

FINANCIAL STATEMENT -INCOME

CAUSE NO. _____

DATE OF INFORMATION: _____

() Petitioner () Movant () Respondent

Attorney I Am Paid: () Monthly () Twice Monthly

Weekly

() Every Two Weeks ()

Next Pay Check Due: _____

Monthly Income

1. Employment Income (Include Bonuses, Commissions, Etc.)
 - a. Gross Income \$ _____
 - b. Withholding Tax \$ _____
 - c. Social Security & Medicare \$ _____
 - d. Other Deduction: \$ _____
 - e. Net Income (Subtract b,c&d from a) \$ _____
2. Self-Employment Income (Average)
 - a. Gross Income \$ _____
 - b. Business Expenses \$ _____
 - c. Est. Withholding Tax \$ _____
 - d. Est. Soc. Security Tax \$ _____
 - e. Net Self-Employment Income
(Subtract b,c,&d from a) \$ _____
3. Unemployment Benefits \$ _____
4. Worker's Compensation & Disability Benefits \$ _____
5. Social Security Benefits \$ _____
6. Interest, Divident & Royalty Income \$ _____
7. Net Rental Income \$ _____

8. Pension, Retirement & Annuity Income \$_____

9. Trust Income \$_____

10. Other Income \$_____

NET RESOURCES (Add 1e,2d,3,4,5,6,7,8,9,10) \$_____