

Circuit Court for _____ Case No. _____

Name

Street Address

City State Zip Telephone

Name

Street Address

City State Zip Telephone

Plaintiff

Defendant

FINANCIAL STATEMENT – SHORT FORM

I, _____, state that:

I am the mother/ father or _____
(Check One) State Relationship (for example: aunt, grandfather, guardian, etc.)
minor child(ren):

_____ Name	_____ Date of Birth	_____ Name	_____ Date of Birth
_____ Name	_____ Date of Birth	_____ Name	_____ Date of Birth
_____ Name	_____ Date of Birth	_____ Name	_____ Date of Birth

The following is a list of my income and expenses (see below*)
See definitions on page 2 before filling out:

Total monthly income (before taxes)	\$ _____
Child support I am paying for my other child(ren) each month	\$ _____
Alimony I am paying each month to: _____	\$ _____
Alimony I am receiving each month from: _____	\$ _____
Net monthly income	\$ _____

For the child or children listed above:

Monthly health insurance premium	\$ _____
Work-related monthly child care expenses	\$ _____
Extraordinary monthly medical expenses	\$ _____
School and transportation expenses	\$ _____
Total expenses provided herein	\$ _____

*to figure the monthly expenses, weekly expenses should be multiplied by 4.3 and yearly expenses should be divided by 12.
If you do not pay the same amount each month for any of the categories listed, figure what you average monthly expense is.

I solemnly affirm under the penalties of perjury that the contents of the foregoing paper are true to the best of my knowledge, information and belief.

Date

Signature

