

NOTICE: This form is to be completed and a copy furnished to opposing counsel and to the Clerk of the Court prior to the hearing. All columns must be totaled. Provide past 2 years IRS returns and 2 most recent payroll stubs and if none, provide W-2 forms.

**FINANCIAL INFORMATION STATEMENT**

NO. \_\_\_\_\_ District Court

\_\_\_\_\_  
PETITIONER

\_\_\_\_\_  
RESPONDENT

\_\_\_\_\_  
ATTORNEY

\_\_\_\_\_  
ATTORNEY

1.	Date of Marriage: _____	Date of Separation: _____
2.	Ages of Children: ( ) ( ) ( ) ( ) ( ) ( ) ( )	
3.	<b>GROSS MONTHLY RESOURCES:</b>	
	<u>WIFE</u>	<u>HUSBAND</u>
	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	_____
	<b>TOTAL RESOURCES:</b>	_____

4. DEDUCTIONS: WIFE HUSBAND

Withholding Tax (\$ \_\_\_\_\_)(\_\_\_\_\_)

FICA (\_\_\_\_\_) (\_\_\_\_\_)

Retirement (\_\_\_\_\_) (\_\_\_\_\_)

Union Dues (\_\_\_\_\_) (\_\_\_\_\_)

Health Insurance (\_\_\_\_\_) (\_\_\_\_\_)

Health Insurance for Children (\_\_\_\_\_) (\_\_\_\_\_)

Miscellaneous (\_\_\_\_\_) (\_\_\_\_\_)

**TOTAL DEDUCTIONS:** (\$ \_\_\_\_\_)(\_\_\_\_\_)

5. NET MONTHLY INCOME: \$ \_\_\_\_\_ \$ \_\_\_\_\_

5. EMPLOYMENT:

WIFE: \_\_\_\_\_

HUSBAND: \_\_\_\_\_

WIFE IS PAID EVERY:  week  two weeks  bimonthly  month

HUSBAND IS PAID EVERY:  week  two weeks  bimonthly  month

Date Next Check is Received: WIFE \_\_\_\_\_ HUSBAND \_\_\_\_\_

7. QUICK ASSETS: WIFE HUSBAND

Cash/Undeposited Checks \$ \_\_\_\_\_ \_\_\_\_\_

Financial Institutions \_\_\_\_\_ \_\_\_\_\_

Stocks/Bonds \_\_\_\_\_ \_\_\_\_\_

Other \_\_\_\_\_ \_\_\_\_\_

I can borrow \$ \_\_\_\_\_ on my signature.

8. 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 children	_____
Child Care/School	_____	Miscellaneous	_____
Tuition	_____		_____

Lunches/Supplies \_\_\_\_\_  
 Haircuts \_\_\_\_\_  
 SUBTOTAL: \$ \_\_\_\_\_ TOTAL: \$ \_\_\_\_\_

9. DEBTS (OTHER THAN LISTED IN NUMBER 8 ABOVE):

	<u>AMOUNT</u>	<u>MONTHLY PAYMENT</u>
_____	\$ _____	\$ _____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

TOTAL MONTHLY: \$ \_\_\_\_\_ +\$ \_\_\_\_\_

10. GRAND TOTAL MONTHLY EXPENSES: \$ \_\_\_\_\_

11. **(ANSWER ONLY IF YOU ANTICIPATE RECEIVING SUPPORT)** I feel that the following sums are reasonably necessary or within the ability of my spouse to pay, and it will be fair and equitable to require the following:

	<u>EACH PAY PERIOD</u>	<u>MONTHLY</u>
a. For temporary alimony	\$ _____	\$ _____
b. For child support	+ _____	+ _____
12. Total lines 11a and 11b	\$ _____	\$ _____
13. Payee's Net Resources	+ _____	+ _____
14. Total lines 12 and 13	\$ _____	\$ _____
15. Payor's Net Income	\$ _____	\$ _____
16. Less Alimony and Support (line 12)	( _____ )	( _____ )
17. Net Payor after deduction of child support and alimony	\$ _____	\$ _____

18. **(ANSWER ONLY IF YOU ANTICIPATE PAYING SUPPORT)** I feel that a reasonable sum for me to pay weekly or monthly would be.

a. For temporary alimony	\$ _____	\$ _____
b. For child support	+ _____	+ _____
19. Total lines 18a and 18b	\$ _____	\$ _____

DATE: \_\_\_\_\_

\_\_\_\_\_  
WIFE'S SIGNATURE

DATE \_\_\_\_\_

\_\_\_\_\_  
HUSBAND'S SIGNATURE