

1 Current Address: _____ From _____ To Present

2 Prior Address: _____ From _____ To _____

3 Prior Address: _____ From _____ To _____

4 Prior Address: _____ From _____ To _____

5
6 **EMPLOYMENT - INCOME**

7 I currently work [] Full Time; [] Part Time; or am [] Unemployed

8 If unemployed, how long since you last worked? _____

9 My employer is (name, address, and telephone number): _____

10 _____, and I have worked there since: _____.

11 I am paid \$ _____ dollars per hour, and work approximately _____ hours per week.

12 My **gross** is \$ _____ per [] Weekly; [] Bi-weekly; or [] Monthly.

13 My **net** take home pay is \$ _____ per [] Weekly; [] Bi-weekly; or [] Monthly.

14 I receive \$ _____ per _____, which is for other income.

15 (List source of other income, i.e. rent, social security, disability, retirement, welfare, child support, spousal support etc.)

16 _____.

17 I am disabled [] Yes [] No. Nature of disability: _____.

18
19 **CASH ASSETS**

20 I have \$ _____ cash on hand. I have these bank accounts:

<u>Name of Bank</u>	<u>Type of Account</u>	<u>Average Balance</u>
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_____	_____	_____

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REAL PROPERTY

(List all that you have an interest in.)

<u>Address</u>	<u>Description</u> (Home, Farm, Vacant, Etc.)	<u>Estimated Value</u>	<u>What is Owed?</u>
_____	_____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____

OTHER ASSETS

List any other assets and estimated value not listed above (in excess of \$250.00)

PERSONAL PROPERTY

I own the following personal property (list all items worth more than \$250.00 such as vehicles, guns, tools, computers, furniture, 4-wheelers, etc.)

<u>ITEM</u>	<u>ESTIMATED VALUE</u>	<u>WHAT IS OWED ON IT?</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

HOUSEHOLD INFORMATION

LIST ALL PERSONS WHO RESIDE IN THE HOME:

<u>NAME</u>	<u>AGE</u>	<u>Estimated Take Home Pay from All Sources</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do any of the above listed persons contribute to household expenses? ____ Yes ____ No

1 If yes, please list name: _____

2 Approximate Amount: _____ per month.

3 **MARITAL STATUS**

4 I am currently [] Divorced [] Separated [] Married [] Single

5 If married, list spouses full name: _____ He/She currently

6 resides at: _____, and has lived there since _____.

7 He/She [] IS [] IS NOT employed.

8 If so, he/she is employed at _____ [] FULL TIME [] PART-TIME.

9 His/Her current take home pay is approximately \$ _____ per _____.

10 He/She and I currently [] DO [] DO NOT have a pending matter in any court. If so,

11 please state the name of the court and pending action/case number: _____

12 ***Except in unusual cases, the court will not consider appointing an attorney in a**
13 **divorce case and/or child custody case if your spouse or the father/mother of the**
14 **child(ren) is employed and earns in excess of \$2,700.00 gross income per month until**
15 **an application for attorney fees and costs is first heard by the court. You should**
16 **consult an attorney. See NRS 125.040, NRS 125C.250.**

17 _____

18 **CHILDREN**

19 My total number of children is: _____ (from all relationships)

20 Name _____ age: ____ Resides with: _____

21 Name _____ age: ____ Resides with: _____

22 Name _____ age: ____ Resides with: _____

23 Name _____ age: ____ Resides with: _____

24 I **PAY** child support for _____ child(ren), in the amount of \$ _____ per month.

25

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1 I RECEIVE child support for _____ child(ren), in the amount of \$_____ per month.

2 **PUBLIC ASSISTANCE**

3 I am receiving aid for myself/family in the amount of \$_____ per _____.

4 I became a recipient on _____. OR I have applied for aid on _____, and
5 expect to begin receiving aid on or about _____. My aid will discontinue as
6 of _____, 20____.

8 **TOTAL MONTHLY HOUSEHOLD LIVING EXPENSES**

9 (Include in amount expenses paid for children)

- 10 1. Rent or house payment \$_____
- 11 1.a Home owners insurance (\$_____); real property taxes (\$_____)
- 12 if not included in house payment \$_____
- 13 2. Propane / Oil \$_____
- 14 3. Electricity \$_____
- 15 4. Sewer/Water \$_____
- 16 5. Cable/TV \$_____
- 17 6. Telephone / Cell Phone \$_____
- 18 7. Food \$_____
- 19 8. Clothing \$_____
- 20 9. Laundry and cleaning \$_____
- 21 10. Medical/Dental \$_____
- 22 10(a) Medical/Dental insurance \$_____
- 23 (b) Unreimbursed medical expenses \$_____
- 24 11. Life insurance \$_____
- 25 12. Auto \$_____
- Gas and oil \$_____
- Insurance \$_____

1 13. Child Care \$ _____

2 14. Pets \$ _____

3 15. Education or occupational training for
Yourself/spouse \$ _____

4 16. Spousal Support \$ _____

5 17. Other expenses or debts: (Not included above under Debts Owed)

6 _____ \$ _____

7 _____ \$ _____

8 _____ \$ _____

8 TOTAL MONTHLY EXPENSES \$ _____

CUSTODY CASES

If you are seeking custody or a change of custody, please list for each child:

11 Child's Name: _____ Where the child lives _____
Who does the child live with? _____ How long has the child lived there? _____

12

13 Child's Name: _____ Where the child lives _____
Who does the child live with? _____ How long has the child lived there? _____

14

15 Child's Name: _____ Where the child lives _____
Who does the child live with? _____ How long has the child lived there? _____

16

17 Child's Name: _____ Where the child lives _____
Who does the child live with? _____ How long has the child lived there? _____

18 If more space is needed, please write on the back of the prior page.

If the child's other parent is not your current spouse, list:

19 Other parents full name and address: _____

20 _____

21 How long has he/she lived there? _____

22 He/she [] is [] is not employed. If yes, he/she is employed at _____
[] full [] part-time.

23 His/her take home pay is approximately \$ _____ per _____.

24 He/she and I currently [] do [] do not have a pending matter in any court. If so, list the
name of the court and pending action/case number.

25 _____

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At this time I cannot obtain financial aid from any family member or friend to pay for legal services.

(DOCUMENT MUST BE NOTARIZED)

I, _____, hereby swear under penalty of perjury the information I have provided to the court on this documents is true and correct as of this date, and I have personally completed this form.

Dated this _____ day of _____, 20____.

Signature of Affiant

SUBSCRIBED AND SWORN to before me by _____

this _____ day of _____, 20____.

Notary Public