

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF KANSAS

_____)	
)	
Plaintiff(s),)	
)	
vs.)	Case No. _____
)	
_____)	
)	
Defendant(s).)	

AFFIDAVIT OF FINANCIAL STATUS¹

I, _____, state that I am the plaintiff in this case and that the following information regarding my current financial status is true.

I. PERSONAL DATA AND MARITAL STATUS:

A. My address: _____

My telephone: _____

My age: _____

B. Single: _____ Married: _____ Separated: _____ Divorced: _____

Spouse's name: _____

Spouse's age: _____

Spouse's address (if different from mine): _____

Spouse's telephone (if different from mine): _____

¹Access to this document is restricted pursuant to the court's policy to protect the personal privacy interest of the parties.

C. Names of dependents who live with me or who I am legally required to support financially:

Ages of dependents:

Relationship of dependents to me:

Amount of monthly support I give each dependent:

II. EMPLOYMENT

A. Currently employed? Yes ____ No ____

If currently employed:

Name of employer: _____

Address of employer: _____

Employer's telephone: _____

Length of employment: _____

Job title or description: _____

Net (take home) income: Monthly \$ _____ or Weekly \$ _____

Does employer provide health insurance? Yes ____ No ____

If employer provides health insurance, what kind?

B. Previous Employment (answer only if currently unemployed) .

Name of employer: _____

Address of employer: _____

Employer's telephone: _____

Length of employment: _____

Job title or description: _____

Net (take home) income: Monthly \$_____ or Weekly \$_____

C. Employment of spouse:

Name of employer: _____

Address of employer: _____

Employer's telephone: _____

Length of employment: _____

Job title or description: _____

Net (take home) income: Monthly \$_____ or Weekly \$_____

III. FINANCIAL STATUS

A. Do you or your spouse own real property? Yes ____ No ____

If yes -Description:

Address: _____

In whose name: _____

Estimated value \$_____

Total amount owed \$_____

Owed to: _____

Annual income from property \$_____

B. Do you or your spouse own any automobiles? Yes _____ No _____

If yes, number of automobiles owned: _____

Make _____ Model _____ Year _____

Make _____ Model _____ Year _____

In whose name registered: _____

Present value \$ _____

Amount owed on the automobile(s) \$ _____

Owed to: _____

Monthly payment(s) \$ _____

C. Total amount of cash on hand, in my checking account(s) or savings account(s):

\$ _____

If not joint account(s) with my spouse, total amount in my spouse's checking account(s) or savings account(s):

\$ _____

D. In the last 12 months, have you or your spouse received any money from any of the following sources?

	Yes	No	Amount
Unemployment benefits:	_____	_____	\$ _____
Welfare payments:	_____	_____	\$ _____
ADC or other governmental child support:	_____	_____	\$ _____
Social Security benefits:	_____	_____	\$ _____
Pensions, trust funds, annuities or life insurance payment:	_____	_____	\$ _____
Other gov't sources (example- Medicaid benefits):	_____	_____	\$ _____

Gifts or inheritances: _____ \$_____

Other sources (example-judgments in other cases or insurance proceeds): _____ \$_____

IV. OBLIGATIONS

A. Monthly mortgage or rental payment on house or apartment \$_____

B. Monthly mortgage payment(s) on other properties \$_____

Amount of equity in other properties \$_____

C. Monthly household expenses:

Grocery expense \$_____

Gas \$_____

Electric \$_____

Cable \$ _____

Phone (includes cell) \$ _____

Water \$_____

Car Insurance \$_____

Health Insurance \$ _____

Life Insurance \$_____

D. Other monthly debts and miscellaneous expenses (examples-credit cards, medical bills, alimony, child support, student loans, tax lien or other gov't liability).

To whom owed and for what reason incurred:	Monthly Payment	Balance Due
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_____	_____	_____
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V. OTHER INFORMATION PERTINENT TO FINANCIAL STATUS:

A. Have you ever filed for bankruptcy? Yes ____ No ____

B. Information regarding stocks, bonds, savings bonds, either owned individually or jointly.

I understand that a false statement or answer to any question in this affidavit will subject me to penalties of perjury.

Signature of Plaintiff

Name (Print or Type)

Address

City State Zip Code

Telephone