

STATE OF NORTH CAROLINA
 COUNTY OF CABARRUS

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

| | |
|---|--|
| _____, Plaintiff, vs. _____, Defendant, | |
|---|--|

FINANCIAL AFFIDAVIT

[] PLAINTIFF [] DEFENDANT

INCOME INFORMATION

Employer: _____ Employer Telephone: _____
 Employer Address: _____ Social Security No: _____

| | |
|--|-------|
| Last Taxable Year Adjusted Gross Income: | _____ |
| Monthly Gross Before Deductions: | _____ |
| Monthly Take Home Pay After Deductions: | _____ |

**(ATTACH TO THIS AFFIDAVIT COPIES OF THE PAST TWO (2) MONTHS
 WAGE AND EARNINGS STATEMENTS)**

| | | | | |
|----------------|------------------|--|--------------|--|
| Other Incomes: | Commissions: | | Investments: | |
| | Social Security: | | Alimony: | |
| | Child Support: | | Other: | |
| TOTALS | | | | |

MONTHLY HEALTH INSURANCE AND OTHER CHILD PAYMENTS

Total Health Insurance Premium Cost: \$ _____
 Pre-Existing Child Support Payments: \$ _____
 Responsibility for Other Children: \$ _____

MONTHLY WORK RELATED CHILD CARE COST

| Child's Name | Amount | Child's Name | Amount |
|--------------|--------|--------------|--------|
| | | | |
| | | | |

NON-PRORATED MONTHLY EXPENSES

| Item | Amount | Item | Amount |
|---------------------|--------|-------------------------|--------|
| House Payment/ Rent | | Household Food Supplies | |
| Heat | | Electricity | |
| Water | | Telephone | |
| Cablevision | | Car Payment | |
| House Maintenance | | Car Insurance | |
| Life Insurance | | Internet | |
| TOTALS | | Renters Insurance | |

INDIVIDUAL MONTHLY EXPENSE

SELF **CHILD** **CHILD** **CHILD** **TOTALS**
 Name: _____ Name: _____ Name: _____
 Age: _____ Age: _____ Age: _____

| | | | | | |
|--------------------------|--|--|--|--|--|
| School & Work Lunch | | | | | |
| Medical/ Dental | | | | | |
| Drugs | | | | | |
| Clothing | | | | | |
| Grooming | | | | | |
| Laundry/ Cleaning | | | | | |
| Entertainment | | | | | |
| Recreation | | | | | |
| Reading Material | | | | | |
| Church Donations | | | | | |
| Gifts, Christmas, etc. | | | | | |
| Club Dues | | | | | |
| Education | | | | | |
| Allowances | | | | | |
| Vacation | | | | | |
| Gasoline | | | | | |
| Car Repair & Maintenance | | | | | |
| Eating Out | | | | | |
| Other | | | | | |
| Other | | | | | |
| Other | | | | | |
| TOTALS | | | | | |

ASSETS AND DEBTS

| Asset | Value | Debt | Balance Due | Monthly Payment |
|-----------------|-------|----------------------|-------------|-----------------|
| Real Estate | | Real Estate/Mortgage | | |
| Vehicles | | Vehicle | | |
| Stock & Bonds | | Loans | | |
| Accounts & Cash | | Credit Cards | | |
| Other | | Other | | |
| TOTALS | | | | |

I certify that the aforementioned is true, complete and accurate to the best of my ability.

Affiant

Sworn to and subscribed to before me
 This the _____ day of _____, 2018

 Notary Public
 My Commission Expires: