

Compliance Use Only

Approved

Denied

Clerk Initials _____

Financial Information

(Please Print)

Case #: _____

Full Name: _____

Date of Birth: / /

Telephone: () -

Residence Address: _____

Mailing Address (if different from above): _____

Social Security Number: _____

Driver's License Number: _____

Marital Status: Single Married Divorced Separated Widowed

Spouse's Name: _____

Number of Children under 18 _____

Ages: _____

Employment and Income

Currently Employed? Yes No Yrs at Job _____

Source of Income/Employer _____

Address: _____

Telephone: () -

Job Title: _____

Gross Salary per Month: \$ _____

Total Monthly Deductions: \$ _____

Net Salary per Month: \$ _____

Other Income (List Source & Amount):

Child Support: \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total Monthly Income: → \$ _____

Monthly Expenses:

Rent or House Payment: \$ _____

Food: \$ _____

Utilities: Phone, PGE, Gas \$ _____

Cable/Cell Phone \$ _____

Transportation: Gas \$ _____

Transportation: Car pymt/Insurance \$ _____

Clothing/Laundry: \$ _____

Medical Expenses: \$ _____

Child Support: \$ _____

Other Court fines: \$ _____

Creditors:

Name	Balance Owed	Monthly Payment
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

Spouse/Other Employment and Income

Currently Employed? Yes No Yrs at Job _____

Spouse's Employer: _____

Address: _____

Telephone: () -

Job Title: _____

Gross Salary per Month: \$ _____

Total Monthly Deductions: \$ _____

Net Salary per Month: \$ _____

Other Income (List Source & Amount):

Child Support \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total Monthly Income: → \$ _____

Assets (List Current Value)

Real Estate 1: \$ _____

Address: _____

Real Estate 2: \$ _____

Address: _____

Vehicle 1: \$ _____

Make: _____ Model: _____

Vehicle 2: \$ _____

Make: _____ Model: _____

Life Insurance: \$ _____

Checking Account(s): \$ _____

Bank: _____ Branch: _____

Savings Account(s): \$ _____

Other Assets (List):

_____ \$ _____

_____ \$ _____

Total Assets: \$ _____

Net Assets (Assets - Liabilities): → \$ _____

I certify that the foregoing is a complete and accurate statement of my financial situation and that I have no other additional income or assets whatsoever. You have my express permission to verify the information I have furnished. I declare under penalty of perjury that the foregoing is true and correct.

(Date)

(Signature of Defendant)