

IN THE CIRCUIT COURT OF THE TWENTIETH JUDICIAL CIRCUIT,  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA  
CIVIL DIVISION

IN RE: THE MARRIAGE OF:

\_\_\_\_\_  
Petitioner,

and

\_\_\_\_\_  
Respondent.

CASE NO.:

JUDGE:

**FAMILY LAW FINANCIAL AFFIDAVIT**

(\$50,000 or more Individual Gross Annual Income)

I, \_\_\_\_\_ being sworn, certify that the following information is true:

**SECTION I. INCOME**

1. Date of Birth: \_\_\_\_\_
2. Social Security Number: \_\_\_\_\_
3. My occupation is: \_\_\_\_\_
4. I am currently \_\_\_\_\_

all that apply]

- \_\_\_\_\_ a. Unemployed  
Describe your efforts to find employment, how soon you expect to be employed, and the pay you expect to receive:
- \_\_\_\_\_ b. Employed by: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_
- Pay rate: \$ \_\_\_\_\_ every week ( ) every other week ( ) twice a month ( ) monthly ( )  
other: \_\_\_\_\_

If you are expecting to become unemployed or change jobs soon, describe the change you expect and why and how it will affect your income:

Check here if you currently have more than one job. List the information above for the second job(s) on a separate sheet and attach it to this affidavit.

- \_\_\_\_\_ c. Retired. Date of retirement: \_\_\_\_\_  
Employer from whom retired: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_ Telephone # \_\_\_\_\_

**LAST YEAR'S GROSS INCOME:**      Your Income      Other Party=s Income (if known)  
YEAR      \_\_\_\_\_      \_\_\_\_\_

**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.) ( 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 9. \_\_\_\_\_
  - 9a. From this case: \$ \_\_\_\_\_
  - 9b. From other case(s): \_\_\_\_\_
  - Add 9a and 9b
- 10. Monthly interest and dividends 10. \_\_\_\_\_
- 11. Monthly rental income (gross receipts minus ordinary and necessary expenses required to produce income) ( 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 (€ Attach sheet itemizing each item and amount.) 13. \_\_\_\_\_
- 14. Monthly gains derived from dealing in property (not including nonrecurring gains) 14. \_\_\_\_\_
- Any other income of a recurring nature (identify source) \_\_\_\_\_
- 15. \_\_\_\_\_ 15. \_\_\_\_\_
- 16. \_\_\_\_\_ 16. \_\_\_\_\_
- 17. PRESENT MONTHLY GROSS INCOME (Add lines 1-16) TOTAL:** **17. \_\_\_\_\_**

**PRESENT MONTHLY DEDUCTIONS:**

**All amounts must be MONTHLY.** See the instructions with this form to figure out money amounts for anything that is NOT paid monthly.

- 18. Monthly federal, state, and local income tax (corrected for filing status and allowable dependents and income tax liabilities) 18. \_\_\_\_\_
  - a. Filing Status \_\_\_\_\_
  - b. Number of dependents claimed \_\_\_\_\_
- 19. Monthly FICA or self-employment taxes 19. \_\_\_\_\_
- 20. Monthly Medicare payments 20. \_\_\_\_\_
- 21. Monthly mandatory union dues 21. \_\_\_\_\_
- 22. Monthly mandatory retirement payments 22. \_\_\_\_\_

23. Monthly health insurance payments (including dental insurance), excluding portion paid for any minor children of this relationship 23. \_\_\_\_\_
24. Monthly court-ordered child support actually paid for children from another relationship 24. \_\_\_\_\_
25. Monthly court-ordered alimony actually paid
- 25a. from this case: \$ \_\_\_\_\_
- 25b. from other case(s): \$ \_\_\_\_\_
- Add 25a and 25b 25. \_\_\_\_\_
26. **TOTAL DEDUCTIONS ALLOWABLE UNDER SECTION 61.30, FLORIDA STATUTES** (Add lines 18 through 25) **TOTAL:** 26. \_\_\_\_\_

**27. PRESENT NET MONTHLY INCOME** (Subtract line 26 from line 17) 27. \_\_\_\_\_

**SECTION II. AVERAGE MONTHLY EXPENSES**

**Proposed/Estimated Expenses.** If this is a dissolution of marriage case **and** your current expenses do not reflect what you will actually have to pay after your marriage ends, you should write "estimate" next to each amount that is proposed/estimated.

**HOUSEHOLD:**

1. Monthly mortgage or rent payments 1. \_\_\_\_\_
  2. Monthly property taxes (if not included in mortgage) 2. \_\_\_\_\_
  3. Monthly insurance on residence (if not included in mortgage) 3. \_\_\_\_\_
  4. Monthly condominium maintenance fees and homeowner's association fees 4. \_\_\_\_\_
  5. Monthly electricity 5. \_\_\_\_\_
  6. Monthly water, garbage, and sewer 6. \_\_\_\_\_
  7. Monthly telephone 7. \_\_\_\_\_
  8. Monthly fuel oil or natural gas 8. \_\_\_\_\_
  9. Monthly repairs and maintenance 9. \_\_\_\_\_
  10. Monthly lawn care 10. \_\_\_\_\_
  11. Monthly pool maintenance 11. \_\_\_\_\_
  12. Monthly pest control 12. \_\_\_\_\_
  13. Monthly misc. household 13. \_\_\_\_\_
  14. Monthly food and grocery items 14. \_\_\_\_\_
  15. Monthly meals outside home 15. \_\_\_\_\_
  16. Monthly cable t.v. (satellite) 16. \_\_\_\_\_
  17. Monthly alarm service contract 17. \_\_\_\_\_
  18. Monthly service contracts on appliances 18. \_\_\_\_\_
  19. Monthly maid service 19. \_\_\_\_\_
- Other:
20. \_\_\_\_\_ 20. \_\_\_\_\_
21. \_\_\_\_\_ 21. \_\_\_\_\_
22. \_\_\_\_\_ 22. \_\_\_\_\_
23. \_\_\_\_\_ 23. \_\_\_\_\_
24. \_\_\_\_\_ 24. \_\_\_\_\_

**SUBTOTAL** (add lines 1 through 24) 25. \_\_\_\_\_

**AUTOMOBILE:**

- 26. Monthly gasoline and oil 26. \_\_\_\_\_
- 27. Monthly repairs 27. \_\_\_\_\_
- 28. Monthly auto tags and emission testing 28. \_\_\_\_\_
- 29. Monthly insurance 29. \_\_\_\_\_
- 30. Monthly payments (lease or financing) 30. \_\_\_\_\_
- 31. Monthly rental/replacements 31. \_\_\_\_\_
- 32. Monthly alternative transportation (bus, rail, car pool, etc.) 32. \_\_\_\_\_
- 33. Monthly tolls and parking 33. \_\_\_\_\_
- 34. Other: \_\_\_\_\_ 34. \_\_\_\_\_

**35. SUBTOTAL** (add lines 26 through 34) **35.** \_\_\_\_\_

**MONTHLY EXPENSES FOR CHILD(REN) FROM ANOTHER RELATIONSHIP** (other than court-ordered child support)

- 36. \_\_\_\_\_ 36. \_\_\_\_\_
- 37. \_\_\_\_\_ 37. \_\_\_\_\_
- 38. \_\_\_\_\_ 38. \_\_\_\_\_
- 39. \_\_\_\_\_ 39. \_\_\_\_\_

**40. SUBTOTAL** (add lines 36 through 39) **40.** \_\_\_\_\_

**MONTHLY INSURANCE**

- 41. Health insurance, excluding portion paid for any minor child(ren) of this relationship 41. \_\_\_\_\_
- 42. Life insurance 42. \_\_\_\_\_
- 43. Dental insurance 43. \_\_\_\_\_
- Other:
- 44. \_\_\_\_\_ 44. \_\_\_\_\_
- 45. \_\_\_\_\_ 45. \_\_\_\_\_

**46. SUBTOTAL** (add lines 41 through 45) **46.** \_\_\_\_\_

**OTHER MONTHLY EXPENSES NOT LISTED ABOVE:**

- 47. Monthly dry cleaning and laundry 47. \_\_\_\_\_
- 48. Monthly clothing 48. \_\_\_\_\_
- 49. Monthly medical, dental, and prescription (unreimbursed only) 49. \_\_\_\_\_
- 50. Monthly psychiatric, psychological, and counselor (unreimbursed only) 50. \_\_\_\_\_
- 51. Monthly non-prescription medications, cosmetics, toiletries, and sundries 51. \_\_\_\_\_
- 52. Monthly grooming 52. \_\_\_\_\_
- 53. Monthly gifts 53. \_\_\_\_\_
- 54. Monthly pet expenses 54. \_\_\_\_\_
- 55. Monthly club dues and membership 55. \_\_\_\_\_
- 56. Monthly sports and hobbies 56. \_\_\_\_\_
- 57. Monthly entertainment 57. \_\_\_\_\_
- 58. Monthly periodicals/books/tapes/CD's 58. \_\_\_\_\_

59. Monthly vacations	59. _____
60. Monthly religious organizations	60. _____
61. Monthly bank charges/credit card fees	61. _____
62. Monthly education expenses	62. _____
Other: (include any usual and customary expenses not otherwise mentioned in the items listed above)	
63. _____	63. _____
64. _____	64. _____
65. _____	65. _____
66. _____	66. _____
<b>67. SUBTOTAL</b> (add lines 47 through 66)	<b>67.</b> _____

**MONTHLY PAYMENTS TO CREDITORS:** (only when payments are currently made by you on outstanding balances)

NAME OF CREDITOR(s):

68. _____	68. _____
69. _____	69. _____
70. _____	70. _____
71. _____	71. _____
72. _____	72. _____
73. _____	73. _____
74. _____	74. _____
75. _____	75. _____
76. _____	76. _____
77. _____	77. _____
78. _____	78. _____
79. _____	79. _____
80. _____	80. _____

<b>81. SUBTOTAL</b> (add lines 68 through 80)	<b>81.</b> _____
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<b>82. TOTAL MONTHLY EXPENSES:</b> (add lines 25, 35, 40, 46, 67, and 81 of Section II, Expenses)	<b>82.</b> _____
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**SUMMARY**

<b>83. TOTAL PRESENT MONTHLY NET INCOME</b> (from line 27 of SECTION I. INCOME)	<b>83.</b> _____
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<b>84. TOTAL MONTHLY EXPENSES</b> (from line 82 above)	<b>84.</b> _____
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<b>85. SURPLUS</b> (If line 83 is more than line 84, subtract line 84 from line 83. This is the amount of your surplus. Enter that amount here.)	<b>85.</b> _____
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<b>86. (DEFICIT)</b> (If line 84 is more than line 83, subtract line 83 from line 84. This is the amount of your deficit. Enter that amount here.)	<b>86.</b> _____
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**SECTION III: ASSETS AND LIABILITIES**

**A. ASSETS (This is where you list what you OWN.)**

**INSTRUCTIONS:**

**STEP 1:** In column A, list a description of each separate item owned by you (and/or your spouse, if this is a petition for dissolution of marriage). Blank spaces are provided if you need to list more than one of an item.

**STEP 2:** If this is a petition for dissolution of marriage, check the box in Column A next to any item that you are requesting the judge award to you.

**STEP 3:** In column B, write what you believe to be the current fair market value of all items listed.

**STEP 4:** Use column C only if this is a petition for dissolution of marriage and you believe an item is "nonmarital" meaning it belongs to only one of you and should not be divided. You should indicate to whom you believe the item belongs. (Typically, you will only use Column C if property was owned by one spouse before the marriage. See the instructions with this form and section 61.075(1), Florida Statutes, for definitions of "marital" and "nonmarital" assets and liabilities.)

<b>A</b> <b>ASSETS: DESCRIPTION OF ITEM(S)</b> <b>DO NOT LIST ACCOUNT NUMBERS</b> <input type="checkbox"/> the box next to any asset(s) which you are requesting the judge award to you.	<b>B</b> <b>Current Fair Market Value</b>	<b>C</b> <b>Nonmarital</b> ( <input type="checkbox"/> correct column )	
		husband	wife
<input type="checkbox"/> Cash (on hand)			
<input type="checkbox"/> Cash (in banks or credit unions)			
<input type="checkbox"/>			
<input type="checkbox"/> Stocks/Bonds			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> Notes (money owed to you in writing)			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> Money owed to you (not evidenced by a note)			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> Real estate: (Home)			
<input type="checkbox"/> (Other)			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> Business interests			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> Automobiles			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> Boats			
<input type="checkbox"/>			
<input type="checkbox"/>			

<input type="checkbox"/> Other vehicles			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> Retirement plans (Profit Sharing, Pension, IRA, 401(k)'s, etc.)			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> Furniture & furnishings in home			
<input type="checkbox"/>			
<input type="checkbox"/> Furniture & furnishings elsewhere			
<input type="checkbox"/>			
<input type="checkbox"/> Collectibles			
<input type="checkbox"/>			
<input type="checkbox"/> Jewelry			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> Life insurance (cash surrender value)			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> Sporting and entertainment (T.V., stereo, etc.) equipment			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> Other assets			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<b>Total Assets</b> (add column B)			

**B. LIABILITIES/ DEBTS (This is where you list what you OWE.)**

**INSTRUCTIONS:**

**STEP 1:** In column A, list a description of each separate debt owed by you (and/or your spouse, if this is a petition for dissolution of marriage). Blank spaces are provided if you need to list more than one of an item.

**STEP 2:** If this is a petition for dissolution of marriage, check the box in Column A next to any debt(s) for which you believe you should be responsible.

**STEP 3:** In column B, write what you believe to be the current amount owed for all items listed.

**STEP 4:** Use column C only if this is a petition for dissolution of marriage and you believe an item is "nonmarital," meaning the debt belongs to only one of you and should not be divided. You should indicate to whom you believe the debt belongs. (Typically, you will only use Column C if the debt was owed by one spouse before the marriage. See the instructions with this form and section 61.075(1), Florida Statutes, for definitions of "marital" and "nonmarital" assets and liabilities.)



**D. 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, debts assumed by another), you must list them here.

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

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

E. Has there been any agreement between you and the other party that one of you will take responsibility for a debt and will hold the other party harmless from that debt? ( ) yes ( ) no  
 If yes, explain:

**CHILD SUPPORT GUIDELINES WORKSHEET.** (Child Support Guidelines Worksheet, ☐☐ Florida Family Law Form 12.901(g), MUST be filed in all cases in which the parties have one or more children in common, INCLUDING modifications of child support.)  
[√ one only]

\_\_\_\_\_ **A Child Support Guidelines Worksheet IS being filed in this case.** The parties have one or more minor children in common **or** one of the parties is requesting a modification of a previous court order regarding child support.

\_\_\_\_\_ **A Child Support Guidelines Worksheet IS NOT being filed in this case.** There are no minor children common to the parties in this case **or**, if this case involves a modification of a previous court order, child support is not an issue.

**CERTIFICATE OF SERVICE**

**I HEREBY CERTIFY** that a true and correct copy of the foregoing was furnished by regular U.S Mail, on this \_\_\_ day of \_\_\_\_\_, 2011, to the following:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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.**

Signature of Party: \_\_\_\_\_

Dated this \_\_\_ day of \_\_\_\_\_, 2011.

Print Name: \_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

Sworn to or affirmed and signed before me on \_\_\_\_\_ by \_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC STATE OF FLORIDA

\_\_\_\_\_ Personally known  
\_\_\_\_\_ Produced identification  
\_\_\_\_\_ Type of identification produced

[Print, type, or stamp commissioned name of notary.]