

IN THE CIRCUIT COURT OF THE FIRST JUDICIAL CIRCUIT,
IN AND FOR OKALOOSA COUNTY, FLORIDA

IN RE: The Marriage Of:

_____,
Petitioner,

and

Case No.: _____

_____,
Respondent.

FAMILY LAW FINANCIAL AFFIDAVIT
(Under \$50,000 Individual Gross Annual Income)

I, _____, being sworn, certify that the following information is true:

SECTION I. INCOME

1. Date of Birth: _____
 2. My occupation is: _____
 3. I am currently employed by: _____
Address: _____
City, State, Zip: _____ Telephone: _____
Pay rate: \$ _____ every week every other week twice a month monthly other: _____
- Check here if unemployed and explain your efforts to find employment.

PRESENT MONTHLY GROSS INCOME

All amounts must be MONTHLY. See the instructions with this form to figure out money amounts for anything that is NOT paid monthly. Attach more paper, if needed.

Items included under "other" should be listed separately with separate dollar amounts.

1	Monthly gross salary or wages	
2	Monthly bonuses, commissions, allowances, overtime, tips, and similar payments	
3	Monthly business income from sources such as self-employment, partnerships, close corporations, and/or independent contracts (Gross receipts minus ordinary and necessary expenses required to produce income.) [Attach sheet itemizing such income and expenses.]	
4	Monthly disability benefits/SSI	
5	Monthly Workers' Compensation	
6	Monthly Unemployment Compensation	
7	Monthly pension, retirement, or annuity payments	
8	Monthly Social Security benefits	
9	Monthly alimony actually received	

9a	9a. From this case:	
9b	9b. From other case(s):	
9c	Add 9a and 9b:	
10	Monthly interest and dividends	
11	Monthly rental income (gross receipts minus ordinary and necessary expenses required to produce income) [Attach sheet itemizing such income and expense items.]	
12	Monthly income from royalties, trusts, or estates	
13	Monthly reimbursed expenses and in-kind payments to the extent that they reduce personal living expenses [Attach sheet itemizing each item and amount.]	
14	Monthly gains derived from dealing in property (not including nonrecurring gains)	
Any other income of a recurring nature (identify source)		
15		
16		
17	PRESENT MONTHLY GROSS INCOME	TOTAL:

PRESENT MONTHLY DEDUCTIONS All amounts must be MONTHLY. See the instructions with this form to figure out money amounts for anything that is NOT paid monthly.		
18	Monthly federal, state, and local income tax (corrected for filing status and allowable dependents and income tax liabilities) a. Filing Status: _____ b. Number of dependents claimed: _____	
19	Monthly FICA or self-employment taxes	
20	Monthly Medicare payments	
21	Monthly mandatory union dues	
22	Monthly mandatory retirement payments	
23	Monthly health insurance payments (including dental insurance), excluding portion paid for any minor children of this relationship	
24	Monthly court-ordered child support actually paid for children from another relationship	
25	Monthly court-ordered alimony actually paid	
25a	25a. From this case:	
25b	25b. From other case(s):	
25c	Add 25a and 25b	
26	TOTAL DEDUCTIONS ALLOWABLE UNDER F.S. § 61.30	TOTAL:

27	PRESENT NET MONTHLY INCOME (Subtract line 26 from line 17)	
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SECTION II. AVERAGE MONTHLY EXPENSES

Proposed/Estimated Expenses. If this is a dissolution of marriage case **and** your expenses as listed below do not reflect what you actually pay currently, you should write “estimate” next to each amount that is estimated.

HOUSEHOLD

1	Mortgage or rent payments	
2	Property taxes	
3	Utilities	
4	Telephone	
5	Food	
6	Meals outside home	
7	Maintenance/repairs	
8	Other:	
9	Other:	
10	Other:	

AUTOMOBILE

11	Monthly gasoline and oil	
12	Monthly repairs	
13	Monthly insurance	

CHILDREN’S EXPENSES

14	Day care	
15	Lunch money	
16	Clothing	
17	Grooming	
18	Gifts for holidays	
19	Medical/dental (uninsured)	
20	Other:	

INSURANCE

21	Medical/dental	
22	Children’s medical/dental	
23	Life	
24	Other:	
25	Other:	

OTHER EXPENSES NOT LISTED ABOVE

26	Clothing	
27	Medical/dental (uninsured)	
28	Grooming	
29	Entertainment	
30	Gifts	
31	Religious organizations	
32	Other:	
33	Other:	
34	Other:	
35	Other:	
36	Other:	
37	Other:	

PAYMENTS TO CREDITORS

	Creditor	Monthly Amount
38		
39		
40		
41		
42		
43		
44		
45		
46		
47		
48		
49		
TOTAL MONTHLY EXPENSES		

SUMMARY	
TOTAL PRESENT MONTHLY NET INCOME	
TOTAL MONTHLY EXPENSES	
SURPLUS	
(DEFICIT)	

SECTION III. ASSETS AND LIABILITIES

A. ASSETS (This is where you list what you **OWN**.)

INSTRUCTIONS:

- STEP 1: In column A, list a description of each separate item owned by you (and/or your spouse, if this is a petition for dissolution of marriage). Blank spaces are provided if you need to list more than one of an item.
- STEP 2: If this is a petition for dissolution of marriage, check the box **in Column A** next to any item that you are requesting the judge award to you.
- STEP 3: In column B, write what you believe to be the current fair market value of all items listed.
- STEP 4: Use column C only if this is a petition for dissolution of marriage and you believe an item is “nonmarital,” meaning it belongs to only one of you and should not be divided. You should indicate to whom you believe the item belongs.

A ASSETS: Description of Item(s) <input checked="" type="checkbox"/> the box next to any asset(s) which you are requesting the judge award to you.	B Current Fair Market Value	C Nonmarital (<input checked="" type="checkbox"/> correct column)	
		husband	wife
<input type="checkbox"/> Cash (on hand)			
<input type="checkbox"/> Cash (in banks or credit unions)			
<input type="checkbox"/> Stocks/Bonds			
<input type="checkbox"/> Real Estate: (Home)			
<input type="checkbox"/> Other			
<input type="checkbox"/> Automobiles			
<input type="checkbox"/> Other personal property			
<input type="checkbox"/> Retirement plans (Profit Sharing, Pension, IRA, 401(k)s, etc.)			
<input type="checkbox"/> Other			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> <input checked="" type="checkbox"/> here if additional pages are attached			
TOTAL ASSETS			

B. LIABILITIES/DEBTS (This is where you list what you **OWE**.)

INSTRUCTIONS:

- STEP 1: In column A, list a description of each separate debt owed by you (and/or your spouse, if this is a petition for dissolution of marriage). Blank spaces are provided if you need to list more than one of an item.
- STEP 2: If this is a petition for dissolution of marriage, check the box **in Column A** next to any debt(s) for which you believe you should be responsible.
- STEP 3: In column B, write what you believe to be the current amount owed for all items listed.
- STEP 4: Use column C only if this is a petition for dissolution of marriage and you believe an item is “nonmarital,” meaning the debt belongs to only one of you and should not be divided. You should indicate to whom you believe the debt belongs.

A	B	C	
LIABILITIES: DESCRIPTION OF ITEM(S) <input checked="" type="checkbox"/> the box next to any debt(s) for which you believe you should be responsible.	Current Amount Owed	Nonmarital (<input checked="" type="checkbox"/> correct column)	
		husband	wife
<input type="checkbox"/> Mortgages on real estate: (Home)			
<input type="checkbox"/> Auto loans			
<input type="checkbox"/>			
<input type="checkbox"/> Charge/credit card accounts			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> Other			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
TOTAL DEBTS			

C. NET WORTH (excluding contingent assets and liabilities)

TOTAL ASSETS (enter total of Column B in Asset Table; Section A)	
TOTAL LIABILITIES (enter total of Column B in Liabilities Table; Section B)	
TOTAL NET WORTH (Total Assets minus Total Liabilities)	

D. CONTINGENT ASSETS AND LIABILITIES

INSTRUCTIONS:

If you have any **POSSIBLE assets** (income potential, accrued vacation or sick leave, bonus, inheritance, etc.) or **POSSIBLE liabilities** (possible lawsuits, future unpaid taxes, contingent tax liabilities, debts assumed by another), you must list them here.

A	B	C	
CONTINGENT ASSETS	Possible Value	Nonmarital (✓ correct column)	
✓ the box next to any contingent asset which you are requesting the judge award to you.		husband	wife
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
TOTAL CONTINGENT ASSETS			

A	B	C	
CONTINGENT LIABILITIES	Possible Amount Owed	Nonmarital (✓ correct column)	
✓ the box next to any contingent debts for which you believe you should be responsible.		husband	wife
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
TOTAL CONTINGENT LIABILITIES			

SECTION IV.

CHILD SUPPORT GUIDELINES WORKSHEET

Florida Family Law Rules of Procedure Form 12.902(e), Child Support Guidelines Worksheet, MUST be filed with the court at or prior to a hearing to establish or modify child support. This requirement cannot be waived by the parties. [✓ one only]

A Child Support Guidelines Worksheet IS or WILL BE filed in this case. This case involves the establishment or modification of child support.

A Child Support Guidelines Worksheet IS NOT being filed in this case. The establishment or modification of child support is not an issue in this case.

I certify that a copy of this financial affidavit was: mailed, faxed and mailed, or hand delivered to the person(s) listed below on {date} _____.

Other party or his/her attorney:

Name: _____

Address: _____

City, State, Zip: _____

Fax Number: _____

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this affidavit and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Dated: _____

Signature

Printed Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

Fax Number: _____

STATE OF FLORIDA
COUNTY OF OKALOOSA

Sworn to or affirmed and signed before me on _____ by _____.

Notary Public or Deputy Clerk

[Print, type, or stamp commissioned name of notary or deputy clerk.]

Personally known

Produced identification

Type of identification produced _____