

STATE OF MICHIGAN	FINANCIAL STATEMENT	CASE NO. and JUDGE
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Court address _____ **Court telephone no.** _____

PERSONAL INFORMATION							
Name (last, first, middle)					Date of birth		SSN (last 4 digits)
Address <input type="checkbox"/> house <input type="checkbox"/> apartment <input type="checkbox"/> lot no.				City		Zip	
Home phone no.		Work phone no.		Cellular phone no.		Driver's license no.	
				State		E-mail address	
Mailing address (if different than above)				Marital status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced If divorced, date final _____			
Name and address of nearest living relative				Relationship		Phone no.	
Names of dependents			Dates of birth		Student (Yes/No)		College/University
Employer 1 (Company name and address)						Length of employment	
Employer 2 (Company name and address)						Length of employment	
If self-employed, type of business/trade				If unemployed, source of support <input type="checkbox"/> General assistance <input type="checkbox"/> SSI <input type="checkbox"/> Food stamps <input type="checkbox"/> AFDC			
Have you ever filed for bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No				If yes, date filed		Date completed	
ASSETS							
Vehicle #1			Year / Make			Present value	
						\$	
Vehicle #2			Year / Make			Present value	
						\$	
Bank/Financial account no.			Name and address of financial institution			Present balance	
						\$	
Investment/Brokerage account no.			Name and address of financial institution			Present balance	
						\$	
Other property such as real estate, boats, snowmobiles (describe)						Value	
						\$	
TOTAL ASSETS						\$	

MONTHLY INCOME	
Gross monthly income (self)	\$
Gross monthly income (spouse)	\$
Unemployment benefits	\$
Social security	\$
Retirement/Pension benefits	\$
Child support	\$
Alimony/Maintenance	\$
Disability	\$
Veteran's benefits	\$
Interest/Dividends	\$
Other (cash):	\$
TOTAL INCOME	\$

MONTHLY EXPENSES	
Mortgage or rent	\$
Utilities	\$
Vehicle payments	\$
Insurance (vehicle/health/life)	\$
Other loan payments	\$
Child support/Alimony	\$
Medical payments	\$
Court payments	\$
Other:	\$
TOTAL EXPENSES	\$

Financial Report Authorization: I authorize the court, the court's funding unit, and their employees or agents to obtain a consumer credit report and other financial information about me from a consumer credit reporting agency or any other entity.

I certify under penalty of perjury that this financial statement is a complete and accurate statement of my income, assets, and expenses, and that I have no other additional income. I will provide supporting documentation of income and debts upon request.

Date

Signature