

IN THE DISTRICT COURT OF _____ COUNTY, NEBRASKA
(county where Complaint filed)

_____,)
(your full name))
Plaintiff,)
)
vs.)
)
_____,)
(spouse's full name))
Defendant.)

Case No. CI _____
(case number assigned by Clerk of Court)

**FINANCIAL AFFIDAVIT
FOR CHILD SUPPORT**

STATE OF NEBRASKA)
)
COUNTY OF _____)
(county where signed)

ss.

I, _____, am under oath and I state that
(first, middle and last name)

the following information is true:

1. I filed this action for divorce.

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Choose one:

<input type="checkbox"/> There is no existing order for support for the minor child(en) born to me and my spouse.
<u>OR</u>
<input type="checkbox"/> There is currently an order for the support of the minor child(ren) of me and my spouse through:

(name of court)

(case number)

(amount of support)

(number of children)

2. I am employed at _____.
(name of employer)

My current **gross** monthly income is \$_____. My income
(amount of income from all sources)

is based on (choose one):

<input type="checkbox"/> \$_____ per hour for _____ hours per week. (amount per hour) (number of hours)
<u>OR</u>
<input type="checkbox"/> \$_____ salary per month plus monthly bonuses of (amount per month)
\$_____ (average amount per month)

3. My spouse is employed at _____.
(name of employer)

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My spouse's current **gross** monthly income is \$_____.
(amount of income from all sources)

This income is based on (choose one):

<input type="checkbox"/> \$_____ per hour for _____ hours per week. (amount per hour) (number of hours)
<u>OR</u>
<input type="checkbox"/> \$_____ salary per month plus monthly bonuses of (amount per month)
\$_____. (average amount per month)

5. I believe I am capable of earning more income than is currently being earned. I base this on past employment at _____,
(name of employer)
where my gross income per month was \$_____, based on
(amount of income from all sources)

(choose one):

<input type="checkbox"/> \$_____ per hour for _____ hours per week. (amount per hour) (number of hours)
<u>OR</u>
<input type="checkbox"/> \$_____ salary per month plus monthly bonuses of (amount per month)
\$_____. (average amount of bonus)

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6. I believe my spouse is capable of earning more income than is currently being earned. I base this on past employment at _____, (name of employer), where my spouse's gross income per month was \$ _____, (amount of income from all sources) based on (choose one):

<input type="checkbox"/> \$ _____ per hour for _____ hours per week. (amount per hour) (number of hours)
<u>OR</u>
<input type="checkbox"/> \$ _____ salary per month plus monthly bonuses of _____. (amount per month) (average amount of bonus)

7. I do/do not (circle one) have health insurance available for the child(ren) through my employment at a cost of \$ _____ per month. (cost of coverage for child(ren) only)

8. My spouse does/does not (circle one) have health insurance available for the child(ren) through employment at a cost of \$ _____ per month. (cost of coverage for child(en) only)

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9. Check the box [] that applies:

<input type="checkbox"/> I contribute to a mandatory retirement plan. The minimum amount required as a contribution is \$_____. <small>(minimum contribution required)</small>
<u>OR</u>
<input type="checkbox"/> I do not contribute to a mandatory retirement plan.
<u>OR</u>
<input type="checkbox"/> I do not have a mandatory retirement plan, but I contribute to a voluntary retirement plan. My monthly contribution is \$_____. <small>(average contribution)</small>
<u>OR</u>
<input type="checkbox"/> I do not contribute to a voluntary retirement plan.

10. Check the box [] that applies:

<input type="checkbox"/> My spouse contributes to a mandatory retirement plan. The minimum amount required as a contribution is \$_____. <small>(minimum contribution required)</small>
<u>OR</u>
<input type="checkbox"/> My spouse does not contribute to a mandatory retirement plan.
<u>OR</u>
<input type="checkbox"/> My spouse does not have a mandatory retirement plan, but my spouse contributes to a voluntary retirement plan. My spouse's monthly contribution is \$_____. <small>(average contribution)</small>
<u>OR</u>
<input type="checkbox"/> My spouse does not contribute to a voluntary retirement plan.

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11. I have other children I am supporting.

Number of children: _____.
(number of other children)

Children's names and years of birth:

_____	_____
(name)	(year of birth)
_____	_____
(name)	(year of birth)
_____	_____
(name)	(year of birth)
_____	_____
(name)	(year of birth)

For the other child(ren) I am supporting, check the box [] that applies:

<input type="checkbox"/> If support is court-ordered:

(method of support)

(name of court)

(case number)

(amount of support)
<u>OR</u>
<input type="checkbox"/> If support is not court-ordered:

(method of support)

(name of other parent)

(gross monthly income of other parent)

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12. My spouse has other children to support.

Number of children: _____.
(number of spouse's other children)

Children's names and years of birth:

_____	_____
(name)	(year of birth)
_____	_____
(name)	(year of birth)
_____	_____
(name)	(year of birth)

For the other children my spouse is supporting, check the box [] that applies:

<input type="checkbox"/> If support is court-ordered:

(method of support)

(name of court)

(case number)

(amount of support)
<u>OR</u>
<input type="checkbox"/> If support is not court-ordered:

(method of support)

(name of other parent)

(gross monthly income of other parent)

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Plaintiff (print name)

Signature
(Must be signed in front of a Notary Public)

SUBSCRIBED AND SWORN to before me this ____ day of _____, 20__.

Notary Public