

How to File an Answer to a Divorce Complaint (Without Children)

It is best to hire an attorney to help you if you can afford it. If you cannot afford an attorney, this packet can provide you with information on how to answer the divorce Complaint so that you will have an opportunity to tell your side in Court. **It is very important that you file an Answer to the Complaint, that you attend every hearing, and that you keep the Court and your spouse's attorney aware of your current address.**

I. You must answer the Complaint within 28 days of the date you were served:

- A. The first page is usually the Summons. It demands that you Answer the Complaint within **28 days after you are served with the Summons**. You must file your Answer within 28 days after you received the Summons and Complaint.

- B. The Divorce Complaint against you should be immediately after the Summons. Read the Complaint carefully. If you do not Answer the Complaint **in writing within 28 days** after you receive it, the Court may believe what the Complaint says is true, and your spouse could get a divorce from you and get everything he or she has asked for from the Court. If you do not file an Answer and do not go to the final hearing, then you will not get your day in Court. **It is very important that you keep the Court and your spouse's attorney informed regarding your current address so that you will receive notice of all Court hearings. If your spouse is not represented by an attorney, then keep your spouse informed of any address change.**

II. How to prepare your written Answer:

- A. Prepare a written Answer to the Complaint by typing or neatly writing your Answer.

- B. Your Answer tells the Court what you believe is wrong in the Complaint and what you would like the Court to do for you in the divorce. Blank lines have been provided in the attached Answer form for you to use.

- C. Go through the Complaint paragraph by paragraph to see if the Complaint says anything you believe is wrong. For example, if the

Complaint has the wrong marriage date, you should state in your Answer the correct date of marriage. Or if the Complaint says there are no debts from the marriage and you do not believe this is true, you should type or write in the blank lines of your Answer that there are debts from the marriage and list them.

- D. Finally you should also write or type in your Answer what you would like the Court to do for you. Below are some things you may ask the Court to do for you:
1. Order your spouse to help support you, including providing health insurance;
 2. Divide up the marital property and debts;
 3. Order your spouse to pay some or all of the marital debts;
 4. Order your spouse to give you a part of any pensions or retirement benefits, and/or
 5. Change your name to a former or maiden name.
- E. At the end of the Answer, **sign your name**.
- F. Complete the Certificate of Service by filling in the name and address of your spouse's lawyer (or your spouse's name and address if your spouse filed the divorce him/herself).
- G. **Please note:** Other documents need to be filed with your Answer. You should complete those documents, and if they are required to be notarized, you must sign them in front of a notary. You will be copying, serving and filing those documents with your Answer in the same way and at the same time as your Answer. This packet includes an Affidavit of Income and Expenses and an Affidavit of Property, which must be filed with your Answer.

III. How to serve and to file your Answer and any other documents:

- A. After you have prepared and signed your Answer and any other documents included, you need to make two copies of all documents. That same day, mail one set of these copies to the attorney who signed the Divorce Complaint against you or your spouse if he or she filed the Complaint without an attorney. Although you do not have to mail the Answer by certified mail, you may want to ask the post office to provide

you with a Certificate of Mailing, which proves that you mailed the Answer on the date it was mailed, to the person to whom it was addressed.

- B. **Within 3 days** of mailing one copy of all documents to the attorney who filed the Complaint against you or your spouse, you must take the original of your Answer and your remaining copies to the Clerk of the Common Pleas Court that served the papers on you. Be sure that you go to the Common Pleas Court where the Complaint was filed. Take the Complaint with you to the Clerk's office and show it to the Clerk to confirm that you are in the right place. Then give the Clerk **both** your original Answer (and all other documents) and **your copies**. Ask the Clerk to file-stamp the original(s) and the copies and to give you a copy back of everything that you filed.
- C. The Clerk will then keep the original(s), which will go into the Court file so that the Court can read it. The file-stamped copies should be returned to you by the Clerk. Keep your filed-stamped copies in a safe place because it is your proof that you filed your Answer in the place and on the date shown in the file stamp. It is like a receipt.
- D. Be prepared to pay a filing fee. This is to be paid in cash, check, money order or debit/credit card. The amount of the filing fee can be obtained at <http://www.co.tuscarawas.oh.us/Courts/legal-information> or by calling the Clerk of Court's office at 330-365-3243. If you do not have the money to pay the filing fee, you may complete and file the Petition for Waiver of Filing Fee and Court Cost Deposit and Affidavit in Support available on the Court website. You still may have to pay court costs after the action is decided.

IV. And then what?

- A. After you are done with all this, the Court will have your Answer, the person who filed the Complaint against you will have a copy of your Answer, and you will have a copy of your Answer with proof that you have filed the original with the Court. Everyone will know where you stand and what you want from the divorce. The Court will then keep you updated on what happens in your case, and the person who filed the

Complaint against you will know where to send any additional papers that he or she may file with the Court.

- B. You must keep the Court and your spouse (or your spouse's attorney) up-to-date on what your current address is and what your telephone number is, if you have a phone number. This is so the Court and the other side can continue to communicate with you. If you move and do not tell the Court or the other side, they will not look for you. If any of the information you gave the Court in your Answer changes, file another notice with the new information to the Clerk with the case number and parties' names and send a copy to the other side.
- V. **Important! If you are sent any documents from the Court to complete, you must do so by the time specified. You must cooperate with all Court requests. If you receive any document with a Notice of Hearing, you should go to that hearing.**
- A. The Court may schedule your case for what is called a pretrial hearing. This is a meeting with the Court and the people involved in the case to see what issues in the divorce you and your spouse agree on and what issues you disagree on. The Court will also decide how long the final hearing will take and what issues need to be decided.
 - B. Eventually, the Court will schedule your case for a final divorce hearing. At the hearing, you will have the opportunity to present witnesses (including yourself) and other evidence (such as copies of unpaid bills from the marriage or documents showing your spouse has a pension) about the statements in the Complaint and about what you want from the divorce. After hearing evidence from both sides and deciding what evidence is admissible and what is not, the Court will make a decision. Sometimes the Court gives its decision "from the bench" immediately after the hearing, or the Court gives the decision later, after having an opportunity to think about the case.

**In the Court of Common Pleas
Tuscarawas County, Ohio**

_____ :
Plaintiff : Case No. _____
Address: _____ : Judge _____
_____ :
Phone: _____ :
: **Defendant's Answer**
Plaintiff, :
vs. :
: :
_____ :
Defendant :
Address: _____ :
_____ :
Phone: _____ :
: :
Defendant. :
:

I, the Defendant, agree with the following statements made in the complaint:

I, the Defendant, deny or disagree with the following statements made in the

Complaint: _____

_____.

I ask the Court to:

- Grant me a divorce.
- Equitably divide our debts and property.
- Change my name to _____.
- Other requests:

I swear that the information contained in this Answer is true and correct to the best of my information and belief.

(Signature)

Certificate of Service

A copy of the this document was served upon Plaintiff or Plaintiff's attorney at
the following address: _____
by ordinary U.S. Mail, postage pre-paid, the _____ day of _____, 20 _____.

(Signature)

COURT OF COMMON PLEAS
TUSCARAWAS COUNTY, OHIO

Plaintiff	Case No. _____
Address	Judge _____
Phone	Magistrate _____

v./and

Defendant _____

Address _____

Phone _____

Instructions: Check local court rules to determine when this form must be filed.
List ALL OF YOUR PROPERTY AND DEBTS, the property and debts of your spouse, and any joint property or debts. Do not leave any category blank. For each item, if none, put "NONE." If you do not know exact figures for any item, give your best estimate, and put "EST." **If more space is needed, add additional pages.**

AFFIDAVIT OF PROPERTY

Affidavit of _____
(Print Your Name)

I. REAL ESTATE INTERESTS

	<u>Address</u>	<u>Present Fair Market Value</u>	<u>Titled To</u>	<u>Mortgage Balance</u>	<u>Equity (as of date)</u>
1.	_____	\$ _____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____	\$ _____
2.	_____	\$ _____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____	\$ _____
TOTAL SECTION I: REAL ESTATE INTERESTS					\$ _____

II. OTHER ASSETS

<u>Category</u>	<u>Description</u> (List who has possession)	<u>Titled To</u>	<u>Value/Date of Value</u>
A. Vehicles and Other Certificate of Title Property			
	(Include model and year of automobiles, trucks, motorcycles, boats, motors, motor homes, etc.)		
1.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
2.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
3.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
4.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
5.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
6.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
B. Financial Accounts			
	(Include checking, savings, CDs, POD accounts, money market accounts, etc.)		
1.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
2.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
3.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
4.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____

<u>Category</u>	<u>Description</u> (List who has possession) (Include profit-sharing, IRAs, 401k plans, etc.; Describe each type of plan)	<u>Titled To</u>	<u>Value/Date of Value</u>
C. Pensions & Retirement plans			
1.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
2.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
3.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
4.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____

D. Publicly Held Stocks, Bonds, Securities & Mutual Funds			
1.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
2.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
3.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
4.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____

<u>Category</u>	<u>Description</u> (List who has possession) (Type of ownership and number)	<u>Titled To</u>	<u>Value/Date of Value</u>
E. Closely Held Stocks & Other Business Interests and Name of Company			
1.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
2.	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____

**F. Life Insurance Type
(Term/Whole Life)**

(Any cash value or loans)

(Insured party
& value upon death)

1.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
	_____	_____		_____
2.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
	_____	_____		_____
3.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
	_____	_____		_____
4.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
	_____	_____		_____

Category

Description

Who Has Possession

Value/Date of Value

G. Furniture & Appliances

(Estimate value of those in your possession, and value of those in your spouse's possession)

1.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
	_____	_____		_____
2.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
	_____	_____		_____
3.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
	_____	_____		_____
4.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
	_____	_____		_____

H. Safe Deposit Box

(Give location and describe contents)

Titled To

1.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
	_____	_____		_____
2.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$ _____
	_____	_____		_____

I. Transfer of Assets

Explanation: List the name and address of any person (other than creditors listed on your Affidavit) who has received money or property from you exceeding \$300 in value in the past 12 months and the reason for each transfer.

1.			<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$	
2.			<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$	
3.			<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$	
4.			<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$	

<u>Category</u>	<u>Description</u> (Also list who has possession)	<u>Titled To</u>	<u>Value/Date of Value</u>
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J. All Other Assets Not Listed Above **Explanation:** List any item you have not listed above that is considered an asset.

1.			<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$	
2.			<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	\$	

TOTAL SECTION II: OTHER ASSETS \$ _____

III. SEPARATE PROPERTY CLAIMS: Pre-marital assets, gifts to one spouse only, inheritances

If you are making any claims in any of the categories below, explain the nature and amount of your claim. **This includes, but is not limited to, inheritances, property owned before marriage, and any pre-marital agreements.**

<u>Category</u> (Pre-marital Gift, Inheritance, etc., acquired after separation)	<u>Description</u>	<u>Why do you claim this as a separate property?</u>	<u>Present Fair Market Value</u>
1. _____	_____	_____	\$ _____
2. _____	_____	_____	\$ _____
3. _____	_____	_____	\$ _____
4. _____	_____	_____	\$ _____
5. _____	_____	_____	\$ _____

TOTAL SECTION III: SEPARATE PROPERTY CLAIMS \$ _____

IV. DEBT

List ALL OF YOUR DEBTS, the debts of your spouse, and any joint debts. Do not leave any category blank. For each item, if none, put "NONE." If you don't know exact figures for any item, give your best estimate, and put "EST." **If more space is needed to explain, please attach an additional page with the explanation and identify which question you are answering.**

<u>Type</u>	<u>Name of Creditor/Purpose of Debt</u>	<u>Account Name</u>	<u>Name(s) on Account</u>	<u>Total Debt Due</u>	<u>Monthly Payment</u>
A. Secured Debt (Mortgages, Car, etc.)					
1.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Joint	\$ _____	\$ _____
2.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Joint	\$ _____	\$ _____
3.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Joint	\$ _____	\$ _____
4.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Joint	\$ _____	\$ _____
5.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Joint	\$ _____	\$ _____
B. Unsecured Debt, including credit cards					
1.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Joint	\$ _____	\$ _____
2.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Joint	\$ _____	\$ _____
3.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Joint	\$ _____	\$ _____
4.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Joint	\$ _____	\$ _____
5.	_____	_____	<input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Joint	\$ _____	\$ _____
TOTAL SECTION IV: DEBT				\$ _____	_____

V. BANKRUPTCY

Filed by:	<u>Date of Filing: Case Number</u>	<u>Date of Discharge or Relief from Stay</u>	<u>Type of Case (Ch. 7, 11, 12, 13)</u>	<u>Current Monthly Payments</u>
1. <input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	_____	_____	_____	\$ _____
2. <input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Both	_____	_____	_____	\$ _____
TOTAL SECTION V: BANKRUPTCY				\$ _____

OATH

(Do Not Sign Until Notary is Present)

I, (print name) _____ swear or affirm that I have read this document and, to the best of my knowledge and belief, the facts and information stated in this document are true, accurate and complete. I understand that if I do not tell the truth, I may be subject to penalties for perjury.

Your Signature

Sworn before me and signed in my presence this ____ day of _____, _____.

Notary Public

My Commission Expires:

**COURT OF COMMON PLEAS
TUSCARAWAS COUNTY, OHIO**

Plaintiff		Case No.
Address		Judge
Phone		Magistrate

v./and

Defendant
Address
Phone

Instructions: Check local court rules to determine when this form must be filed. This affidavit is used to make complete disclosure of income, expenses and money owed. It is used to determine child and spousal support amounts. Do not leave any category blank. Write "none" where appropriate. If you do not know exact figures for any item, give your best estimate, and put "EST." **If you need more space, add additional pages.**

AFFIDAVIT OF INCOME AND EXPENSES

Affidavit of _____
(Print Your Name)

Date of marriage _____ Date of separation _____

SECTION I - INCOME

	<u>Plaintiff</u>	<u>Defendant</u>
Employed	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Employer		
Payroll address		
Payroll city, state, zip		
Scheduled paychecks per year	<input type="checkbox"/> 12 <input type="checkbox"/> 24 <input type="checkbox"/> 26 <input type="checkbox"/> 52	<input type="checkbox"/> 12 <input type="checkbox"/> 24 <input type="checkbox"/> 26 <input type="checkbox"/> 52

A. YEARLY INCOME, OVERTIME, COMMISSIONS AND BONUSES FOR PAST THREE YEARS

	<u>Plaintiff</u>	<u>Defendant</u>
Base yearly income	\$ _____ 3 years ago 20 _____	\$ _____
	\$ _____ 2 years ago 20 _____	\$ _____
	\$ _____ Last year 20 _____	\$ _____
Yearly overtime, commissions	\$ _____ 3 years ago 20 _____	\$ _____

and/or bonuses

\$		2 years ago	20		\$	
\$		Last year	20		\$	

B. COMPUTATION OF CURRENT INCOME

	Plaintiff	Defendant
Base yearly income	\$	\$
Average yearly overtime, commissions and/or bonuses over last 3 years (from part A)	\$	\$
Unemployment compensation	\$	\$
Disability benefits		
<input type="checkbox"/> Workers' Compensation		
<input type="checkbox"/> Social Security		
<input type="checkbox"/> Other: _____	\$	\$
Retirement benefits		
<input type="checkbox"/> Social Security		
<input type="checkbox"/> Other: _____	\$	\$
Spousal support received	\$	\$
Interest and dividend income (source)		
_____	\$	\$
_____	\$	\$
Other income (type and source)		
_____	\$	\$
_____	\$	\$
TOTAL YEARLY INCOME	\$	\$
Supplemental Security Income (SSI) or public assistance	\$	\$
Court-ordered child support that you receive for minor and/or dependent child(ren) not of the marriage or relationship	\$	\$

SECTION II – CHILDREN AND HOUSEHOLD RESIDENTS

Minor and/or dependent child(ren) who are adopted or born of this marriage or relationship:

Name	Date of birth	Living with
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

In addition to the above children there is/are in your household:

_____ adult(s)
 _____ other minor and/or dependent child(ren).

SECTION III – EXPENSES

List monthly expenses below for your present household.

A. MONTHLY HOUSING EXPENSES

Rent or first mortgage (including taxes and insurance)	\$	_____
Real estate taxes (if not included above)	\$	_____
Real estate/homeowner’s insurance (if not included above)	\$	_____
Second mortgage/equity line of credit	\$	_____
Utilities		
o Electric	\$	_____
o Gas, fuel oil, propane	\$	_____
o Water and sewer	\$	_____
o Telephone	\$	_____
o Trash collection	\$	_____
o Cable/satellite television	\$	_____
Cleaning, maintenance, repair	\$	_____
Lawn service, snow removal	\$	_____
Other: _____	\$	_____
	\$	_____
TOTAL MONTHLY :		\$ _____

B. OTHER MONTHLY LIVING EXPENSES

Food	
o Groceries (including food, paper, cleaning products, toiletries, other)	\$ _____
o Restaurant	\$ _____
Transportation	
o Vehicle loans, leases	\$ _____
o Vehicle maintenance (oil, repair, license)	\$ _____
o Gasoline	\$ _____
o Parking, public transportation	\$ _____
Clothing	
o Clothes (other than children's)	\$ _____
o Dry cleaning, laundry	\$ _____
Personal grooming	
o Hair, nail care	\$ _____
o Other	\$ _____
Cell phone	\$ _____
Internet (if not included elsewhere)	\$ _____
Other	\$ _____
TOTAL MONTHLY	
	\$ _____

C. MONTHLY CHILD-RELATED EXPENSES
(for children of the marriage or relationship)

Work/education-related child care	\$ _____
Other child care	\$ _____
Unusual parenting time travel	\$ _____
Special and unusual needs of child(ren) (not included elsewhere)	\$ _____
Clothing	\$ _____
School supplies	\$ _____
Child(ren)'s allowances	\$ _____
Extracurricular activities, lessons	\$ _____
School lunches	\$ _____
Other	\$ _____
TOTAL MONTHLY	
	\$ _____

D. INSURANCE PREMIUMS

Life	\$	_____
Auto	\$	_____
Health	\$	_____
Disability	\$	_____
Renters/personal property (if not included in part A above)	\$	_____
Other _____	\$	_____
TOTAL MONTHLY		\$ _____

E. MONTHLY EDUCATION EXPENSES

Tuition		
o Self	\$	_____
o Child(ren)	\$	_____
Books, fees, other	\$	_____
College loan repayment	\$	_____
Other _____	\$	_____
	\$	_____
TOTAL MONTHLY:		\$ _____

F. MONTHLY HEALTH CARE EXPENSES
(not covered by insurance)

Physicians	\$	_____
Dentists	\$	_____
Optometrists/opticians	\$	_____
Prescriptions	\$	_____
Other _____	\$	_____
	\$	_____
TOTAL MONTHLY:		\$ _____

G. MISCELLANEOUS MONTHLY EXPENSES

Extraordinary obligations for other minor/handicapped child(ren) (not stepchildren)	\$	_____
Child support for children who were not born of this marriage or relationship and were not adopted of this marriage	\$	_____
Spousal support paid to former spouse(s)	\$	_____
Subscriptions, books	\$	_____
Entertainment	\$	_____

OATH

(Do not sign until notary is present.)

I, (print name) _____, swear or affirm that I have read this document and, to the best of my knowledge and belief, the facts and information stated in this document are true, accurate and complete. I understand that if I do not tell the truth, I may be subject to penalties for perjury.

Your Signature

Sworn before me and signed in my presence this ____ day of _____, _____.

Notary Public
My Commission Expires:
