Order (Domestic Violence Prevention)* (form DV-120).

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

Date: 08/20/2009

JOSE L. BRITO

 (TYPE OR PRINT NAME)



 (SIGNATURE OF DECLARANT)

DECLARATION OF JOSE L. BRITO

1
2 I, Jose L. Brito, declare under penalty of perjury under the laws of
3 the State of California that the foregoing is true and correct and that
4 if called upon to testify in court could and would attest to the
5 following:

6 1. That the Petitioner and I were married on January 27, 2007, and
7 separated March 13, 2009. She had disclosed to me in December of 2008,
8 that she had been unfaithful and we continued to live together because I
9 wanted to work things out but to no avail.

10 2. Yes, I continue to collect the housing allowance because until
11 the divorce is final the Marine Corp will not change it. There is no
12 reason for me to help her financially. We have no children and she earns
13 a good living as a self-employed hair stylist.

14 3. As to the spousal support we were only married for 2 years. The
15 security deposits which she alleges to were used at each new apartment
16 which we rented. At no time was there an accumulation of deposits. By
17 the way these deposits were out of my pocket. Again, the Petitioner
18 earns a good living and this is the way that she chose. If she had
19 thought ahead maybe she could have saved up for an apartment on the
20 beach. I request that the court deny her a spousal support order.

21 4. The Petitioner got a military protective order which expired on
22 June 4, 2009. It was then extended thirty days but after investigating
23 the Petitioner's allegations and discovering that she lied they lifted
24 the order. (See attachment) I have never hit, threatened or harmed the
25 Petitioner in any way. If, in order to gain sympathy from the court, she
26 has to malign me then I feel very sorry for her.

27 5. That we each pay for our attorney's fees, and any other costs
28 incurred by this action.

1 6. That once the divorce is final the military will remove her from
2 my insurance policy automatically upon the presentation of Judgment of
3 Dissolution. They do know that we are in the process of dissolution
4 because the Petitioner has been calling my superiors which was uncalled
5 for, unnecessary, and has all the signs of maliciousness.

6 7. That I agree that the Petitioner keep control of her 2008 Acura.
7 I do not agree that she keep the 2005 Honda motorcycle but that it be
8 sold and we split the proceeds equally. I will retain and pay for the
9 2006 Suzuki motorcycle. A 2004 Honda dirt bike does not belong to us.

10 8. That I have acquired a new cellular and ordered the old cellular
11 shut off. That I appreciate her taking care of this these past months
12 and am happy to reimburse her for the \$40.00 a month.

13 That I pray that the court will act in our best interest in these
14 matters and order orders accordingly.

15 Dated: 08/20/2009



JOSE L. BRITO, Respondent

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<p>ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): JOSE L. BRITO 16788 BAYVIEW DRIVE SUNSET BEACH, CA 90742</p> <p>TELEPHONE NO.: 949-275-3807</p> <p>E-MAIL ADDRESS (Optional):</p> <p>ATTORNEY FOR (Name): RESPONDENT, IN PRO-PER</p>	<p style="text-align: center;">FOR COURT USE ONLY</p> <p style="text-align: center; font-size: 2em; font-weight: bold;">F I L E D</p> <p style="text-align: center;">Clerk of the Superior Court</p> <p style="text-align: center; font-size: 1.5em; font-weight: bold;">AUG 24 '09</p>
<p>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO</p> <p>STREET ADDRESS: 325 S. MELROSE DRIVE MAILING ADDRESS: SAME CITY AND ZIP CODE: VISTA, CA 92081 BRANCH NAME: NORTH COUNTY BRANCH</p>	
<p>PETITIONER/PLAINTIFF: TYSHA L. BRITO RESPONDENT/DEFENDANT: JOSE L. BRITO OTHER PARENT/CLAIMANT:</p>	
<p style="text-align: center;">INCOME AND EXPENSE DECLARATION</p>	<p>CASE NUMBER: DN155706</p>

1. Employment (Give information on your current job or, if you're unemployed, your most recent job.)

Attach copies of your pay stubs for last two months (black out social security numbers).

- a. Employer: **USMC**
- b. Employer's address: **RECRUITING STATION ORANGE COUNTY**
- c. Employer's phone number:
- d. Occupation: **RECUITER**
- e. Date job started: **1999**
- f. If unemployed, date job ended:
- g. I work about **40** hours per week.
- h. I get paid \$ **2500** gross (before taxes) per month per week per hour.

(If you have more than one job, attach an 8½-by-11-inch sheet of paper and list the same information as above for your other jobs. Write "Question 1—Other Jobs" at the top.)

2. Age and education

- a. My age is (specify): **28**
- b. I have completed high school or the equivalent: Yes No If no, highest grade completed (specify):
- c. Number of years of college completed (specify): **1 YR** Degree(s) obtained (specify):
- d. Number of years of graduate school completed (specify): Degree(s) obtained (specify):
- e. I have: professional/occupational license(s) (specify):
 vocational training (specify):

3. Tax information

- a. I last filed taxes for tax year (specify year): **2008**
- b. My tax filing status is single head of household married, filing separately
 married, filing jointly with (specify name): **TYSHA L. BRITO**
- c. I file state tax returns in California other (specify state):
- d. I claim the following number of exemptions (including myself) on my taxes (specify): **3**

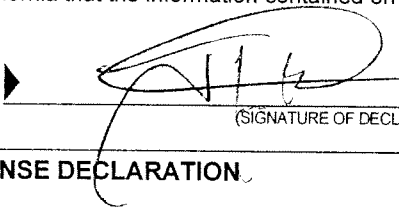
- 4. **Other party's income.** I estimate the gross monthly income (before taxes) of the other party in this case at (specify): \$ **4500**
 This estimate is based on (explain): **Prior knowledge. This does not include cash clients.**

(If you need more space to answer any questions on this form, attach an 8½-by-11-inch sheet of paper and write the question number before your answer.) Number of pages attached: _____

I declare under penalty of perjury under the laws of the State of California that the information contained on all pages of this form and any attachments is true and correct.

Date: **08/20/2009**
JOSE L. BRITO

(TYPE OR PRINT NAME)



(SIGNATURE OF DECLARANT)

PETITIONER/PLAINTIFF: TYSHA L. BRITO RESPONDENT/DEFENDANT: JOSE L. BRITO OTHER PARENT/CLAIMANT:	CASE NUMBER: DN155706
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Attach copies of your pay stubs for the last two months and proof of any other income. Take a copy of your latest federal tax return to the court hearing. (Black out your social security number on the pay stub and tax return.)

5. **Income** (For average monthly, add up all the income you received in each category in the last 12 months and divide the total by 12.)

	Last month	Average monthly
a. Salary or wages (gross, before taxes)	\$ 2500	2500
b. Overtime (gross, before taxes)	\$ _____	_____
c. Commissions or bonuses	\$ _____	_____
d. Public assistance (for example: TANF, SSI, GA/GR) <input type="checkbox"/> currently receiving	\$ _____	_____
e. Spousal support <input type="checkbox"/> from this marriage <input type="checkbox"/> from a different marriage	\$ _____	_____
f. Partner support <input type="checkbox"/> from this domestic partnership <input type="checkbox"/> from a different domestic partnership	\$ _____	_____
g. Pension/retirement fund payments	\$ _____	_____
h. Social security retirement (not SSI)	\$ _____	_____
i. Disability: <input type="checkbox"/> Social security (not SSI) <input type="checkbox"/> State disability (SDI) <input type="checkbox"/> Private insurance	\$ _____	_____
j. Unemployment compensation	\$ _____	_____
k. Workers' compensation	\$ _____	_____
l. Other (military BAQ, royalty payments, etc.) (specify): HOUSING	\$ 2599	2599

6. **Investment income** (Attach a schedule showing gross receipts less cash expenses for each piece of property.)

a. Dividends/interest	\$ _____	
b. Rental property income	\$ 2,000	2,000
c. Trust income	\$ _____	_____
d. Other (specify):	\$ _____	_____

7. **Income from self-employment, after business expenses for all businesses**

I am the owner/sole proprietor business partner other (specify):

Number of years in this business (specify):

Name of business (specify):

Type of business (specify):

Attach a profit and loss statement for the last two years or a Schedule C from your last federal tax return. Black out your social security number. If you have more than one business, provide the information above for each of your businesses.

8. **Additional income.** I received one-time money (lottery winnings, inheritance, etc.) in the last 12 months (specify source and amount):

9. **Change in income.** My financial situation has changed significantly over the last 12 months because (specify):

10. **Deductions**

	Last month
a. Required union dues	\$ _____
b. Required retirement payments (not social security, FICA, 401(k), or IRA)	\$ 387.00
c. Medical, hospital, dental, and other health insurance premiums (total monthly amount)	\$ _____
d. Child support that I pay for children from other relationships	\$ _____
e. Spousal support that I pay by court order from a different marriage	\$ _____
f. Partner support that I pay by court order from a different domestic partnership	\$ _____
g. Necessary job-related expenses not reimbursed by my employer (attach explanation labeled "Question 10g")	\$ _____

11. **Assets**

	Total
a. Cash and checking accounts, savings, credit union, money market, and other deposit accounts	\$ _____
b. Stocks, bonds, and other assets I could easily sell	\$ _____
c. All other property, <input type="checkbox"/> real and <input type="checkbox"/> personal (estimate fair market value minus the debts you owe)	\$ _____

PETITIONER/PLAINTIFF: TYSHA L. BRITO RESPONDENT/DEFENDANT: JOSE L. BRITO OTHER PARENT/CLAIMANT:	CASE NUMBER: DNI55706
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12. The following people live with me:

Name	Age	How the person is related to me? (ex: son)	That person's gross monthly income	Pays some of the household expenses?
a. JOSE L. BRITO	28	SELF		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
b.				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
c.				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
d.				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
e.				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No

13. Average monthly expenses Estimated expenses Actual expenses Proposed needs

- | | |
|--|---|
| <p>a. Home:</p> <p>(1) <input type="checkbox"/> Rent or <input checked="" type="checkbox"/> mortgage... \$ <u>4530.00</u></p> <p style="margin-left: 20px;">If mortgage:</p> <p style="margin-left: 40px;">(a) average principal: \$ _____</p> <p style="margin-left: 40px;">(b) average interest: \$ _____</p> <p>(2) Real property taxes \$ <u>340.00</u></p> <p>(3) Homeowner's or renter's insurance (if not included above) \$ <u>400.00</u></p> <p>(4) Maintenance and repair \$ <u>72.00</u></p> <p>b. Health-care costs not paid by insurance... \$ _____</p> <p>c. Child care \$ _____</p> <p>d. Groceries and household supplies..... \$ <u>400.00</u></p> <p>e. Eating out..... \$ _____</p> <p>f. Utilities (gas, electric, water, trash) \$ <u>90.00</u></p> <p>g. Telephone, cell phone, and e-mail \$ <u>140.00</u></p> | <p>h. Laundry and cleaning \$ <u>40.00</u></p> <p>i. Clothes \$ <u>50.00</u></p> <p>j. Education \$ <u>65.00</u></p> <p>k. Entertainment, gifts, and vacation..... \$ <u>200.00</u></p> <p>l. Auto expenses and transportation (insurance, gas, repairs, bus, etc.) \$ <u>450.00</u></p> <p>m. Insurance (life, accident, etc.; do not include auto, home, or health insurance)... \$ _____</p> <p>n. Savings and investments..... \$ _____</p> <p>o. Charitable contributions..... \$ _____</p> <p>p. Monthly payments listed in item 14 (itemize below in 14 and insert total here) .. \$ _____</p> <p>q. Other (specify): \$ <u>400.00</u></p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>r. TOTAL EXPENSES (a-q) (do not add in the amounts in a(1)(a) and (b)) \$ <u>7,077.00</u></p> </div> <p>s. Amount of expenses paid by others \$ _____</p> |
|--|---|

14. Installment payments and debts not listed above

Paid to	For	Amount	Balance	Date of last payment
CHASE	CREDIT CARD	\$ 200.00	\$ 10,000.00	1ST
USSA	CREDIT CARD	\$ 200.00	\$ 7,000.00	1ST
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	

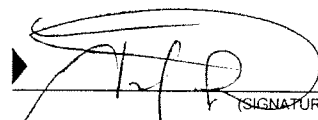
15. Attorney fees (This is required if either party is requesting attorney fees.):

- a. To date, I have paid my attorney this amount for fees and costs (specify): \$
- b. The source of this money was (specify):
- c. I still owe the following fees and costs to my attorney (specify total owed): \$
- d. My attorney's hourly rate is (specify): \$

I confirm this fee arrangement.

Date: 08/20/2009
 JOSE L. BRITO

(TYPE OR PRINT NAME OF ATTORNEY)



(SIGNATURE OF ATTORNEY)

<p>ATTORNEY OR PARTY WITHOUT ATTORNEY OR GOVERNMENTAL AGENCY (under Family Code, §§ 17400, 17406) (Name, state bar number, and address): JOSE L. BRITO 16788 BAYVIEW DRIVE SUNSET BEACH, CA 90742</p> <p>TELEPHONE NO.: 949-275-3807 FAX NO.: ATTORNEY FOR (Name): RESPONDENT, IN PRO-PER</p>	<p style="text-align: right;">FOR COURT USE ONLY</p> <p style="text-align: center; font-size: 2em;">F I L E D</p> <p style="text-align: center;">Clerk of the Superior Court</p> <p style="text-align: center; font-size: 1.5em;">AUG 24 '09</p>
<p>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO STREET ADDRESS: 325 S. MELROSE DRIVE MAILING ADDRESS: SAME CITY AND ZIP CODE: VISTA, CA 92081 BRANCH NAME: NORTH COUNTY BRANCH</p>	
<p>PETITIONER/PLAINTIFF: TYSHA L. BRITO RESPONDENT/DEFENDANT: JOSE L. BRITO OTHER PARENT:</p>	
<p style="text-align: center;">PROOF OF SERVICE BY MAIL</p> <p style="text-align: right;">CASE NUMBER: DN 155706</p>	

NOTICE: To serve temporary restraining orders you must use personal service (see form FL-330).

1. I am at least 18 years of age, not a party to this action, and I am a resident of or employed in the county where the mailing took place.
2. My residence or business address is: 1104 E. WESCOVE PL., STE. E, W. COVINA, CA 91790
3. I served a copy of the following documents (*specify*): RESPONSIVE DECLARATION TO ORDER TO SHOW CAUSE- (FAMILY LAW); INCOME & EXPENSE DECLARATION; DECLARATION OF JOSE L. BRITO

by enclosing them in an envelope AND

- a. depositing the sealed envelope with the United States Postal Service with the postage fully prepaid.
- b. placing the envelope for collection and mailing on the date and at the place shown in item 4 following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service in a sealed envelope with postage fully prepaid.

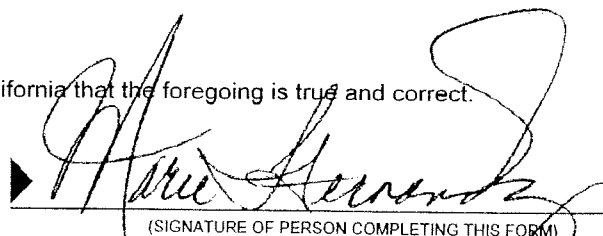
4. The envelope was addressed and mailed as follows:

- a. Name of person served: SUSAN L. SCHNEPF, ATTORNEY AT LAW
- b. Address: 751 RANCHEROS DRIVE, STE. 9, SAN MARCOS, CA 92069
- c. Date mailed: 08/20/2009
- d. Place of mailing (*city and state*): WEST COVINA, CA

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

Date: 08/20/2009

MARIE HERNANDEZ
(TYPE OR PRINT NAME)


(SIGNATURE OF PERSON COMPLETING THIS FORM)