

Affidavit of Income and Expenses, Assets and Liabilities

STATEMENT OF MONTHLY INCOME

Gross income from all sources last year \$ _____
 Gross income from all sources this year through _____ \$ _____

Gross Monthly Income

| | | |
|------------------------------------|----|------------------|
| Salary | \$ | 14,583 |
| Overtime | \$ | 0 |
| Bonus | \$ | 667 |
| Draw | \$ | 0 |
| Disability | \$ | 0 |
| Social Security | \$ | 0 |
| Unemployment | \$ | 0 |
| Rental income | \$ | 333 |
| Public Aid | \$ | 0 |
| Investment | \$ | 0 |
| Business | \$ | 0 |
| Partnership | \$ | 0 |
| Maintenance | \$ | 0 |
| Other: <u>Dividend</u> | \$ | 42 |
| Total Gross Monthly Income: | | \$ 15,625 |

Additional:

| | | |
|-------------------------|----|---|
| Child support | \$ | 0 |
|-------------------------|----|---|

Statutory deductions:

| | | |
|--|----|---------------|
| Federal Tax | \$ | 0 |
| State Tax | \$ | 0 |
| Social Security | \$ | 0 |
| Medicare Tax | \$ | 0 |
| Mandatory retirement contributions | \$ | 0 |
| Union dues | \$ | 0 |
| Medical Insurance | \$ | 0 |
| Prior obligations of support actually being paid | \$ | 200 |
| Other: _____ | \$ | 0 |
| Total Required Deductions From Income: | | \$ 200 |

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STATEMENT OF MONTHLY LIVING EXPENSES As of 11/3/2008**1. Household expenses**

| | | |
|---|----|-----------------|
| Mortgage or rent (specify): Mortgage | \$ | 200 |
| a. Home equity loan / second mortgage | \$ | 0 |
| b. Real estate taxes | \$ | 417 |
| c. Homeowners or renter's insurance | \$ | 67 |
| d. Heat / fuel | \$ | 100 |
| e. Electricity | \$ | 75 |
| f. Telephone | \$ | 50 |
| g. Cell phone | \$ | 50 |
| h. Cable TV | \$ | 40 |
| i. Water and Sewer | \$ | 42 |
| j. Computer / Internet | \$ | 20 |
| k. Garbage removal | \$ | 0 |
| l. Laundry / dry cleaning | \$ | 3 |
| m. Household maintenance | \$ | 750 |
| n. Food and household supplies | \$ | 217 |
| o. Eating out | \$ | 130 |
| p. Other: _____ | \$ | 0 |
| Total Household Expenses | | \$ 2,161 |

2. Transportation (number of vehicles 0)

| | | |
|--------------------------------------|----|---------------|
| a. Insurance / license | \$ | 83 |
| b. Gasoline | \$ | 130 |
| c. Repairs | \$ | 75 |
| d. Other: _____ Parking | \$ | 586 |
| Total Transportation Expenses | | \$ 874 |

3. Personal

| | | |
|--|----|---------------|
| Clothing | \$ | 67 |
| a. Grooming | \$ | 9 |
| b. Medical (after insurance): | | |
| i. Doctor | \$ | 0 |
| ii. Dentist | \$ | 0 |
| iii. Prescribed medicine | \$ | 87 |
| iv. Counseling | \$ | 0 |
| c. Life insurance | \$ | 0 |
| d. Medical insurance (not withheld from pay) | \$ | 500 |
| e. Dental insurance (not withheld from pay) | \$ | 0 |
| f. Other: _____ | \$ | 0 |
| Total Personal Expenses | | \$ 663 |

4. Miscellaneous:

| | | |
|---|----|---------------|
| a. Clubs / entertainment | \$ | 170 |
| b. Newspapers / magazines | \$ | 0 |
| c. Gifts | \$ | 42 |
| d. Donations | \$ | 166 |
| e. Vacations | \$ | 167 |
| f. Voluntary contributions to retirement pension | \$ | 0 |
| g. Other: <u>see attached Schedule A - Other Misc Expense</u> | \$ | 291 |
| Total Miscellaneous Expenses | | \$ 836 |

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5. Expenses of Minor and / or Dependent Children of this Marriage:

| | | |
|--|---|--------------------|
| a. Clothing | \$ | <u>0</u> |
| b. Grooming | \$ | <u>0</u> |
| c. Education | | |
| i. Tuition | \$ | <u>0</u> |
| ii. Books / fees | \$ | <u>0</u> |
| iii. Lunches | \$ | <u>0</u> |
| iv. Transportation | \$ | <u>0</u> |
| v. Activities | \$ | <u>0</u> |
| d. Allowance | \$ | <u>0</u> |
| e. Child care / before and after school care | \$ | <u>0</u> |
| f. Lessons and supplies | \$ | <u>0</u> |
| g. Summer Camps | \$ | <u>0</u> |
| h. Vacation | \$ | <u>0</u> |
| i. Entertainment | \$ | <u>0</u> |
| j. Other: | \$ | <u>0</u> |
| | | |
| | Total Children Separate Expenses | \$ <u>0</u> |

TOTAL MONTHLY LIVING EXPENSES: \$ 4,534

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Life insurance

| Company | Death benefit | Owner | Beneficiary | Whole / term | Value |
|----------------|----------------------|--------------|--------------------|---------------------|--------------|
| | | | | | |
| | | | | | |

Other assets

| Description | Ownership | Possessed by | Value |
|--------------------|------------------|---------------------|--------------|
| Paintings | Joint | Harold | 700 (1) |
| | | | |
| | | | |

Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil Procedure, the undersigned hereby certifies that the statements set forth in the foregoing Affidavit are true and correct.

Date signed: _____

Affiant

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Footnotes:

- (1) Paintings have sentimental value to Marianne

Affidavit of Income and Expenses, Assets and Liabilities

Affidavit of Income and Expenses, Assets and Liabilities - SCHEDULE A

Petitioner: Harold J Jones
Respondent: Marianne P Jones

Other Miscellaneous Expenses

| Description | Monthly Expense |
|--|-----------------|
| Legal and Accounting. | <u>200</u> |
| Toiletries / Grooming / Drug Store. | <u>87</u> |
| Bank fees. | <u>4</u> |
| Total: | <u>291</u> |