

# Supplemental Declaration Form

## Respondent/Claimant Information

Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

## Original Case Information

Case Number: \_\_\_\_\_

Court Name: \_\_\_\_\_

Division/Department: \_\_\_\_\_

Original Declaration Date: \_\_\_\_\_

## Supplemental Declaration

I, \_\_\_\_\_, in relation to the original declaration dated \_\_\_\_\_, hereby provide the following supplemental information, under penalty of perjury under the laws of the state:

(Add your supplemental declaration here. Attach additional sheets if necessary.)

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**Additional Evidence**

[ ] Attached are \_\_\_\_\_ pages of additional documents/evidence in support of this supplemental declaration.

**Certification**

I certify that the information provided in this supplemental declaration is true and correct to the best of my knowledge and belief. This statement is made under the penalty of perjury.

Signature: \_\_\_\_\_

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

**Notarization (If required)**

State of \_\_\_\_\_

County of \_\_\_\_\_

On \_\_\_\_\_, before me, \_\_\_\_\_

(Notary Public), personally appeared \_\_\_\_\_, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument, the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

**Notary Signature:** \_\_\_\_\_

**Commission Number:** \_\_\_\_\_

**My Commission Expires:** \_\_\_\_\_

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**Instructions:**

- Provide accurate and truthful information that supplements your original declaration.
- Sign and date the form, ensuring that it is witnessed or notarized as required.
- Attach any additional documents or evidence that support this supplemental declaration.
- Submit this form to the appropriate court or agency as directed.