

FINANCIAL AFFIDAVIT

Petitioner: _____
Respondent: _____

Case No.: _____

IN THE CIRCUIT COURT OF THE NINTH
JUDICIAL CIRCUIT IN AND FOR
ORANGE/OSCEOLA COUNTY FLORIDA

Personal Information

Name: _____ Hair: _____ Eye: _____ Weight: _____ Height: _____
Home Address: _____ Mailing Address: _____
SSN: _____ DOB: _____ Home Phone: _____ Single: _____ Married: _____
Vehicle Tag No: _____ Make: _____ Model: _____ Year: _____
No. of Exemptions Claimed on Income Tax: _____ List Exemptions: _____

Employment

Employer: _____ Work #: _____ Title: _____
Length of Employment: _____ Address: _____ Rate of Pay: _____ per: _____

Health Insurance Information

Health Insurance: Yes _____ No _____ Provider: _____ Policy #: _____
Group Number: _____ If not enrolled, is insurance available? _____
Persons Included in Coverage: (Name and Relationship)

Liabilities and Expenses

Utilities: \$ _____ Probation/Parole: \$ _____ Transportation: \$ _____ Other: \$ _____
Child care: \$ _____ Rent: \$ _____ Property Tax: \$ _____ \$ _____
Medical: \$ _____ Vehicle Payment \$ _____ Insurance: \$ _____ \$ _____
Food: \$ _____ Clothing: \$ _____ Recreation: \$ _____ \$ _____

Assets

List Assets, Value and Location (including: stocks, bonds, property, vehicles, jewelry, audio/video equipment, tools, ect.)
_____ \$ _____ \$ _____ \$ _____
_____ \$ _____ \$ _____ \$ _____

Average Gross Monthly Income

1. Salary/Wages \$ _____ 6. Unemployment Compensation \$ _____
2. Bonuses, commissions, \$ _____ 7. Pensions, retirements and \$ _____
Overtime allowances, tips, ect. \$ _____ annuity payment \$ _____
3. Self-Employment/partnership, 8. Social Security payments \$ _____
close corp. & independent cont. 9. Interest and Dividends \$ _____
4. Disability \$ _____ 10. Rental Income \$ _____
5. Worker's Compensation \$ _____ 11. Other \$ _____

Total Gross Monthly Income \$ _____

Allowable Deductions

1. Federal, State and local taxes \$ _____ 5. Health ins. Payments: \$ _____
2. FICA or self-employment tax \$ _____ 6. Court Ordered Child Support \$ _____
3. Mandatory union dues \$ _____ for other children actually paid \$ _____
4. Mandatory retirement \$ _____

Total Deductions: _____

Net Income

Total Gross Income **minus** Total Allowable Deductions **equals** Total Net Monthly Income

Under penalty of perjury, all information and facts stated herein are true to the best of my knowledge.

Affiant

Date