## COURT OF COMMON PLEAS COUNTY, OHIO

		· .	Case No.			
Plaintiff/Petitioner 1			Judge			•
v./and			Magistrate			
Defendant/Petitioner 2		<del></del>				
Instructions: Check local court rule This affidavit is used to make comple spousal support amounts. Do not lea figures for any item, give your best e	ete dis	closure of income, e v category blank. W	xpenses and mon ′rite "none" where	appropriat	e. It you do	not know exact
	4FFI[	DAVIT OF INCO	ME AND EXPE	NSES		
Affidavit of						•
		(Pri	nt Your Name)			
Date of ma				on		
SECTION I - INCOME						Chausais Namo
. /			Your Name		· □ Vo	Spouse's Name s  \[ \sum \text{No} \]
Employed		☐ Yes ☐	] NO	,	re	2 🗔 MO
Employer	-					
Payroll address			4	_		
Payroll city, state, zip		☐ 12 ☐24 ☐	26 🗆 52	Г		1  26  52
Scheduled paychecks per year				_		
A. <u>YEARLY INCOME, OVERT</u>	IME, 0	COMMISSIONS A				
			Your Name		•	_Spouse's Name
	\$ -	·				<u> </u>
Base yearly income	\$ _		_ 2 years ago			
	\$_		_ Last year	20	\$	
	\$		3 vears ago	20	· \$	
Yearly overtime, commissions	s		_ 2 years ago			,
and/or bonuses	Ι φ -		_ Lost vear	20		

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B. <u>COMPUTATION OF CURR</u>	ENT INCOME	
	Your Name	Spouse's Name
Base yearly income	\$	\$\$
Average yearly overtime, commissions and/or bonuses over last 3 years (from part A)	\$	\$\$
Unemployment compensation	\$	\$
Disability benefits  ☐ Workers' Compensation  ☐ Social Security  ☐ Other:	\$	\$\$
Retirement benefits  Social Security  Other:	\$	\$\$
Spousal support received	\$	\$
Interest and dividend income (source)	\$	\$
Other income (type and source)		
	\$	\$
TOTAL YEARLY INCOME	\$	\$
	I	
Supplemental Security Income (SSI) or public assistance	\$	\$

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Court-ordered child support that you receive for minor and/or dependent child(ren) not of the marriage or relationship

## SECTION II – CHILDREN AND HOUSEHOLD RESIDENTS

Minor and/or dependent child(ren) who are to	from this marriage or relation	snip.	•
Name	Date of birth	Living with	
		·	
		,	
In addition to the above children there is/are	e in your household:		
adult(s)			•
other minor and/or deper	dent child(ren).		
SECTION III – EXPENSES			
•			•
List monthly expenses below for your prese	nt household.		•
A. MONTHLY HOUSING EXPENSES			
Rent or first mortgage (including taxes and	l insurance)		
Real estate taxes (if not included above)	·	\$	
Real estate/homeowner's insurance (if not	included above)	\$ <u>**</u>	e de la companya de La companya de la co
Second mortgage/equity line of credit			
Utilities			
o Electric		. \$	
o Gas, fuel oil, propane		\$ <u></u>	
<ul> <li>Water and sewer</li> </ul>	an Fermana and San	\$ r	য় প্ৰদেশ সামিক্তাৰ স্থানিক বিষয়ে কটি বুলি
o Telephone	19 - 12의 기업에 된 기업을 생각하는 것이다. 18일은 경기에는 1922의 중국으로 2012의 개	\$	
o Trash collection		<b>\$</b>	
o Cable/satellite television		\$ <u></u>	
Cleaning, maintenance, repair	Turning type House Health (mile)		
Lawn service, snow removal		\$ <u></u>	
Other:	and any one final medical real description being the		
		\$ <u></u>	
	ТОТ	AL MONTHLY: \$	

## B. OTHER MONTHLY LIVING EXPENSES

Food	other)	
<ul> <li>Groceries (including food, paper, cleaning products, toiletries,</li> </ul>	, 00101)	
o Restaurant	e in die een trytse een ee 🖣	Produce a second above the second of the second
Transportation		
o Vehicle loans, leases	inggalarakin dari s	φ <u></u>
<ul> <li>Vehicle maintenance (oil, repair, license)</li> </ul>		φ 
o Gasoline		ψ <u></u>
<ul> <li>Parking, public transportation</li> </ul>		Ψ The second of the second o
Clothing		\$
o Clothes (other than children's)		\$
o Dry cleaning, laundry		
Personal grooming	en e	
o Hair, nail care		•
o Other		
Cell phone		\$
Internet (if not included elsewhere)		\$
Other	MONTHLY	\$
	TOTAL MONTHLY	Ψ
C. <u>MONTHLY CHILD-RELATED EXPENSES</u> (for children of the marriage or relationship)	اد د دود د فراندین در	
Work/education-related child care		\$
Other child care	u ja taus elikulusi 1711	\$
Unusual parenting time travel		\$
Special and unusual needs of child(ren) (not included elsewhere)		
그 이 문장 경쟁들에 사용하면까 그는 나이 없었다. 그는 나는 이 등대는 그런 말이 되었다. 그 가게 없었다. 그 이 가게 되는데 그 것도 나가 하게 되었다.		\$
		\$ ————————————————————————————————————
School supplies Child(ren)'s allowances		\$
Extracurricular activities, lessons		
School lunches		\$
		\$
Other	TOTAL MONTHLY	\$

D. <u>INSURANCE PREMIUMS</u>		
		<u> </u>
Auto Health	\$ \$	
Disability		
Renters/personal property (if not included in part A above)	**************************************	<u> zastik milik ez</u>
Other	TOTAL MONTHLY \$	
	TOTAL MONTHLY \$	
E. MONTHLY EDUCATION EXPENSES		
Tuition		: = = ·
<ul><li>Self</li><li>Child(ren)</li></ul>		
Books, fees, other		
College loan repayment		<u> *1 &amp; *1 *</u>
Other	\$ 	
	TOTAL MONTHLY: \$	
F. MONTHLY HEALTH CARE EXPENSES (not covered by insurance)	TOTAL MONTHE.	
Physicians	\$	
Dentists Optometrists/opticians	\$	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Prescriptions	\$ •	
Other .	\$	
	TOTAL MONTHLY: \$	
G. MISCELLANEOUS MONTHLY EXPENSES		er edeler film
Extraordinary obligations for other minor/handicapped child(re	en) (not stepchildren).	
Child support for children who were not born of this marriage not adopted of this marriage	or relationship and were	
Spousal support paid to former spouse(s)	<b>\$</b>	<u> Sandara Endirecto de la Sandara de la S</u>
Subscriptions, books		
Entertainment		<u> 2888 (4984)</u>

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charitable contributions	en e	\$	
nemberships (associations, clubs)		\$ <u></u>	<u> </u>
ravel, vacations	i. Zusu Maja — Istolija	. \$ 	
ets		\$	
Gifts	(च्यान हार्या केंद्राप्त गामक प्रदूर्ण	\$ [TREAT - TOXAS	
sankruptcy payments		\$	The state of the s
Attorney fees		\$ vantin i Ya	
Required deductions from wages (excluding taxes, Social Securit type)	ty and Medicar	·—·—	
Additional taxes paid (not deducted from wages) (type)		<b>\$</b> 	
Other		<u> </u>	<u>al di Pali in Pengerandi .</u>
		\$	
	TOTAL MON	ITHLY: \$ _	
ער איני איני איני איני איני איני איני אינ	nants		
(Do not repeat expenses already listed.) Examples: car, credit card, rent-to-own, cash advance payn To whom paid Purpose	nents Balance	due N	Monthly payment
Examples: car, credit card, rent-to-own, cash advance pay-	ments Balance \$	due N	Monthly payment
Examples: car, credit card, rent-to-own, cash advance pay-	Balance	due M	Nonthly payment
Examples: car, credit card, rent-to-own, cash advance pay-	\$ Balance	due M	Monthly payment
Examples: car, credit card, rent-to-own, cash advance pay-	S S S S S S S S S S S S S S S S S S S	\$\$ \$\$	Monthly payment
Examples: car, credit card, rent-to-own, cash advance pay-	S S S S S S S S S S S S S S S S S S S	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Monthly payment
Examples: car, credit card, rent-to-own, cash advance pay-	S S S S S S S S S S S S S S S S S S S	\$ \$ \$ \$ \$ \$	Nonthly payment
Examples: car, credit card, rent-to-own, cash advance pay-	S S S S S S S S S S S S S S S S S S S	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Monthly payment
Examples: car, credit card, rent-to-own, cash advance pay-	S S S S S S S S S S S S S S S S S S S	\$ \$ \$ \$ \$ \$	nonthly payment
To whom paid Purpose	S S S S S S S S S S S S S S S S S S S	\$ \$ \$ \$ \$ \$	nonthly payment
To whom paid Purpose	S S S S S S S S S S S S S S S S S S S	\$ \$ \$ \$ \$ \$ \$ \$	Monthly payment
To whom paid Purpose	S S S S S S S S S S S S S S S S S S S	\$ \$ \$ \$ \$ \$	Monthly payment
To whom paid Purpose	S S S S S S S S S S S S S S S S S S S	\$ \$ \$ \$ \$ \$ \$ \$	Nonthly payment
To whom paid Purpose	S S S S S S S S S S S S S S S S S S S	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Monthly payment
To whom paid Purpose	\$	\$ \$ \$ \$ \$ \$ \$ \$	Nonthly payment
To whom paid Purpose	S S S S S S S S S S S S S S S S S S S	\$ \$ \$ \$ \$ \$ \$ \$ \$	Monthly payment

## OATH

(Do not sign until notary is present.)

(Bo not eight antil 1)	otary to precent.)
I, (print name) document and, to the best of my knowledge and belief, the	, swear or affirm that I have read this
true, accurate and complete. I understand that if I do not to	
	·
	Your Signature
Sworn before me and signed in my presence this d	lay of
	Notary Public
	My Commission Expires: