

IN THE _____ COURT OF THE STATE OF _____

IN AND FOR THE COUNTY OF _____

_____,

Petitioner,

v.

Case No. _____

_____,

Respondent.

_____/

FINANCIAL AFFIDAVIT

I, _____, being first duly sworn, depose and state as follows:

I. PERSONAL INFORMATION

1. My full legal name is: _____

2. My date of birth is: _____

3. My current address is:

Street Address: _____

City: _____ State: _____ Zip Code:

4. My home phone number is: _____

5. My work phone number is: _____

6. My cell phone number is: _____

7. My email address is: _____
8. My Social Security Number is: _____
9. My driver's license number is: _____ State of Issuance:

10. My occupation is: _____
11. My employer is: _____
12. My employer's address is:
Street Address: _____
City: _____ State: _____ Zip Code:

II. EMPLOYMENT AND INCOME

13. Gross Monthly Income:

- a. Salary/Wages: \$ _____
- b. Commissions/Bonuses: \$ _____
- c. Overtime: \$ _____
- d. Self-Employment Income (net): \$ _____
- e. Social Security Benefits: \$ _____
- f. Disability Benefits: \$ _____
- g. Unemployment Benefits: \$ _____
- h. Pension/Retirement Income: \$ _____
- i. Interest/Dividends: \$ _____
- j. Rental Income (net): \$ _____
- k. Other Income (specify): _____ \$ _____

TOTAL GROSS MONTHLY INCOME: \$ _____

14. Monthly Deductions from Gross Income:

- a. Federal Income Tax: \$ _____
- b. State Income Tax: \$ _____
- c. FICA (Social Security/Medicare): \$ _____
- d. Health Insurance Premiums: \$ _____

- e. Dental/Vision Insurance Premiums: \$ _____
- f. Life Insurance Premiums: \$ _____
- g. Retirement Contributions (401k, IRA, etc.): \$ _____
- h. Union Dues: \$ _____
- i. Other Mandatory Deductions (specify): _____ \$

TOTAL MONTHLY DEDUCTIONS: \$ _____

15. Net Monthly Income (Gross Monthly Income - Monthly Deductions): \$

III. MONTHLY EXPENSES

16. Housing Expenses:

- a. Mortgage/Rent Payment: \$ _____
- b. Property Taxes (if not in mortgage): \$ _____
- c. Homeowner's/Renter's Insurance (if not in mortgage): \$ _____
- d. Homeowner's Association Dues: \$ _____
- e. Utilities (electricity, gas, water, sewer, trash): \$ _____
- f. Telephone (landline/cell): \$ _____
- g. Cable/Satellite/Internet: \$ _____
- h. Maintenance/Repairs: \$ _____

TOTAL HOUSING EXPENSES: \$ _____

17. Transportation Expenses:

- a. Car Payment(s): \$ _____
- b. Car Insurance: \$ _____
- c. Fuel: \$ _____
- d. Maintenance/Repairs: \$ _____
- e. Public Transportation/Other: \$ _____

TOTAL TRANSPORTATION EXPENSES: \$ _____

18. Personal Expenses:

- a. Groceries/Food: \$ _____
 - b. Dining Out: \$ _____
 - c. Clothing: \$ _____
 - d. Personal Care (haircuts, toiletries): \$ _____
 - e. Medical/Dental (out-of-pocket, prescriptions): \$ _____
 - f. Entertainment/Recreation: \$ _____
 - g. Child Care/Daycare: \$ _____
 - h. Education (tuition, books): \$ _____
 - i. Pet Expenses: \$ _____
 - j. Charitable Contributions: \$ _____
 - k. Other (specify): _____ \$ _____
- TOTAL PERSONAL EXPENSES:** \$ _____

19. Debt Payments (not listed elsewhere):

- a. Credit Card Payments: \$ _____
 - b. Personal Loan Payments: \$ _____
 - c. Student Loan Payments: \$ _____
 - d. Other Loan Payments (specify): _____ \$ _____
-

TOTAL DEBT PAYMENTS: \$ _____

20. TOTAL MONTHLY EXPENSES (Sum of Housing, Transportation, Personal, and Debt Payments): \$ _____

IV. ASSETS

21. Real Estate:

- a. Primary Residence:
Address: _____
Fair Market Value: \$ _____
Amount Owed (Mortgage): \$ _____

Equity: \$ _____

b. Other Real Estate (e.g., rental property, vacation home):

Address: _____

Fair Market Value: \$ _____

Amount Owed: \$ _____

Equity: \$ _____

22. Vehicles:

a. Make/Model: _____ Year: _____

Fair Market Value: \$ _____

Amount Owed: \$ _____

Equity: \$ _____

b. Make/Model: _____ Year: _____

Fair Market Value: \$ _____

Amount Owed: \$ _____

Equity: \$ _____

23. Bank Accounts:

a. Checking Account (Bank Name: _____ Last 4 Digits: _____) Balance: \$ _____

b. Savings Account (Bank Name: _____ Last 4 Digits: _____) Balance: \$ _____

c. Other Accounts (Bank Name: _____ Last 4 Digits: _____) Balance: \$ _____

24. Investments:

a. Stocks/Bonds/Mutual Funds: \$ _____

b. Retirement Accounts (401k, IRA, Pension): \$ _____

c. Life Insurance (Cash Value): \$ _____

d. Other Investments: \$ _____

25. Other Personal Property:

a. Jewelry/Collectibles: \$ _____

b. Furniture/Household Goods: \$ _____

c. Other (specify): _____ \$ _____

V. LIABILITIES

26. Mortgages/Home Equity Loans:

a. Lender: _____ Current Balance: \$ _____ Monthly Payment:
\$ _____

b. Lender: _____ Current Balance: \$ _____ Monthly Payment:
\$ _____

27. Vehicle Loans:

a. Lender: _____ Current Balance: \$ _____ Monthly Payment:
\$ _____

b. Lender: _____ Current Balance: \$ _____ Monthly Payment:
\$ _____

28. Credit Cards:

a. Creditor: _____ Last 4 Digits: _____ Current Balance: \$
_____ Monthly Payment: \$ _____

b. Creditor: _____ Last 4 Digits: _____ Current Balance: \$
_____ Monthly Payment: \$ _____

c. Creditor: _____ Last 4 Digits: _____ Current Balance: \$
_____ Monthly Payment: \$ _____

29. Personal Loans:

a. Lender: _____ Current Balance: \$ _____ Monthly Payment:
\$ _____

30. Student Loans:

a. Lender: _____ Current Balance: \$ _____ Monthly Payment:
\$ _____

31. Other Debts (e.g., medical bills, judgments):

a. Creditor: _____ Current Balance: \$ _____ Monthly Payment:
\$ _____

b. Creditor: _____ Current Balance: \$ _____ Monthly Payment:
\$ _____

VI. OTHER FINANCIAL INFORMATION

32. I have attached the following documents in support of this Financial Affidavit:

- Pay stubs for the last three months
- Most recent W-2 form
- Most recent tax return (Form 1040)
- Bank statements for the last three months
- Investment statements
- Loan statements
- Credit card statements
- Other (specify): _____

33. I understand that I have a continuing duty to update this Financial Affidavit if there are any material changes to my financial circumstances.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge and belief.

Executed this _____ day of _____, 20_____.

Signature: _____

Printed Name: _____

NOTARY ACKNOWLEDGMENT

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20_____, by _____, who is personally known to me or who produced _____ as identification.

Notary Public: _____

Printed Name: _____

My Commission Expires: _____

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing FINANCIAL AFFIDAVIT has been furnished by U.S. Mail / Hand Delivery / Email / Facsimile / Other (specify): _____ to:

Name: _____

Address: _____

Email: _____

on this _____ day of _____, 20_____.

Signature: _____

Printed Name: _____