NORTH CAROLINA COUNTY OF WAKE

IN THE GENERAL COURT OF JUSTICE DISTRICT COURT DIVISION FILE NO.

		Assigne	d Judge:	
, Plaintiff,		FINANCIAL AFFIDAVIT* OF		
V.		Date Com	pleted: _	
, Defendant.				
Employer: Employer Address:	Em	ployer telepho	one:	
I am paid: weekly, every other weekly, Last Taxable Year Adjusted Gross Income:	k, 🗌 1	twice monthly	y, 🗌 mont	hly, 🗌 other
Current Monthly Gross Income before Deduction	ons:			
Current Monthly Take-home Pay after all Dedu	ctions	:		
Detail of Monthly Gross Income	Date	e of Separatio	n	Current
Monthly Gross Wages:				
Investment income, interest, dividends:				
Bonus, commissions:				
Alimony received:				
Child Support received:	-			
Other (overtime, social security, disability, car allowance, shift pay, vacation/holiday pay):				
Mandatory Monthly Deductions	Date	e of Separatio	on	Current
Federal income tax:				
State income tax:				
Social Security taxes:				
Medicare taxes:	1			
Retirement:				
Garnishment:	1			
Other:	1			
Voluntary Monthly Deductions	Date	e of Separatio	on	Current
Health Insurance:				
Dental Insurance:	1			
Vision Insurance:	1			
Life Insurance:	1			
Disability Insurance:	<u> </u>			
Medical Spending Account:	<u> </u>			
Retirement:	+			
Other:	1			

* Pursuant to the Tenth Judicial District Family Court Rules for Domestic Court, this Affidavit shall be served on the opposing attorney/party along with copies of the required initial disclosures and <u>not</u> filed with the court; the Certificate of Service attached to this Affidavit <u>shall</u> be filed with the court.

<u>Part 1</u>				
Regular Recurring Monthly Expenses				

Expense	Date of Separation	Current
	Date:	_ Date:
Rent or Mortgage Payment		
Renters/Homeowners Insurance		
Taxes not included in mortgage		
Routine house & appliance repair/maintenance		
Electricity		
Gas, home heating fuel, oil		
Water		
Garbage		
Cable, digital television		
Telephone		
Internet service		
Yard maintenance		
Home security system		
House cleaning service		
Pest control services		
Automobile payment		
Auto insurance		
Gasoline (auto)		
Auto repair/maintenance, registration, taxes		
Food and household supplies		
Pets (insurance, vet, food, kennel)		
Other:		
GRAND TOTALS FOR PART 1:		

<u>Part 2</u> Individual Monthly Expenses

	Date of Separation Date:		Current Date:			
Expense	Self	Children	Total	Self	Children	Total
Medical Insurance premium						
Dental/Vision Insurance premium						
Uninsured Medical						
expenses (co-pays, deductibles)						
Uninsured Dental &						
Orthodontic expense						
Uninsured Prescription and OTC drugs & medication						
Other uninsured medical						
expenses (e.g. optical)						
Other insurance premiums (life, disability, etc.)						
Work-related child care						
expense, including summer						
camps Cellular/digital mobile						
telephone						
Eating Out						
School Lunches			_			
Newspapers,						
Magazines Clothing, accessories						
Personal Upkeep (barber, hair stylist)						
Laundry, Dry Cleaning						
Education (tuition, fees, supplies)						
Babysitting, child care,						
summer camp (not included						
above) Dues (professional, social,						
school)						
Extracurricular (piano,						
sports, dance, etc.) Church donations						

PART 2 CONTINUED

	Date of Separation Date:			Current Date:		
Expense	Self	Children	Total	Self	Children	Total
Other charitable contributions						
Entertainment & Recreation						
Club dues & assessments						
Allowances for Children						
Annual vacation						
Gifts (Holidays, birthdays)						
Child support for another child						
Spousal support for another spouse						
Professional fees (CPA, etc.)						
School Loans						
Retirement & investment						
Savings						
College Fund						
Other:						
Other:						
GRAND TOTALS FOR PART 2:						

<u>Part 3</u> Debts

Creditor	Balance due on DOS	Monthly Payment	Current Balance due	Monthly Payment
GRAND TOTALS FOR PART 3:				

VERIFICATION

I certify that the following person personally appeared before me this day, and \Box I have personal knowledge of the identity of the principal \Box I have seen satisfactory evidence of the principal's identity, by a current state or federal identification with the principal's photograph in the form of a \Box a credible witness has sworn to the identity of the principal; acknowledging to me that he/she voluntarily signed the foregoing document for the purpose stated therein, and in the capacity indicated:

Date:	 (SEAL)
	 , Notary Public

(Official Seal)

My commission expires:

NORTH CAROLINA COUNTY OF WAKE

IN THE GENERAL COURT OF JUSTICE DISTRICT COURT DIVISION FILE NO.

	Assigned Ju	ıdge:
Plaintiff, v.	_	IFICATE OF SERVICE INANCIAL AFFIDAVIT
Defendant.		
served on the opposing p	hat a copy of my verified Financial Affida arty/counsel in the following manner: in the US Mail in a properly addressed, po	
By hand delivery to:		
By facsimile to:	Fax 1	No.:
Other:		
 Date:	 Plaintiff Attorney for Plaintiff 	Defendant Attorney for Defendant