

NAME: _____

FINANCIAL INFORMATION STATEMENT

1. What are your necessary monthly expenses, indicating those secured by mortgages:

a. Rent	\$ _____	v. Furniture	\$ _____
b. House payment	\$ _____	w. Church	\$ _____
c. All utilities	\$ _____	x.. Gifts	\$ _____
d. Homeowners' Insurance (or Renters' Insurance)	\$ _____	y. Entertainment	\$ _____
e. Doctor (not covered by insurance)	\$ _____	z. Credit Cards:	\$ _____
f. Dentist (not covered by insurance)	\$ _____		\$ _____
g. Drugs (not covered by insurance)	\$ _____		\$ _____
h. Life Insurance	\$ _____		\$ _____
i. Hospitalization	\$ _____		\$ _____
j. Automobile Payment(s)	\$ _____		\$ _____
k. Automobile Insurance	\$ _____		\$ _____
l. Gasoline and Oil	\$ _____		\$ _____
m. Car repair	\$ _____		\$ _____
n. Other transportation	\$ _____		\$ _____
o. Food	\$ _____		\$ _____
p. Lunches, school	\$ _____		\$ _____
q. Child Care	\$ _____		\$ _____
r. Clothing	\$ _____		\$ _____
s. Laundry/Cleaners	\$ _____		\$ _____
t. Beauty parlor/Haircuts	\$ _____		\$ _____
u. Toiletries	\$ _____	Total	\$ _____

2. Gross Income		<u>Weekly</u>	<u>Monthly</u>
		\$ _____	\$ _____
<u>Deductions</u>			
Withholding tax	\$ _____		
FICA	\$ _____		
Retirement	\$ _____		
TOTAL		\$ _____	\$ _____
NET INCOME		\$ _____	\$ _____

3. Other Income (Explain) _____

4. Is your spouse working? _____ Kind of work _____

Gross Income		<u>Weekly</u>	<u>Monthly</u>
		\$ _____	\$ _____
<u>Deductions</u>			
Withholding tax	\$ _____		
FICA	\$ _____		
Retirement	\$ _____		
TOTAL		\$ _____	\$ _____
NET INCOME		\$ _____	\$ _____

5. Other Income (Spouse) (Explain) _____

6. The following sums are reasonably necessary, or within the ability of my spouse to pay, and that it will be fair and equitable to require the following:

	<u>Weekly</u>	<u>Monthly</u>
a. For temporary alimony	\$ _____	\$ _____
b. For child support	\$ _____	\$ _____
TOTAL	\$ _____	\$ _____

7. (Answer only if support-paying spouse) I feel that a reasonable sum for me to pay weekly or monthly would be:

	<u>Weekly</u>	<u>Monthly</u>
a. For temporary alimony	\$ _____	\$ _____
b. For child support	\$ _____	\$ _____
TOTAL	\$ _____	\$ _____