

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT,
 IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____
 Division: _____

_____,
 Petitioner,
 and

_____,
 Respondent.

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

I, {full legal name} _____, being sworn, certify that the following information is true:

My Occupation: _____ Employed by: _____

Business Address: _____

Pay Rate _____ every week _____ every other week _____ twice a month _____ Monthly _____ Other _____

Check here if unemployed and explain on a separate sheet your efforts to find employment.

SECTION I. 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 | 1. | _____ |
| 2. Monthly bonuses, commissions, allowances, overtime, tips, and similar payments | 2. | _____ |
| 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) (<input type="checkbox"/> Attach sheet itemizing such income and expenses.) | 3. | _____ |
| 4. Monthly disability benefits/SSI | 4. | _____ |
| 5. Monthly Workers' Compensation | 5. | _____ |
| 6. Monthly Unemployment Compensation | 6. | _____ |
| 7. Monthly pension, retirement, or annuity payments | 7. | _____ |
| 8. Monthly Social Security benefits | 8. | _____ |
| 9. Monthly alimony actually received | | |
| 9a. From this case: _____ | | |
| 9b. From other case(s): _____ Add 9a and 9b | 9. | \$ 0.00 |
| 10. Monthly interest and dividends | 10. | _____ |
| 11. Monthly rental income (gross receipts minus ordinary and necessary expenses required to produce income) (<input type="checkbox"/> Attach sheet itemizing such income and expense items.) | 11. | _____ |
| 12. Monthly income from royalties, trusts, or estates | 12. | _____ |
| 13. Monthly reimbursed expenses and in-kind payments to the extent that they reduce personal living expenses | 13. | _____ |
| 14. Monthly gains derived from dealing in property (not including nonrecurring gains) | 14. | _____ |
| 15. Any other income of a recurring nature (list source) _____ | 15. | _____ |
| 16. _____ | 16. | _____ |
| 17. PRESENT MONTHLY GROSS INCOME (Add lines 1-16) TOTAL: | 17. | _____ \$ 0.00 |

B. LIABILITIES:

A DESCRIPTION OF ITEM(S). List a description of each separate debt owed by you (and/or your spouse, if this is a petition for dissolution of marriage).DO NOT LIST ANY ACCOUNT NUMBERS. ✓ the box next to any debt(s) for which you believe you should be responsible.	B Current Amount Owed	C Nonmarital (✓ check correct column)	
		husband	wife
<input type="checkbox"/> Mortgages on real estate: First mortgage on home			
<input type="checkbox"/> Second mortgage on home			
<input type="checkbox"/> Other mortgages			
<input type="checkbox"/>			
<input type="checkbox"/> Auto loans			
<input type="checkbox"/>			
<input type="checkbox"/> Charge/credit card accounts			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> Other			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> ✓ check here if additional pages are attached.			
Total Debts (add column B)	\$ 0.00		

C. 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 Contingent Assets ✓ the box next to any contingent asset(s) which you are requesting the judge award to you.	B Possible Value	C Nonmarital (✓ check correct column)	
		husband	wife
<input type="checkbox"/>			
<input type="checkbox"/>			
Total Contingent Assets	\$ 0.00		

A Contingent Liabilities ✓ the box next to any contingent debt(s) for which you believe you should be responsible.	B Possible Amount Owed	C Nonmarital (check correct column)	
		husband	wife
<input type="checkbox"/>			
<input type="checkbox"/>			
Total Contingent Liabilities	\$ 0.00		

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.)

[√ check **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 document was [√ **one** only] mailed faxed and mailed 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 of Party

Printed Name: _____
Address: _____
City, State, Zip: _____
Telephone Number: _____
Fax Number: _____

STATE OF FLORIDA
COUNTY OF _____

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 _____

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS

BELOW:[fill in **all** blanks]

I, {full legal name and trade name of nonlawyer} _____,
a nonlawyer, located at {street} _____, {city} _____,
{state} _____, {phone} _____, helped {name} _____,
who is the [√ check **one** only] petitioner or respondent, fill out this form.