

109 N. Palafox Street
Pensacola, Florida 32502

Telephone (850) 434-8904
Fax (850) 434-8922

**INSTRUCTIONS FLORIDA FAMILY LAW FORM 12.901(d)
FINANCIAL AFFIDAVIT: SHORT FORM**

Filling out these forms makes you figure out how much money you are paid, how much it costs you to live, what you own and what its worth, and what you owe. You should use Florida Family Law Form 12.901(d) if the money you get each year (your annual gross income), and the money you spend each year (annual expenses) ARE LESS THAN \$50,000. You should use Florida Family Law Form 12.901(e) if the money you get each year (your annual gross income) or the money you spend each year (annual expenses) IS \$50,000 OR IS MORE THAN \$50,000. See Florida Family Law Rule of Procedure 12.285.

SOME WORDS YOU NEED TO KNOW:

Affiant: the person who is signing the financial affidavit
Assets*: what you own
Debts/Liabilities*: what you owe

*See Appendix 2 of the Florida Family Law Rules of Procedure (available from CLE Publications, The Florida Bar) for more on what is a marital or non-marital asset and debt.

The court needs the facts in your financial affidavit to decide your case. It is very important that you fill in all the information as correctly and completely as you can.

To order **alimony**, the court must decide that the person who is asking for the alimony really needs the money and that the person being asked to pay it can afford to. The court must be able to write down facts that prove this. When filled out, the financial affidavit shows the court what your bills are and how much money there is to pay them.

The court **must** make specific, written findings of fact that address the factors list in section 61.08, Florida Statutes, when granting **or** denying a request for alimony.

To decide **child support**, the court must find out how much money each parent earns and any special needs the child(ren) may have. The court must be able to write these facts down in its order. When filled out, the financial affidavit gives the court these facts.

The court **must** make specific, written findings (say in its order exactly) why awarding the amount of child support required by Section 61.20, Florida Statutes, would be unjust or inappropriate if the amount awarded is different from the child support guidelines amount by plus or minus five percent (5%).

The court must write down in its order what you and your spouse own and owe and what it is worth to decide equitable distribution (the fair way to divide things between you) of your marital assets and debts*. The court also must write down all its reasons if it does not give each of you ½ of the assets and ½ of the debts. The financial affidavit tells the court about your assets and debts so it has the facts it needs to decide your case.

The court must make specific, written findings of fact that identify which assets are marital and which are non-marital*, identify each person's ownership interests, identify the value of each significant asset, state who will take what and address the factors list in section 61.075, Florida Statutes, explaining why the marital* assets and debts are being divided the way the order says and if the division is not equal, the exact reason(s) why it is not.

To decide attorney's fees, costs and suit money, the court needs to know that the person who is asking for the fees and costs really needs the money and that the person being asked to pay it can afford to. When filled out, the financial affidavit shows the court what your bills are and how much money there is to pay them.

The court must make specific, written findings of fact explaining why attorney's fees are being granted and explaining the basis of the amount awarded.

DOING THE MATH

These affidavits are based on MONTHLY paychecks and bills. Many people are not paid monthly and many bills (like daycare) are not paid monthly. To help you figure out what the MONTHLY payment is for something that is paid weekly or hourly do this:

Hourly wage X hours per week, X weeks per year, / 12 = monthly wage

Daily wage X days per week, X weeks per year, / 12 = monthly wage

Weekly wage X weeks per year, /12 = monthly wage

Bi-weekly wage x 26, /12 = monthly wage

Semi-monthly wage x 24, /12 = monthly wage

Bi-monthly wage x 6, /12 = monthly wage

Quarterly wage x 4, /12 = monthly wage

Semi-annual wage x 2, /12 = monthly wage

Annual wage /12 = monthly wage

HELPFUL FACTS

X multiplied by, times

/ divided by

Wages gross income, the money paid to a person before taxes, benefits or debts are taken out

There are 40 hours in the regular full time work week

There are 52 weeks a year

There are 12 months in a year

There are 7 days in a week

IN THE CIRCUIT COURT OF THE FIRST JUDICIAL CIRCUIT,
IN AND FOR _____, FLORIDA

Petitioner
And

Respondent.

Case No.: _____
Division: _____

FAMILY LAW FINANCIAL AFFIDAVIT (SHORT FORM)

STATE OF FLORIDA
COUNTY OF _____

BEFORE ME, this day personally appeared _____ who, being duly sworn, deposes and says that the following information is true and correct according to her best knowledge and belief:

EMPLOYMENT AND INCOME

OCCUPATION: _____
EMPLOYED BY: _____
ADDRESS: _____
SOC. SEC. #: _____ DATE OF BIRTH: _____
PAY PERIOD: _____ RATE OF PAY: _____ \$ PER HOUR

If you are employed, but expecting soon to become unemployed or change jobs, describe the change you expect and why and how it will affect your income. If currently unemployed, describe your efforts to find employment, how soon you expect to be employed, and the pay you expect to receive.

EXCEPT IN PROCEEDINGS FOR ADOPTION, SIMPLIFIED DISSOLUTION OF MARRIAGE, ENFORCEMENT, CONTEMPT, AND INJUNCTIONS FOR DOMESTIC OR REPEAT VIOLENCE, ALL OF THE FOLLOWING MUST BE ATTACHED TO THE COPY OF THIS FINANCIAL AFFIDAVIT SERVED ON THE OPPOSING PARTY. THE ATTACHMENTS SHALL NOT BE FILED WITH THE COURT: Your 3 most recent pay stubs, your most recent Federal tax return, and the most recent W-2 forms. If last year's Federal income tax return has not yet been filed, attach W-2s, 1099s, K-1s, and any other documents to be attached to your tax return. If the attachments are not made to the copy served on the opposing party, an explanation is required UNLESS THE PARTIES HAVE AGREED THAT THEY WILL NOT GIVE EACH OTHER THESE DOCUMENTS.

LAST YEAR'S INCOME

	Yours	Other Party (if known)
1. Gross earned income last calendar year (2007)	\$ _____	\$ _____
2. All other income (same year)	\$ _____	\$ _____
3. Total income taxes paid on above income (incl. Fed., FICA)	\$ _____	\$ _____
4. Net Income	\$ _____	\$ _____

AVERAGE GROSS MONTHLY INCOME FROM EMPLOYMENT

(Attach more paper if needed. Items included under "other" should be listed separately with separate dollar amounts.)

Present gross income from employment	\$ _____
Bonuses, commissions, allowances, overtime, tips, and similar payments	\$ _____
Business income from sources such as self-employment, partnership, close corporations, and/or independent contracts (gross receipts minus ordinary and necessary expenses required to produce income)	\$ _____
Disability benefits	\$ _____
Workers' compensation	\$ _____
Unemployment compensation	\$ _____
Pension, retirement or annuity payments	\$ _____
Social Security benefits	\$ _____
Spousal support from previous marriage	\$ _____
Interest and dividends	\$ _____
Rental income (gross receipts minus ordinary and necessary expenses required to produce income)	\$ _____
Income from royalties, trust, or estates	\$ _____

Reimbursed expenses and in kind payments to the extent that they reduce personal living expenses \$ _____

Gains derived from dealing in property (not including nonrecurring gains) \$ _____

Itemize any other income of a recurring nature \$ _____

TOTAL GROSS MONTHLY INCOME \$ _____

LESS MONTHLY DEDUCTIONS

Federal, state, and local income taxes (corrected for filing status and actual number of with-holding allowances) \$ _____

FICA or self-employment tax (annualized) \$ _____

Mandatory union dues \$ _____

Mandatory retirement \$ _____

Health insurance payments \$ _____

Court ordered support payments for the children actually paid \$ _____

TOTAL DEDUCTIONS \$ _____

TOTAL NET INCOME \$ _____

AVERAGE MONTHLY EXPENSES

HOUSEHOLD -

Mortgage or rent payment \$ _____

Property taxes/insurance \$ _____

Electricity \$ _____

Water, garbage & sewer \$ _____

Telephone \$ _____

Fuel, oil or natural gas \$ _____

Repairs and maintenance \$ _____

Lawn and pool care \$ _____

Pest control \$ _____

Misc. household \$ _____
Food and grocery items \$ _____

Meals outside home \$ _____

TOTAL \$ _____

AUTOMOBILE -

Gasoline and oil \$ _____

Repairs \$ _____

Auto tags and license \$ _____

Insurance \$ _____

Car payment \$ _____

TOTAL \$ _____

CHILDREN(REN)'S EXPENSES-

Day Care \$ _____

Lunch Money \$ _____

Clothing \$ _____

Grooming \$ _____

Gifts for Holidays \$ _____

Medical/Dental (uninsured) \$ _____

TOTAL \$ _____

OTHER EXPENSES NOT LISTED ABOVE -

Dry cleaning\laundry \$ _____

Clothing \$ _____

Medical\dental\Rx \$ _____

Beauty parlor\barber \$ _____

Gifts \$ _____

Pet food \$ _____

Pet grooming \$ _____

Pet veterinarian \$ _____

Membership dues \$ _____

Professional dues \$ _____

Social dues \$ _____

Entertainment \$ _____

Vacations \$ _____

Publications \$ _____

Church and charities \$ _____

Miscellaneous \$ _____

TOTAL \$ _____

TOTAL EXPENSES \$ _____

PAYMENTS TO CREDITORS

TO WHOM:	BALANCE DUE	MONTHLY
TOTAL PAYMENTS TO CREDITORS:	\$ _____	\$ _____
TOTAL MONTHLY EXPENSES:	\$ _____	\$ _____

ASSETS

(OWNERSHIP: IF MARITAL, PUT ONE-HALF OF THE TOTAL VALUE UNDER PETITIONER AND ONE-HALF UNDER RESPONDENT NO MATTER WHOSE NAME THE ITEM IS IN.)

Description	Value	Petitioner	Respondent
Cash on hand	\$ _____	\$ _____	\$ _____
Cash in banks	\$ _____	\$ _____	\$ _____
Stocks/bonds	\$ _____	\$ _____	\$ _____
Notes	\$ _____	\$ _____	\$ _____
Real estate	\$ _____	\$ _____	\$ _____
Home	\$ _____	\$ _____	\$ _____
LOT	\$ _____	\$ _____	\$ _____
Auto	\$ _____	\$ _____	\$ _____
make and model	\$ _____	\$ _____	\$ _____
Other personal property:			
Contents of Home	\$ _____	\$ _____	\$ _____
Jewelry	\$ _____	\$ _____	\$ _____
Life ins./cash	\$ _____	\$ _____	\$ _____
surrender value	\$ _____	\$ _____	\$ _____
Other assets:			
RETIREMENT	\$ _____	\$ _____	\$ _____
TOTAL ASSETS:	\$ _____	\$ _____	\$ _____

LIABILITIES

Creditor	Balance	Husband	Wife
HOME MORTGAGE	\$ _____	\$ _____	\$ _____
TOTAL:	\$ _____	\$ _____	\$ _____

NET WORTH

Total Assets \$ _____

Less: Total Liabilities
(excluding contingent liabilities)* \$ _____

Net Worth \$ _____

E. CHILD SUPPORT GUIDELINES WORKSHEET. Florida Family Law Rules of Procedure Form 12.902(e), Child Support Guidelines Worksheet, MUST be filed with the court at or prior to a hearing to establish or modify child support. This requirement cannot be waived by the parties.

[one only]

A Child Support Guidelines Worksheet IS or WILL BE filed in this case. This case involves the establishment or modification of child support.

A Child Support Guidelines Worksheet IS NOT being filed in this case. The establishment or modification of child support is not an issue in this case

* If there is a claim for contingent liabilities, it should be set forth in a separate schedule attached.

I AM AWARE THAT ANY MATERIALLY FALSE STATEMENT KNOWINGLY MADE WITH THE INTENT TO DEFRAUD OR MISLEAD SHALL SUBJECT ME TO THE PENALTY FOR PERJURY AND MAY BE CONSIDERED A FRAUD UPON THE COURT.

I CERTIFY THAT THE FAMILY LAW FINANCIAL AFFIDAVIT(SHORT FORM) WAS: mailed,

telefaxed and mailed, or hand delivered to the person(s) listed below on _____

* If there is a claim for contingent liabilities, it should be set forth in a separate schedule attached.

I AM AWARE THAT ANY MATERIALLY FALSE STATEMENT KNOWINGLY MADE WITH THE INTENT TO DEFRAUD OR MISLEAD SHALL SUBJECT ME TO THE PENALTY FOR PERJURY AND MAY BE CONSIDERED A FRAUD UPON THE COURT.

I CERTIFY THAT THE FAMILY LAW FINANCIAL AFFIDAVIT(SHORT FORM) WAS: ___mailed, ___telexed and mailed, or ___ hand delivered to the person(s) listed below on _____

Party or Attorney if represented:

Other:

Name _____
Address _____
City _____ State _____ Zip _____
Telephone No. _____
Telefax No. _____

Name _____
Address _____
City _____ State _____ Zip _____
Telephone No. _____
Telefax No. _____

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this affidavit and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Dated: _____

Signature of Party

Printed Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

Fax Number: _____

**STATE OF FLORIDA
COUNTY OF**

Sworn to or affirmed and signed before me on this _____

_____, 20____, by _____

NOTARY PUBLIC
STATE OF FLORIDA

COMMISSION

(check one only)

___ Personally known

___ Produced Identification

Type of Identification Produced