

Summary of Household Income and Expenses

Use this form when:

You are the Plaintiff in a civil case and

- You are filing a **Verified Motion to Waive Pre-Payment of Filing Fees and Court Costs**.

You must attach this **Summary of Household Income and Expenses** to the **Verified Motion to Waive Pre-Payment of Filing Fees and Court Costs**.

You are the Defendant in a criminal case and

- You are filing a **Verified Motion to Appoint Pauper Counsel** (Public Defender)

You must attach this **Summary of Household Income and Expenses** to the **Verified Motion to Appoint Pauper Counsel (Public Defender)**.

This Summary has two versions:

- A shorter version if your household includes one or two adults regularly living in your home.
- A longer version if your household includes three or more adults regularly living in your home. Adults are persons age 18 or older.

SCROLL DOWN FOR Summary of Household Income and Expenses

The first version is for households with one or two adults.

The second version is for households with three or more adults.

SUMMARY OF HOUSEHOLD INCOME AND EXPENSES

(attach to Verified Motion to Waive Pre-Payment of Filing Fees and Court Costs or to Appoint Pauper Counsel)

(1) List all the persons age 18 and older who live in or stay at your home in regular basis:

Adult Household Member #1 [Myself]	Adult Household Member #2
Name: _____	Name: _____
Address _____	Address _____
Address _____	Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Telephone (_____) _____	Telephone (_____) _____
Email _____	Email _____
Age _____ Date of Birth _____	Age _____ Date of Birth _____

(2) List employment, wages and all other sources of income. Include income and benefits you receive on behalf of any person, child or adult, who lives or stays in this home regularly.

Myself	Weekly amount	Adult Member #2	Weekly amount
Name of Employer		Name of Employer	
Weekly gross income (before taxes)	\$	Weekly gross income (before taxes)	\$
Unemployment compensation	\$	Unemployment compensation	\$
TANF Benefits	\$	TANF Benefits	\$
Food Stamps	\$	Food Stamps	\$
Housing Assist (value)	\$	Housing Assist (value)	\$
SSI/SSD Benefits	\$	SSI/SSD Benefits	\$
Workers Compensation	\$	Workers Compensation	\$
Other Retirement or Pension	\$	Other Retirement or Pension	\$
Child Support	\$	Child Support	\$
Other (specify)	\$	Other (specify)	\$
TOTAL	\$	TOTAL	\$

(3) Other Employment Information

Myself	Adult Member #2
If not working, why not?	If not working, why not?
When and where last work? For how long?	When and where last work? For how long?
What efforts have been made to find a job?	What efforts have been made to find a job?

(4) List all the persons age 17 and younger who live in or stay at your home on regular basis:

	Name	Age	Date of Birth	Name of Other Parent
1				
2				
3				
4				
5				

(5) List your weekly household expenses:

Item	Amount	Item	Amount
Rent or Mortgage	\$	Other insurance	\$
Utilities (gas, water, elec)	\$	Personal hygiene and care	\$
Cell phone	\$	Entertainment	\$
Food and snacks	\$	Internet, cable and television fees	\$
Child care	\$	Tobacco – Cigarettes	\$
Child support	\$	Loan payments	\$
Transportation (bus or car)	\$	Furniture/appliance rental	\$
Car insurance	\$	Miscellaneous	\$
Medical and dental bills	\$	Credit card payments	\$
Medical insurance	\$	Other	\$
Clothing	\$	TOTAL	\$

(6) Bank Accounts and Credit Card Accounts

Type of Account (checking-savings-CD-credit card)	Name of Bank or Financial Institution or Credit Card Company	Balance
Savings and Checking		\$
Credit card (if no balance, credit limit)		\$
Credit card (if no balance, credit limit)		\$
401(K) or other retirement account		\$
Certificate of Deposit/Other		\$

(7) Other Assets and Property Leased or Owned

Item	Description (Year, Make, Model)	Value
Real estate - property		\$
Trucks, car, motorcycle, moped		\$
Boats, RVs, ATVs, etc.		\$
Furniture – appliances		\$
TVs and gaming systems		\$
Tools		\$
Jewelry		\$
Stocks and Bonds/Other		\$

(8) Other

Question	YES	NO	Value
Are you the beneficiary of a trust?			\$
Have you inherited any money or property within the last 12 months?			\$
Have you won any money or property valued at \$100 or more within the last 12 months? (bingo, lottery, gambling, etc.)			
Does anyone owe you any money? How much?			\$
Did you file an income tax return for last year?			\$
If so, do you have an income tax refund check due?			\$

(9) List any other information or facts or special circumstances you want the Judge to know.

_____, 20_____
Date

Signature

SUMMARY OF HOUSEHOLD INCOME AND EXPENSES

(attach to Verified Motion to Waive Pre-Payment of Filing Fees and Court Costs or to Appoint Pauper Counsel)

(1) List all the persons age 18 and older who live in or stay at your home in regular basis:

Adult Household Member #1 [Myself]	Adult Household Member #3
Name _____	Name _____
Address _____	Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Telephone (_____) _____	Telephone (_____) _____
Email _____	Email _____
Age _____ Date of Birth _____	Age _____ Date of Birth _____

Adult Household Member #2	Adult Household Member #4
Name _____	Name _____
Address _____	Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Telephone (_____) _____	Telephone (_____) _____
Email _____	Email _____
Age _____ Date of Birth _____	Age _____ Date of Birth _____

(2) List employment, wages and all other sources of income. Include income and benefits you receive on behalf of any person, child or adult, who lives or stays in this home regularly.

Myself	Weekly amount	Adult Member #3	Weekly amount
Name of Employer		Name of Employer	
Weekly gross income (before taxes)	\$	Weekly gross income (before taxes)	\$
Unemployment compensation	\$	Unemployment compensation	\$
TANF Benefits	\$	TANF Benefits	\$
Food Stamps	\$	Food Stamps	\$
Housing Assist (value)	\$	Housing Assist (value)	\$
SSI/SSD Benefits	\$	SSI/SSD Benefits	\$
Workers Compensation	\$	Workers Compensation	\$
Other Retirement or Pension	\$	Other Retirement or Pension	\$
Child Support	\$	Child Support	\$
Other (specify)	\$	Other (specify)	\$
TOTAL	\$	TOTAL	\$

Adult Member #2	Weekly amount	Adult Member #4	Weekly amount
Name of Employer		Name of Employer	
Weekly gross income (before taxes)	\$	Weekly gross income (before taxes)	\$
Unemployment compensation	\$	Unemployment compensation	\$
TANF Benefits	\$	TANF Benefits	\$
Food Stamps	\$	Food Stamps	\$
Housing Assist (value)	\$	Housing Assist (value)	\$
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Workers Compensation	\$	Workers Compensation	\$
Other Retirement or Pension	\$	Other Retirement or Pension	\$
Child Support	\$	Child Support	\$
Other (specify)	\$	Other (specify)	\$
TOTAL	\$	TOTAL	\$

(OVER)

(3) Other Employment Information

Myself	Adult Member #3
If not working, why not?	If not working, why not?
When and where last work? For how long?	When and where last work? For how long?
What efforts have been made to find a job?	What efforts have been made to find a job?

Adult Member #2	Adult Member #4
If not working, why not?	If not working, why not?
When and where last work? For how long?	When and where last work? For how long?
What efforts have been made to find a job?	What efforts have been made to find a job?

(4) List all the persons age 17 and younger who live in or stay at your home on regular basis:

	Name	Age	Date of Birth	Name of Other Parent
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2				
3				
4				
5				
6				

(5) List your weekly household expenses:

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Child support	\$	Loan payments	\$
Transportation (bus or car)	\$	Furniture/appliance rental	\$
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Clothing	\$	TOTAL	\$

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Type of Account (checking-savings-CD-credit card)	Name of Bank or Financial Institution or Credit Card Company	Balance
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Tools		\$
Jewelry		\$
Stocks and Bonds		\$
Other		\$
		\$
		\$
		\$

(8) Other

Question	YES	NO	Value
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Have you won any money or property valued at \$100 or more within the last 12 months? (bingo, lottery, gambling, etc.)			\$
Does anyone owe you any money? How much?			\$
Did you file an income tax return for last year? If so, do you have an income tax refund check due?			\$

(9) List any other information or facts or special circumstances you want the Judge to know.

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Signature