

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS FAMILY COURT

STATEMENT OF ASSETS · LIABILITIES · INCOME · EXPENSES

NAME (PRINT)	Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/>		EARNINGS	
			GROSS	NET
CIVIL ACTION — FILE NO.				

To be filed with complaints on divorce, bed & board, miscellaneous complaints and when an answer or modification is filed.

GROSS INCOME	INCOME DEDUCTIONS
1. Salary, Wages, Commissions, Bonus, Overtime (Attach List of Amounts) _____	12. Federal Income Tax _____
2. Pensions or Retirement _____	13. State Income Tax _____
3. Social Security _____	14. Social Security _____
4. Disability/Unemployment _____	15. State Disability _____
5. Public Assistance _____	16. Medical Insurance _____
6. Child/Spousal Support _____	17. Life Insurance _____
7. Dividends & Interest _____	18. Union & Other Dues _____
8. Rents (Receipts less Cash Expenses, Attach Schedule) _____	19. Retirement & Pension _____
9. Contributions to Household _____	20. Savings Plan _____
10. Income from Other Sources (Receipts less Total Cash Expenses, Attach Schedule) _____	21. Other Deductions _____
11. TOTAL GROSS INCOME _____	_____
	22. TOTAL DEDUCTIONS _____
	23. NET INCOME (11-22) _____

24. Withholding information: No. of Exemptions Claimed _____
 Marital Status _____

25. Medical Insurance: _____ Plan _____
 Dental Insurance: _____ Plan _____
 Life Insurance: _____ Plan _____
 Life/Owner: _____ Beneficiary _____
 Life/Face Amount: _____ Life/Cash Surrender Value _____

	PROPERTY UNDER APPLICANT'S CONTROL	NAME OF INSTITUTION	ACCOUNT #	HIGHEST BALANCE LAST 6 MONTHS	PRESENT VALUE
A.	Cash	_____	_____	_____	_____
B.	Checking Accounts	_____	_____	_____	_____
C.	Savings Accounts	_____	_____	_____	_____
D.	Credit Unions	_____	_____	_____	_____
E.	Other Accounts	_____	_____	_____	_____
27.	OTHER PROPERTY	_____	_____	_____	_____
A.	Stocks/Bonds	_____	_____	_____	_____
B.	Tangible Property	_____	_____	_____	_____
C.	Real Property	_____	_____	_____	_____
				TOTAL PROPERTY	_____

D. Yes No (I) (We) received from Rhode Island Housing and Mortgage Finance Corporation(RIHMFC) to buy the above listed real property.

(Attach Schedules for 26A-E & 27A-D (OVER)

SHOW TOTALS ATTACH SUPPORTING DETAIL, AND KEEP CURRENT UP TO THE COURT DATE

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS FAMILY COURT

STATEMENT OF ASSETS · LIABILITIES · INCOME · EXPENSES II

(FOR EACH ITEM LISTED, FILL IN ONLY THE WEEKLY, MONTHLY, OR YEARLY COLUMN)

NEEDS & EXPENSES	WEEKLY	MONTHLY	YEARLY	AMT LAST PAID
28. Rent	_____	_____	_____	_____
29. Grocery, Canned Goods, Meat	_____	_____	_____	_____
30. Dairy Products, Bread, Rolls	_____	_____	_____	_____
31. Heat (Coal, Gas, Oil)	_____	_____	_____	_____
32. Electricity	_____	_____	_____	_____
33. Propane/Bottled Gas	_____	_____	_____	_____
34. Telephone	_____	_____	_____	_____
35. Clothing	_____	_____	_____	_____
36. Medical, Medicines	_____	_____	_____	_____
37. Dental	_____	_____	_____	_____
38. Personal, Cosmetics, Haircut	_____	_____	_____	_____
39. Laundry, Dry Cleaning	_____	_____	_____	_____
40. Car Insurance, Registration	_____	_____	_____	_____
41. Gas, Oil, Maintenance & Auto	_____	_____	_____	_____
42. Spending Money	_____	_____	_____	_____
43. Traveling Expenses	_____	_____	_____	_____
44. Life Insurance	_____	_____	_____	_____
45. Cigarettes	_____	_____	_____	_____
46. Union Dues	_____	_____	_____	_____
47. Blue Cross	_____	_____	_____	_____
48. Legal Fees	_____	_____	_____	_____
49. _____	_____	_____	_____	_____
OTHER EXPENSES				
50. Mortgage	_____	_____	_____	_____
51. House Taxes	_____	_____	_____	_____
52. Home Insurance	_____	_____	_____	_____
53. Upkeep for House	_____	_____	_____	_____
54. Water Bill	_____	_____	_____	_____
55. _____	_____	_____	_____	_____
LOANS & OBLIGATIONS				
56. Auto Loan Balance _____	_____	_____	_____	_____
Auto Year _____				
Auto Make _____				
57. _____	_____	_____	_____	_____
58. _____	_____	_____	_____	_____
59. _____	_____	_____	_____	_____
TOTAL	_____	_____	_____	_____
60. Divide Monthly by 4.3	_____			
61. Divide Yearly by 52	_____			
62. GRAND TOTAL	_____			

SIGNATURE PLAINTIFF/DEFENDANT

SUBSCRIBED AND SWORN TO ME ON THIS ____ DAY OF _____, 20__

NOTARY PUBLIC