}.	IN THE DISTRICT COURT
}.	OF COUNTY, TEXAS
)	JUDICIAL DISTRICT

FINANCIAL INFORMATION STATEMENT

Cause No.

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(REQUIRED IN ALL FINANCIAL HEARINGS) **MONTHLY EXPENSES: MONTHLY EXPENSES (cont.) PRESENT** PRESENT YOUR CHILDREN HOUSING Child Care School Tuition, Fees House Mortgage/Rent Lunches Utilities Supplies (Gas, water, etc) Medical Expenses Maintenance & Repair (not covered by ins): Other Drugs Doctors, Dentists TRANSPORTATION Grooming Entertainment Gas, Cil, Maintenance Sports, Lessons, et. Car Payment/Lease Other: Parking Tolls **INSURANCE TOTAL EXPENSES:** Auto(s) Life INCOME: (attach current pay stubs) Other [ ] paid semimonthly [ ] paid monthly [ ] paid weekly [ ] paid every two weeks **GROCERIES** Food & Household Supplies **GROSS INCOME** YOUR PERSONAL **DEDUCTIONS** Withholding Tax Work Expenses: FICA Lunches, etc. Mandatory Retirement Dues, Fees, etc. Medical Insurance Medical Expenses Children (not paid by ins): Other Family Drugs Life Insurance Doctors, Dentists Other Clothing Cleaning, Laundry OTHER INCOME Grooming Entertainment **NET INCOME** Current Child Support Other: LIQUID ASSETS: I hereby certify that the answers to the above questions as CREDIT CARD/DEBTS listed are true and correct. Date Signed Monthly Attorney Fees