

Financial Affidavit For Michael R Mallinkrodt

Court: Superior

Case Number: 43-77792

Michael R Mallinkrodt

v. Lisa S Mallinkrodt

SECTION I.

Name: Michael R Mallinkrodt
 Soc. Sec. No: 222-22-2222
 Date of Birth: 11/8/1970
 Address: 887 Haverness #17B
 City: Hartford
 State: CT
 Zip: 06018

SECTION II. INCOME

1. Monthly Salary.	6,667
2. Monthly Overtime, Tips, Bonus, Commission, etc..	0
3. Monthly Business/Partnership Income.	0
4. Monthly Pension, IRA, Annuity.	0
5. Monthly Interest & Dividends.	4
6. Monthly Social Security.	0
7. Monthly Unemployment, Disab., Workers' Comp.	0
8. Monthly Public Aid / Food Stamps.	0
9. Monthly Rental, Royalty.	0
10. Monthly Prior Alimony & Support Received.	0
11. Monthly Other Income.	0
12. <input type="text"/>	<input type="text"/>
13. Total Monthly Income (add lines 1-12). 13. \$	<input type="text" value="6,671"/>

SECTION III. DEDUCTIONS

14. Monthly Federal Tax.	1,165
15. Monthly State Tax.	301
16. Monthly Local Income Tax.	0
17. Monthly FICA & Medicare Tax.	510
18. Monthly Prior Support Obligation.	120
19. Monthly Prior Alimony Obligation.	250
20. Monthly Mandatory Retirement Contribution.	25
21. Monthly Union Dues.	15
22. Monthly Other (Health Insurance, Life Insurance).	0
23. <input type="text"/>	<input type="text"/>
24. Total Monthly Deductions. 24. \$	<input type="text" value="2,386"/>

25. Monthly Income After Deductions: **25. \$**

SECTION IV. AVERAGE EXPENSES

HOUSEHOLD EXPENSES:

27. Monthly Mortgage (first)	0	
28. Monthly Mortgage (second)	0	
29. Monthly Rent	1,100	
30. Monthly Condo Fee	0	
31. Monthly Local & Property Tax	0	
32. Monthly Electricity	0	
33. Monthly Oil / Heat Fuel	0	
34. Monthly Water/Sewer	0	
35. Monthly Gas or Propane for Heat	0	
36. Monthly Phone & Cell Phone	75	
37. Monthly Cable TV	60	
38. Monthly Internet Access	20	
39. Monthly Household Supplies, Cleaning, Maintenance, Paint, etc.	0	
40. Monthly Laundry & Dry Cleaning	20	
41. Monthly Homeowners' & Renters Insurance	0	
42. Monthly Lawn & Snow Service	0	
43. Monthly Trash Removal	0	
44. Monthly Furniture & Appliance Repair	0	
45. Monthly Other Household	0	
46. Monthly Other Utilities	0	
47. _____		
48. Total Monthly Household Expenses	48. \$	<u>1,275</u>

TRANSPORTATION EXPENSES:

49. Monthly Car Payments	329	
50. Monthly Car Insurance	0	
51. Monthly Car Gas, Maintenance, License	195	
52. Monthly Parking, Tolls, Public Transportation	59	
53. Monthly Other Transportation	0	
54. _____		
55. Total Monthly Transportation Expenses	55. \$	<u>583</u>

EXPENSES FOR CHILD(REN):

56. Monthly Child Care & Sitters	0	
57. Monthly Child Clothing	0	
58. Monthly Child Education Tuition	0	
59. Monthly Child Education Other	0	
60. Monthly Child Doctor, Dentist, Medication, etc.	0	
61. Monthly Child Groceries	0	
62. Monthly Child Tutors, Lessons, Supplies	0	
63. Monthly Child Allowance	0	
64. Monthly Child Vacation & Summer Camp	0	
65. Monthly Child Other	0	
66. _____		
67. Total Monthly Child Expenses	67. \$	<u>0</u>

PERSONAL EXPENSES:

68. Monthly Restaurants & Entertainment	217	
69. Monthly Food / Groceries	217	
70. Monthly Clothes	83	
71. Monthly Liquor, Beer, Wine	0	
72. Monthly Cigarettes	0	
73. Monthly Travel	0	
74. Monthly Vacations	0	

75. Monthly Bank Fees.	0
76. Monthly Charitable.	21
77. Monthly Church / Synagogue / Mosque etc.	0
78. Monthly Dues / Clubs.	0
79. Monthly Gifts.	80
80. Monthly Hair, Manicure, Pedicure.	0
81. Monthly Horseback Riding.	0
82. Monthly Lottery Tickets.	0
83. Monthly Employment Education, Travel, Uniforms.	0
84. Monthly Education.	0
85. Monthly Loan Payments, College.	0
86. Monthly Loan Payment Other.	0
87. Monthly Legal / Accounting Fees.	0
88. Monthly Life Insurance.	0
89. Monthly Personal Property Insurance.	0
90. Monthly Pets.	0
91. Monthly Stamps and Stationary.	0
92. Monthly Sports / Hobbies / Lessons.	0
93. Monthly Subscriptions, Books.	0
94. Monthly Therapist / Counselor.	0
95. Monthly Toiletries / Grooming / Drug Store.	0
96. Monthly Voluntary Retirement.	0
97. Monthly Other Personal.	0
98. <input type="text"/>	
99. Total Monthly Personal Expenses	99. \$ 618

HEALTH AND MEDICAL EXPENSES:

100. Monthly Health Insurance.	542
101. Monthly Dental Insurance.	130
102. Monthly Disability Insurance.	0
103. Monthly Medical / Doctor.	20
104. Monthly Optical.	0
105. Monthly Dental.	0
106. Monthly Drugs & Prescriptions.	70
107. Monthly Orthodontist.	0
108. <input type="text"/>	
109. Total Monthly Health and Medical Expenses	109. \$ 762

110. Total Monthly Expenses	110. \$ 3,238
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SUMMARY

111. Total Monthly Income.	111. \$ 6,671
112. Total Monthly Deductions.	111. \$ 2,386
113. Total Monthly Expenses	112. \$ 3,238
114. Monthly Income After Deductions and Expenses	113. \$ 1,047

Signature _____
 Dan Caine _____
 Prepared By

Date _____
 08/13/2004
 Date