

**MADISON COUNTY CIRCUIT COURTS  
FINANCIAL DECLARATION**

1 Cause No. \_\_\_\_\_

2 Your name and address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3 Your GROSS monthly income: (if paid weekly, multiply by 4.3)

A. Salary and wages (including bonus and overtime pay)

Employer 1: \_\_\_\_\_

Employer 2: \_\_\_\_\_

B. Retirement or disability:

C. Child/Spousal support (for prior marriage)

D. Unemployment compensation (include SUB)

E. Public assistance or welfare:

F. All other sources (specify):

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

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

4 **TOTAL MONTHLY INCOME:**

\$ -

5 Deductions from gross income:

A. Taxes and FICA:

B. Support Order (for prior marriage or paternity):

C. Insurance (medical):

D. Union dues:

E. Other (specify):

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

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

6 **TOTAL DEDUCTIONS FROM GROSS:**

\$ -

7 **DISPOSABLE MONTHLY INCOME:** (#4 minus #6)

\$ -

8 List the names, ages and relationships of persons living in your household:

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

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9 Are other persons in your household working? Yes/No

If so, who: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10 Monthly expenses for your household: (pro-rate annual expenses)

- A. Rent or mortgage payment: \_\_\_\_\_
- B. Real estate taxes (residential): \_\_\_\_\_
- C. Real estate insurance (residential): \_\_\_\_\_
- D. Food and household supplies: \_\_\_\_\_
- E. Clothing: \_\_\_\_\_
- F. Utilities (electric, gas, water, trash): \_\_\_\_\_
- G. Telephone (land line/long distance): \_\_\_\_\_  
cellular or car phone: \_\_\_\_\_
- H. Insurance (life, auto): \_\_\_\_\_
- I. Car Payment: \_\_\_\_\_
- J. Gasoline for car: \_\_\_\_\_
- K. Installment debts (minimum monthly payments):

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

- L. Work-related childcare/daycare: \_\_\_\_\_
- M. Other expenses (specify):

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

11 **Total Monthly Expenses:** \$ \_\_\_\_\_ -

12 NET WORTH:

<b>Assets</b>	Fair Market Value	<b>Liabilities</b>	Balance Owing
Real Estate (home)	_____	Mortgage	_____
Real Estate (other)	_____	2nd Mortgage	_____
Household Goods	_____	Auto loan	_____
Auto: _____	_____	Auto loan	_____
_____	_____	_____	_____
Checking _____	_____	_____	_____
Checking _____	_____	_____	_____
Savings _____	_____	_____	_____
Savings _____	_____	_____	_____
Cred Union _____	_____	_____	_____
Retirement _____	_____	_____	_____
Retirement _____	_____	_____	_____
Life Ins CV _____	_____	_____	_____
Life Ins CV _____	_____	_____	_____
Stocks _____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
TOTAL:	\$ -	TOTAL:	\$ -

I certify under the penalties for perjury that the foregoing is true and accurate.

Date: \_\_\_\_\_

\_\_\_\_\_ Name