

STATE OF NORTH CAROLINA
County of _____

GENERAL COURT OF JUSTICE
DISTRICT COURT DIVISION
Case No.: _____

Plaintiff/petitioner

VS.

CHILD SUPPORT AFFIDAVIT

Defendant/respondent

Pursuant to the Rules of Court adopted for the District, both parties are required to complete the following document, swear to its accuracy before the Clerk of Court or a Notary, and have it available for examination by the court and opposing parties by the date of the hearing.

Employment information:	
Your Social security number:	
Employed by:	How long:
Pay period:	<input type="checkbox"/> weekly <input type="checkbox"/> two weeks <input type="checkbox"/> bi-monthly <input type="checkbox"/> monthly <input type="checkbox"/> other:
Gross Monthly income, before any deductions, from all sources: \$ <small>[Monthly income is computed by multiplying gross weekly income (before deductions) by 4.3]</small>	
Monthly insurance paid by you attributable only to your children: \$	
Are you supporting other children? <input type="checkbox"/> yes <input type="checkbox"/> no How many? _____	
Amount you actually pay per month for other children through court: \$	
Amount you acutally pay per month for other children out of court: \$	
Are you paying for out-of-home child care? <input type="checkbox"/> yes <input type="checkbox"/> no Amount you actually pay per month which is work related: \$	

You must bring with you to court the following additional documents:

1. A copy of your most recent federal and state tax return;
2. A copy of a recent pay statement showing your current gross pay and deductions.
3. An executed employer certification of earnings. (Forms are available in Clerk's office).

Your child support obligation will be computed according to the presumptive guidelines as required by North Carolina law unless you have specifically pled grounds for departing from the presumptive amount. If you contend that the amount should not be the presumptive amount, you must, before the date of the hearing, file a statement setting out the reasons and complete a detailed affidavit of earnings and living expenses on a form available in the office of the Clerk of Superior Court.

AFFIDAVIT

I hereby certify that the foregoing is true, complete and accurate to the best of my knowledge. I do not have any income other than that listed in this affidavit.

Signature: _____

The above named person appeared before me this _____ day of _____, 2_____,
and swore under oath that the information provided in this affidavit was the truth.

Signature of official administering oath: _____

[SEAL] Clerk of Court Magistrate Notary: com. exp. date _____