

No. _____

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FINANCIAL INFORMATION STATEMENT OF

Petitioner: _____

Respondent: _____

Custodial Parent: _____

Date of Marriage: _____ **Date of Separation:** _____

Age of Child(ren): (____) (____) (____) (____) (____) (____) (____) (____) (____)

GROSS MONTHLY RESOURCES:	MOTHER	FATHER
Wages/Salary	\$ _____	\$ _____
Overtime	\$ _____	\$ _____
Bonus	\$ _____	\$ _____
Commissions/Tips	\$ _____	\$ _____
Interest On Savings	\$ _____	\$ _____
Dividends	\$ _____	\$ _____
Royalty Income	\$ _____	\$ _____
Trust Income	\$ _____	\$ _____
Net Rental Income	\$ _____	\$ _____
Retirement/Pension Income	\$ _____	\$ _____
Annuities	\$ _____	\$ _____
Capital Gains	\$ _____	\$ _____
Social Security Benefits	\$ _____	\$ _____
Unemployment Benefits	\$ _____	\$ _____
Disability/Workman's Comp.	\$ _____	\$ _____
Interest on Notes	\$ _____	\$ _____
Accounts Receivable	\$ _____	\$ _____
Spousal Support/Alimony	\$ _____	\$ _____
Other Income	\$ _____	\$ _____
TOTAL RESOURCES	\$ _____	\$ _____

DEDUCTIONS		
Withholding Tax	(\$ _____)	(\$ _____)
FICA	(\$ _____)	(\$ _____)
Retirement	(\$ _____)	(\$ _____)
Union Dues	(\$ _____)	(\$ _____)
Health Insurance	(\$ _____)	(\$ _____)
Health Insurance for Child(ren)	(\$ _____)	(\$ _____)
Miscellaneous	(\$ _____)	(\$ _____)
TOTAL DEDUCTIONS	(\$ _____)	(\$ _____)

EMPLOYMENT:

MOTHER: _____

FATHER: _____

MOTHER IS PAID EVERY ___ week ___ two weeks ___ bi-monthly ___ monthly

FATHER IS PAID EVERY ___ week ___ two weeks ___ bi-monthly ___ monthly

Date Next Check is Received: MOTHER: _____ FATHER: _____

QUICK ASSETS:

MOTHER

FATHER

Cash/Undeposited Checks	\$ _____	\$ _____
Financial Institutions	\$ _____	\$ _____
Stocks/Bonds	\$ _____	\$ _____
Other	\$ _____	\$ _____

I can borrow \$_____ on my signature.

NECESSARY MONTHLY EXPENSES

House Payment/Rent	\$ _____	SUBTOTAL FORWARD	\$ _____
Utilities	\$ _____	Clothing	\$ _____
Food	\$ _____	Cleaning/Laundry	\$ _____
Doctor/Dentist/etc.	\$ _____	Legal Fees	\$ _____
Insurance Payment	\$ _____	Gifts	\$ _____
Car Payments	\$ _____	Church Support	\$ _____
Gas/Oil/Parking	\$ _____	Entertainment/Activities	
Car Maintenance	\$ _____	for child(ren)	\$ _____
Child Care/School	\$ _____	Miscellaneous:	\$ _____
Tuition	\$ _____	_____	\$ _____
Lunches/Supplies	\$ _____	_____	\$ _____
Haircuts	\$ _____	_____	\$ _____
SUBTOTAL:	\$ _____	TOTAL:	\$ _____

DEBTS(OTHER THAN LISTED ABOVE):

	<u>AMOUNT</u>	<u>MONTHLY PAYMENT</u>	
_____	\$ _____	\$ _____	
_____	\$ _____	\$ _____	
_____	\$ _____	\$ _____	
_____	\$ _____	\$ _____	
_____	\$ _____	\$ _____	
_____	\$ _____	\$ _____	
TOTAL MONTHLY:		\$ _____	+\$ _____
GRAND TOTAL MONTHLY EXPENSES:			<u>\$ _____</u>

ANSWER ONLY IF YOU ANTICIPATE RECEIVING SUPPORT

I feel the following sums are reasonably necessary or within the ability of the other party to pay, and it will be fair and equitable to require the following:

	<u>EACH PERIOD</u>	<u>MONTHLY</u>
a. For temporary support/alimony	\$ _____	\$ _____
b. For child support	\$ _____	\$ _____
Total	\$ _____	\$ _____
Payee's Net Resources	\$ _____	\$ _____
Total	\$ _____	\$ _____
Payor's Net Income:	\$ _____	\$ _____
Less Alimony/Support	(\$ _____)	(\$ _____)
Net Payor after deduction of support	\$ _____	\$ _____

ANSWER ONLY IF YOU ANTICIPATE PAYING SUPPORT

I feel that a reasonable sum for me to pay weekly or monthly would be:

	<u>EACH PERIOD</u>	<u>MONTHLY</u>
a. For temporary support/alimony	\$ _____	\$ _____
b. For child support	\$ _____	\$ _____
Total	\$ _____	\$ _____

Date: _____

MOTHER'S SIGNATURE

Date: _____

FATHER'S SIGNATURE