

AFFIDAVIT OF FINANCIAL DISCLOSURE

Date: _____
Court: _____ County: _____ State: _____
Case Number: _____

I, _____, the affiant, residing at

_____,
being duly sworn, hereby swear under oath that the information stated in this Financial Affidavit and the attached documents, if any, is true and correct. I understand that willful misrepresentation of any of the information provided will subject me to sanctions and may result in criminal charges being filed against me.

1. INCOME. In support of the following income information, I have attached all necessary pay stubs, income tax returns, and W-2s and/or 1099 statements.

Employed Self-Employed Unemployed

Employer: _____ Hours worked per week: _____

Address: _____

Gross Income: \$ _____ per _____

Net Income: \$ _____ per _____

Other Income:

Source: _____ \$ _____ per _____

Source: _____ \$ _____ per _____

Source: _____ \$ _____ per _____

Number of other members in household: _____

Income from other members: \$ _____ per _____

Any current child support orders? No. Yes, in the amount of \$ _____ to _____
_____. If yes, attach copies of all support orders.

2. HEALTH INSURANCE. In support of the following insurance information, I have attached proof of health insurance coverage and cost.

Insurance Coverage: Employer Private Medicaid Medicare None

Coverage Includes: Medical Dental Vision Prescription Other:

Insurance Plan Name: _____ Policy #: _____

Cost: \$ _____ per _____ for Family Plan.
Cost: \$ _____ per _____ for Individual Plan.

Children's health insurance covered by: My Plan Other Parent's Plan
 Medicaid Other: _____

3. **CHILD CARE.** Childcare Provider: _____
Number of Hours/Week: _____ for \$ _____ per _____

4. **ASSETS.** In support of the following asset information, I have attached all necessary documents proving the value of my assets.

Bank Accounts

Bank Name (Checking): _____ Balance: \$ _____
Bank Name (Savings): _____ Balance: \$ _____
Bank Name (Other): _____ Type: _____
Balance: \$ _____

Vehicle(s)

Year: _____ Make: _____ Model: _____ Value: \$ _____
Year: _____ Make: _____ Model: _____ Value: \$ _____

Real Property

Type: _____ Address: _____
Market Value: \$ _____ Mortgage: \$ _____
Type: _____ Address: _____
Market Value: \$ _____ Mortgage: \$ _____
Type: _____ Address: _____
Market Value: \$ _____ Mortgage: \$ _____

Other Assets

Details: _____
Market Value: \$ _____
Details: _____
Market Value: \$ _____

5. **EXPENSES.** The following table contains my monthly expenses:

Type	Cost	Type	Cost
Rent	\$	Public Transport	\$
Mortgage	\$	Childcare	\$
Home Maintenance	\$	School Expenses	\$
Electricity	\$	Food	\$
Heating	\$	Clothing	\$
Other Utilities	\$	Medical	\$
Phone	\$	Contributions	\$
Internet	\$	Health Insurance	\$
Cable/TV	\$	Life Insurance	\$
Car Payments	\$	Car Insurance	\$
Gas (Vehicle)	\$	Home Insurance	\$
Other Expenses			Cost
			\$
			\$

6. **LOANS AND DEBTS.** In support of the following debt information, I have attached all necessary documents related to my debts and loans.

Debt/Loan Details: _____
 Balance: \$ _____ Payment: \$ _____ per _____

Debt/Loan Details: _____
 Balance: \$ _____ Payment: \$ _____ per _____

Debt/Loan Details: _____
 Balance: \$ _____ Payment: \$ _____ per _____

Under penalty of perjury, I hereby declare and affirm that the above-mentioned information is, to the best of my knowledge, true and correct.

Affiant's Signature: _____ **Date:** _____

State of _____
County of _____

Subscribed and sworn to (or affirmed) before me on this ____ of _____, _____,
by _____, proved to me on the basis of satisfactory
evidence to be the person who appeared before me.

WITNESS my hand and official seal.

Signature: _____ (Seal)

My Commission Expires: _____