

## FINANCIAL DECLARATION STATEMENT

<b>CHITIMACHA TRIBAL COURT</b>	<b>DOCKET NO.:</b> _____
<b>Petitioner:</b>	<b>In Re:</b>
<b>Declaration on behalf of Petitioner</b>	<b>Hearing Date:</b>
<b>Hearing: Petition for Disbursement of Funds</b>	<b>Marital Status:</b>

NAMES OF CHILDREN AND/OR DEPENDANTS	AGE / D/O/B	List prior Court action, if any

**Gross Monthly Income**

(if paid weekly, multiply by 4.3; if bimonthly by 2.15)

From wages	\$	_____
Public Assistance or Child Support	\$	_____
Per Capita Payments	\$	_____
Scholarship Funds	\$	_____
Any Other Income, Specify:	\$	_____
Specify Source _____		

**Deductions from Wages:**

Federal Income Taxes	\$	_____
State Income Taxes	\$	_____
Social Security	\$	_____
Medical Insurance	\$	_____
Credit Union or Pension Fund	\$	_____
Other	\$	_____

**Net Monthly Income, Take-Home Pay** \$ \_\_\_\_\_

**Employees must bring check stubs to Court**

**Assets:**

House (Value) \$ \_\_\_\_\_  
Lot (Value) \$ \_\_\_\_\_  
Car (Value) \$ \_\_\_\_\_

**Total Monthly Expenses:**

Rent or Mortgage Pmt. \$ \_\_\_\_\_  
Residential Taxes & Ins. \$ \_\_\_\_\_  
Food & Household Supplies \$ \_\_\_\_\_  
Water, Electricity, Gas \$ \_\_\_\_\_  
Telephone \$ \_\_\_\_\_  
Clothing \$ \_\_\_\_\_  
Medical & Dental \$ \_\_\_\_\_  
Insurance \$ \_\_\_\_\_  
Child Care \$ \_\_\_\_\_  
School Expenses \$ \_\_\_\_\_  
Entertainment & Expenses \$ \_\_\_\_\_  
Gasoline, Oil, Auto Repairs \$ \_\_\_\_\_  
Installment Payments  
Auto \$ \_\_\_\_\_  
Banks \$ \_\_\_\_\_  
Finance Companies \$ \_\_\_\_\_  
Credit Cards:  
\_\_\_\_\_ \$ \_\_\_\_\_  
Name  
\_\_\_\_\_ \$ \_\_\_\_\_  
Name  
\_\_\_\_\_ \$ \_\_\_\_\_  
Name

**TOTAL MONTHLY EXPENSES:** \$ \_\_\_\_\_

On this \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_, came and appeared the  
Petitioner, who, on being sworn, and under penalty of perjury, declared that the above declaration  
is true and correct.

\_\_\_\_\_  
**PETITIONER**

\_\_\_\_\_  
**TRIBAL COURT CLERK OR NOTARY**